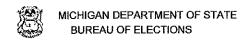


CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and c	l signed by andidat e .	3. This Statement covers From	10/21/2019 to	12/31/2019			
1. Committee I.D. Number		4. Candidate Last Name	First Name	M.I.			
C-2019-013		Eyer	Jennifer				
		4a. Office Sought Including Dis	strict # or Community Serve	d (If applicable)			
2. Committee Name		Board Member - Local					
Vote Jen Eyer		4b. County of Residence WASHTENAW					
5. Committee's Mailing Address 1831 Covington Drive Ann Arbor, MI 48103 Area Code and Phone (734) 846-1566 If the address in this box is different from the comm	iltee	6. Treasurer's Name & Reside Joan Lowenstein 502 Burson Pl Ann Arbor, MI 48104		WASHTENAW COUNTY. 1001 JAN 29 A COUNTY CLERK/RECOUNTY.			
mailing address on the Statement of Organization, be sent to this address by the filing official.	Area Code & Phone (734) 70		And D S				
7. Treasurer's Business Address Same		8. Designated Record Keeper Designated Record Keeper)	's Name and Address (If the	e committee has a K			
Area Code and Phone		Area Code and Phone					
		Area oode and mone	9e. Dissolution of Cand	idate Committee			
9. TYPE OF STATEMENT 9a. Pre-Election OR 9b. Post-Election Pre-Election or Post-Election Statement relates to:			by the committee to the ca	I/We certify any outstanding debt andidate or his or her spouse is here n, and no longer collectible from nittee has no oustanding assets, any oustanding debt.			
Primary				, , ,			
General	October C	Quarterly	Further, if the dissolution c considered a request for the	annot be granted, that this be ne Reporting Waiver.			
Convention Special School		al Statement (2019) Coverage Year	Effective date of	dissolution			
Caucus .	Com	ndment to Campaign Statement plete Item 9a, 9b, 9c or 9e to te which Statement is being ded.)	Note: The disposition of re Schedule 1B and the Sum	esidual funds must be reported on imary Page.			
Date of Election, Convention or Caucus							
August 4, 2020							
10. Verification: I\We certify that all reasonable diligonary the contents are true, it is to be something the	ence was used accurate and co	in the preparation of this statemomplete.	ent and attached schedules	(if any) and to the best of			
Current Treasurer or Designated Record keeper Type or Print Name		/ Stangture	Date	1/28/20			
Jennifer Eyer		, And a	Date	1-28-20			
Type or Print Name		/Signature					



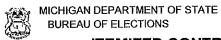


1. Committee I.D. Number <u>G-2019-013</u>

C-201	19-0	13
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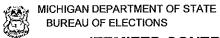
SUMMARY PAGE CANDIDATE COMMITTEE

CANDIDA I L COMMINI I I LL	Calumn I	Column II
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions	5.010.00	
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 5,010.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	00.040.00
c. Subtotal of "Contributions"	(3c.) \$ 5,010.00	(18.) \$ 22,840.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ 5,010.00	(20.) \$ 22,840.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ 450.00	(21.) \$ 1,984.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>316.00</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ 316.00	(23.) \$ 2,859.36
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS	(10b.) \$	
(Add Line 10a + Line 10b)	(11.) \$	(24.) \$
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$	(24.) \$
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ 15,286.64	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$ 5,010.00	
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$_20,296.64	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ 316.00	
17. ÈNDING BALANCÉ	(17.) \$ 19,980.64	*
(Subtract line 16 from line 15)	(11.) 4	



CANDIDATE COMMITTEE

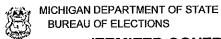
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/21/2019 Name & Address: Brenda Strayer		
225 Wildemere Dr. Mason, MI 48854	_{\$} 100	_{\$} 500
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Not employed Employer	***************************************	
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/24/2019 Name & Address		
Heidi Mitchell		
PO Box 70 Port Costa, CA 94569	_{\$} 250	\$ 250
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Partner Employer Prentice Partners of Ann Arbor LI		
Business Address 1505 White St, Ann Arbor, MI 48104		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 11/06/2019		111
Name & Address: James Pyke		
912 Pomona Road Ann Arbor, MI 48103	_{\$} 10	_ _{\$} 50
	Click Here	for Memo Itemization
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 11/07/2019	1	
Name & Address Tim Richards		
1014 Rose Ave Ann Arbor, MI 48104	_{\$} 5	275
Alli Alboi, iiii 40104	\$	\$
5. If over \$100.00 cumulative, please provide:	Click Here t	for Memo Itemization
Occupation Not employed Employer		
Business Address		
Type of Contribution: 🗸 Direct Loan from a person Fund Raiser	1	
Page Subtotal	365.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
	Enter this total or line 3a of Summa	
Page of 5	Page.	•



CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 11/07/2019 Name & Address: Jean Leverich 912 Pomona Rd	_	
Ann Arbor, MI 48103	_{\$} 10	_{\$} 150
5. If over \$100.00 cumulative, please provide: Occupation Social worker Employer CEW at Univ of Michigan	Click Her	e for Memo Itemization
Business Address 330 E Liberty, Ann Arbor, MI 48104		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 11/11/2019		
Name & Address Stephanie White 2115 Winchell Dr Ann Arbor, MI 48104	_{\$} 100	_s 525
AURI AUDOL, MIL TO TOT		<u> </u>
5. If over \$100.00 cumulative, please provide:	Click Here	e for Memo Itemization
Occupation Exec Director Employer Equality Michigan		
Business Address 19641 W Seven Mile Rd, Detroit, MI 48219		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 11/21/2019 Name & Address:	_	
Brenda Strayer 225 Wildemere Dr Mason, MI 48854	_{\$} 100	<u>\$</u> 500
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Not employed Employer		
Business Address Type of Contribution:		
Name & Address Joan Lowenstein		
502 Burson Pl Ann Arbor, Ml 48104	_{\$} 50	_{\$} 200
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Retired Employer		
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser		
Page Subtota	260.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule	E .	
Page 2 of 5	Enter this total or line 3a of Summ Page.	

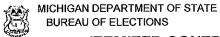
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CANDIDATE COMMITTEE

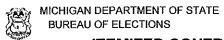
Enter contributor's name and address. If contribution is from an individual, enter last name, first nan middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	me, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 11/03/2019 Name & Address: John Farah 3756 N. Michael Rd.		000
Ann Arbor, MI 48103	_{\$} 200	_{\$} 200
5. If over \$100.00 cumulative, please provide: Occupation Dentist Employer Self	Click Here	for Memo Itemization
Business Address 3100 W. Liberty, Suite A, Ann Arbor, MI 48103	_	
Type of Contribution: 🗸 Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 11/12/2019		
Name & Address Kevin McKinney 216 N. Chestnut St. Lansing, MI 48933	_{\$} 200	_{\$} 200
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Principal Employer McKinney & Associates		
Business Address 216 N. Chestnut St., Lansing, MI 48933	-	
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 11/13/2019 Name & Address: John Sellek		
4686 Kingswood Dr.	_{\$} 50	_{\$} 50
Brighton, MI 48116	Click Horo	for Memo Itemization
5. If over \$100.00 cumulative, please provide:	Click nere	or Memo Remization
Occupation Employer	_	
Business Address		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 11/12/2019 Name & Address Terri Fitzpatrick	· · · · · · · · · · · · · · · · · · ·	
1503 Waxwing Dr. Dewitt, MI 48820	_{\$} 250	_{\$} 250
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation COO Employer Boji Group	<u> </u>	
Business Address 124 W. Allegan, Ste. 2100, Lansing, MI 48933	_	
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Su	\$700.00	
Grand Total of All Schedule (Complete on last page of Sche	edule) L	
Page 3 of 5	Enter this total or line 3a of Summa Page.	

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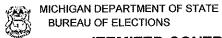
CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 11/11/2019 Name & Address: Amber Shinn 302 E Cesar E Chavez, Apt D		
Lansing, MI 48906	_{\$} 100	_{\$} 100
5. If over \$100.00 cumulative, please provide:	Click Here	e for Memo Itemization
Occupation Program Manager Employer URC MI		
Business Address 500 E Michigan Ave, Lansing, MI 48911		
Type of Contribution: ☐ Direct ☐ Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 11/11/2019 Name & Address	-	•
Louise Ahern 534 Cedar Ridge Dr Williamston, MI 48895	_{\$} 100	_{_ \$} 100
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Author Employer Self		
Business Address 534 Cedar Ridge Dr, Williamston, MI 48895		
Type of Contribution: Direct Loan from a person J Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 11/11/2019 Name & Address: Neil Oza	25	0.5
259 Grosse Pines Dr Rochester Hills, MI 48309	_{\$} 25	
	Click Here	for Memo Itemization
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 11/11/2019		
Name & Address Greg Bird		
5625 Ventura Pl Haslett, MI 48840	_{\$} 100	_ 100
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Mng. Director Employer Mich Econ Dev. Corp	-	
Business Address 1 300 N Washington Sq) Lansing, MI 48913		
Type of Contribution: Direct Loan from a person J Fund Raiser		
Page Subto	tal 325.00	
Grand Total of All Schedules 1 (Complete on last page of Schedul	le)	
Page 4 of 5	Enter this total or line 3a of Summa Page.	



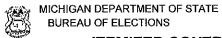
CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 11/12/2019 Name & Address: Richard Wiener 4445 Rodeo Trail		
Williamston, MI 48895	_{\$} 250	_{\$} 250
5. If over \$100.00 cumulative, please provide:	Click Here:	for Memo Itemization
Occupation Attorney Employer Self	Ollok Ficici	or wemo temzation
Business Address 4445 Rodeo Trail, Williamston, MI 48895		
Type of Contribution: ☐ Direct ☐ Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 11/12/2019		
Name & Address Dennis Denno		
410 Clarendon	_{\$} 250	ູ 250
E Lansing, MI 48823	***************************************	_ Ψ
5. If over \$100.00 cumulative, please provide:	Click Here f	or Memo Itemization
Occupation Self-employed Employer Self		
Business Address 410 Clarendon, E Lansing, MI 48823		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 11/12/2019 Name & Address: Larry Crittenden	400	400
603 W. Crane Howell, MI 48843	_{\$} 100	_{_ \$} 100
	Click Here fo	or Memo Itemization
5. If over \$100.00 cumulative, please provide:		, monto non medical
Occupation Consultant Employer Self		
Business Address 603 W. Crane, Howell, MI 48843 Type of Contribution: Direct Loan from a person Fund Raiser		
7,7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		· · · ·
Name & Address Elena Greer		
753 Audubon Rd E Lansing, MI 48823	_{\$} 25	_{\$} 25
5. If over \$100.00 cumulative, please provide:	Click Hara fo	r Memo Itemization
Occupation Employer	Ollow Hele IO	i weillo itelinzation
Business Address		
Type of Contribution: Direct Loan from a person 🗸 Fund Raiser		
Page Subtotal	625.00	
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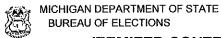
CANDIDATE COMMITTEE

Enter contributor's name middle initial. Check bo Committee (PAC) Repor	x to indicate if cont	tribution is from a Polit	individual, e ical Commit	enter last name, first name, tee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Midwest Strategy Grou 101 S. Washington Sq Lansing, MI 48933		YES 4. Da	te of Receip	ot 11/14/2019	_ _{\$} 250	_§ 250
5. If over \$100.00 cumu	lative, please pro	ovide:			-	e for Memo Itemization
Occupation		_ Employer			-	o for World Rottization
Business Address		*******		//4///		
Type of Contribution:	Direct	Loan from a pers	on 🗸	Fund Raiser		
3. Contribution #2	PAC Receipt?	YES 4. Dat	e of Receip	t 11/17/2019		
Name & Address	·			•		
Nicholas Roumel 2718 Hampshire Rd					_{\$} 150	å 150
Ann Arbor, MI 48104					\$	_ \$ <u>100</u>
5. If over \$100.00 cumu	lative, please pro	vide: Employer_Nacht &	k Roume	il, PC	Click Here	e for Memo Itemization
Occupation Attorney	NI Mai- Of Of					
Business Address 101	IN Main St, St	e 555, Ann Arbo), WII 46	104		
Type of Contribution:	Direct	Loan from a perso	on 📙	Fund Raiser		
3. Contribution # 3	PAC Receipt?	YES 4. Da	te of Receip	pt		
Name & Address:						
					\$	\$
5. If over \$100.00 cumu	lative, please pro	vide:			Click Here	for Memo Itemization
Occupation		_ Employer		and the state of t		
Business Address						
Type of Contribution:	Direct	Loan from a pers	on 📗	Fund Raiser		
3. Contribution # 4	PAC Receipt?	YES 4. D	ate of Recei	ipt	_	
Name & Address		_				
					\$	\$
5. If over \$100.00 cumu	lative, please pro	vide:			Click Here	for Memo Itemization
Occupation	***************************************	_ Employer			_	
Business Address						
Type of Contribution:	Direct	Loan from a pers	on 🗌	Fund Raiser		
				Page Subto	otal 400.00	
				and Total of All Schedules		
Bass 6 of 15			(Compl	ete on last page of Schedu	lle) Enter this total of line 3a of Summ Page.	



CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 11/12/2019 Name & Address: Peter Spadafore 2310 Moores River Dr Lansing, MI 48911	_{\$} 25	_{\$} 25
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Employer	Olick Ficio	TOT WICHTO TESTINZATION
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 11/13/2019 Name & Address		
Kristin Keller 50650 Colchester Ct Canton, MI 48187	_{\$} 250	_{\$} 250
5. If over \$100.00 cumulative, please provide: Occupation Media Buyer Employer Keller Media Consulting	Click Here	for Memo Itemization
Business Address 43311 Joy Road #330, Canton, MI 48187		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 11/14/2019 Name & Address: Teresa Bingman 1425 Ambassador Dr Okemos, MI 48864	_{\$} 100	_ _{\$} 100
Original in 1999 i	Click Hore f	or Memo Itemization
5. If over \$100.00 cumulative, please provide:	Official F	or wello termzatori
Occupation Self-employed Employer Self		
Business Address 1425 Ambassador Dr, Okemos, MI 48864		•
Type of Contribution: Direct Loan from a person ✓ Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 11/17/2019 Name & Address Ryan Hughes		
214 Charles St Ann Arbor, MI 48103	_{\$} 100	_ \$ 100
5. If over \$100.00 cumulative, please provide: Occupation Computer Programmer Employer University of Michigan	Click Here f	or Memo Itemization
Business Address 214 Charles St, Ann Arbor, MI 48103 Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	475.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
Page of 15	line 3a of Summa Page.	ry



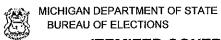
CANDIDATE COMMITTEE

2. Committee Name

Vote Jen Eyer

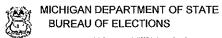
Enter contributor's name and address. If contribution is from an individual, enter last name, first nammiddle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	e, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 12/16/2019 Name & Address: Michael Stearns 2160 Newport Ann Arbor, MI 48103	 _s 150	_{\$} 150
5. If over \$100.00 cumulative, please provide: Occupation Financial Advisor Employer Sefi	Click Here	for Memo Itemization
0400 Nanna and Amerika and 881 49409	<u> </u>	
Type of contabation Blicax Loan from a person 1 Tanta Marie		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/16/2019 Name & Address		
Amy Crawford 1418 Iroquois PI Ann Arbor, MI 48104	_{\$} 100	_{\$} 100
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Writer Employer Self		
Business Address 1418 Iroquois PI, Ann Arbor, MI 48104		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 12/18/2019 Name & Address:		
Ann Arbaugh 1915 Austin Ave Ann Arbor, MI 48104	_{\$} _50	_ _{\$} 784
	Click Here	for Memo Itemization
5. If over \$100.00 cumulative, please provide:		
Occupation Realtor Employer Coldwell Banker Weil Manuel		
Business Address 2723 S State St, Ste 130, Ann Arbor, MI 48104		
Type of Contribution: ☐ Direct ☐ Loan from a person ✓ Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 12/18/2019 Name & Address	-papiganessay	
Peter Graham 2233 Quarry Rd E Lansing, MI 48823	_{\$} 250	_{\$} 250
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Physician Employer Sparrow Health System		
Business Address 1400 E Michigan Ave, Lansing, MI 48912		
Type of Contribution: Direct Loan from a person 🗸 Fund Raiser		
Page Sub	ototal 550.00	
Grand Total of All Schedules (Complete on last page of Schedules)	dule) L	
Page 8 of 15	Enter this total or line 3a of Summa Page.	

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CANDIDATE COMMITTEE

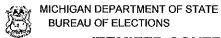
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 12/06/2019 Name & Address: James Pyke 912 Pomona Rd Ann Arbor, MI 48103	_{\$} 10	
		_{\$} 50
5. If over \$100.00 cumulative, please provide:	Oliali Hana fa	
Occupation Employer	Click Here to	or Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/07/2019		
Name & Address		
Tim Richards 1014 Rose Ave Ann Arbor, MI 48104	<u>\$</u>	_{\$} 275
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Not employed Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 12/07/2019 Name & Address: Jean Leverich		
912 Pomona Rd Ann Arbor, MI 48103	<u>\$ 10 </u>	_{\$} 150
- II	Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation Social worker Employer CEW at Univ of Michigan		
Business Address 330 E Liberty, Ann Arbor, MI 48103		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 12/11/2019 Name & Address		
Stephanie White 2115 Winchell Dr Ann Arbor, MI 48104	<u>\$ 100</u>	_{\$} 525
5. If over \$100.00 cumulative, please provide:	Click Horo for	Memo Itemization
Occupation Exec Director Employer Equality Michigan	Click Fiele los	Wellio Relinzation
Business Address 19641 W Seven Mile Rd, Detroit, MI 48219		
Type of Contribution:		
Page Subtotal	125.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name indide initial. Check box to indicate if contribution is from a Political Committee or an Independer Committee (PAC) Report all contributions regardless of amount.	name, 6. Amount 7. Cumulative for Election Cycle for Ea Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 12/21/2019 Name & Address: Brenda Strayer 225 Wildemere Dr	
Mason, MI 48854	_{\$} 100 _{\$} 500
5. If over \$100.00 cumulative, please provide: Occupation Not employed Employer	Click Here for Memo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/06/2019	
Name & Address	
Joan Lowenstein 502 Burson Pl Ann Arbor, MI 48104	_{\$} 50
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Retired Employer	_
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 12/06/2019 Name & Address:	
Karen Stefl 6047 Sleepy Hollow Lane E Lansing, MI 48823	_{\$} 100 _{\$} 100
	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:	Olick Fiele for Memo Remization
Occupation Producer Employer Render Studios	
Business Address 111 E Cesar E Chavez Ave, Lansing, MI 48906	<u> </u>
Type of Contribution: Direct Loan from a person V Fund Raiser	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 12/16/2019 Name & Address Kirk Mercer	<u></u>
8075 S Jackson Rd Jackson, MI 49201	_{\$} 500 _{\$} 500
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation CEO Employer RW Mercer Co	
Business Address 2322 Brooklyn Rd, Jackson, MI 49203	<u></u>
Type of Contribution: Direct Loan from a person Fund Raiser	
Page S	Subtotal 750.00
Grand Total of All Schedu (Complete on last page of Sci	1 · · · · · · · · · · · · · · · · · · ·
10 15	Enter this total on line 3a of Summary
Page Of 15	Page.

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CANDIDATE COMMITTEE

2. Committee Name Vote Jen Eyer

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 12/19/2019 Name & Address: Neil Jain 28735 Wintergreen Dr		
Farmington Hills, MI 48331	_{\$} 15	_{\$} 15
5. If over \$100.00 cumulative, please provide:	Click Here t	for Memo Itemization
Occupation Employer	Onoic Fiore	or memo nerrization
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/26/2019 Name & Address Thomas Kent		
3087 Cedarbrook Rd Ann Arbor, MI 48105	_{\$} _100	_{\$} 100
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Attorney Employer University of Michigan		
Business Address 503 Thompson St, Ann Arbor, MI 48109		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 12/31/2019 Name & Address:		
Lon Johnson 1 Park Ave, #1809	_s 250	<u>,</u> 250
Detroit, MI 48226	\$	\$ <u></u>
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation CEO Employer WWF Holdings, Inc		
Business Address 1941 W Grand River #32, Detroit, MI 48226		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 12/26 2019 Name & Address Thomas Moher		
3338 Lakeshore Dr Sault Sainte Marie, MI 49783	_{\$} 100	_{\$_} 100
5. If over \$100.00 cumulative, please provide:	Olivie Dene C	
Occupation Attorney Employer Self	Click Here for	r Memo Itemization
Business Address 546 Ashmun St, Unit 1, Sault Sainte Marie, MI 49783		ļ
Type of Contribution: Direct Loan from a person 🗸 Fund Raiser		
Page Subtotal	435.00	
County Total of All Outs of All All All All All All All All All Al	C AID DA	

Grand Total of All Schedules 1A (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

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ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK

1. Committee I. D. Number <u>C-201</u>9-013

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2. Committee Name Vote Jen Eyer

Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	Type of In-Kind Contribution (Check applicable box) Date of Receipt Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8, Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: T.J. Bucholz 914 Oneida Woods Trail Grand Ledge, MI 48837 If over \$100.00 cumulative, please provide: Occupation: Mng. Partner Employer Name & Business Address: Vanguard Public Affairs 101 N. Washington Sq., Suite 1400 Lansing, MI 48933	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description Food and drink 5. Date Of Receipt: 11/11/2019 6. Vendor Name & Address:		\$ 200
Contribution # 2 Name & Address Andy Mosser 6312 Peck Lake Rd Portland, MI 48875 If over \$100.00 cumulative, please provide: Occupation: Asst. Chptr. Mngr. Employer Name & Address: Michigan Chapter, NECA 1026 N Washington Ave Lansing, MI 48906	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description Venue fees 5. Date Of Receipt: 12/18/2019 6. Vendor Name & Address: Yankee Air Museum		\$ 250 temization
Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Yes Yes Yes Yes Yes Yes Yes	4.	\$Click Here for Memo I	temization
	Page Subtot	450.00	450.00
	Grand Total of all Schedules 1- (Complete on last page of Schedul	450.00	•

Enter this total on line 6 of Summary Page

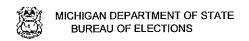


SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number C-2019-013

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Various		12/18/1	s 155
Address	Purpose: Food & supplies	Date	
Lansing, MI	Click F	lere for Memo	Itemization Type
	Check box if this expenditure is payment of		••
✓ Fund Raiser	debt or obligation reported on previous		
Expenditure #2	statement		
Name US Post Office		11/06/19	
OO F OOL OTHICE	Stampe	Date	\$ <u>55</u>
Address	Purpose: Stamps		
2075 W Stadium Ann Arbor, MI 48103	Click H	lere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3	Statement		
Name Facebook		11/2019	
raceson	Event promotions		\$ <u>26</u>
Address 1 Hacker Way	Purpose: Event promotions	Dute	
Menlo Park, ĆA 94025	Click H	lere for Memo I	temization Type
	Check box if this expenditure is payment of		
√ Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name Act Blue		12/2019	. 26
Address	Rumana: Fees	Date	\$ <u>26</u>
PO Box 441146	Purpose: 1 CCS		
Somerville, MA 02144-0031	Click H	ere for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name Act Blue		11/2019	. .
Address	Purpose: Fees	Date	\$ 54
PO Box 441146 Somerville, MA 02144-0031		loro for Momo	temization Type
GOINEI VIIIE, IVIA 02144-0001	Check box if this expenditure is payment of	ere for Metrio	termzation Type
Fund Raiser	debt or obligation reported on previous statement		
	WWW.WWW.WWW.WWW.WWW.WWW.WWW.WWW.WWW.WW	tal this page	316.00
	Grand Total of all S	Schedules 1B	
	(Complete on last page		316.00

Enter this total on line 8a of Summary Page



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

C-2019-013

1. Committee I.D. Number

2. Committee Name Vote Jen Eyer

	- USE A SEPARATE SH	EET FOR EACH EVENT	-
3. Date Event Was Held	Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held. Yankee Air Museum
12/18/2019	6	Museum Party	47884 D Street Belloville, MI 48111 Private Residence
7. Total Contributions	1065		
8. Other Receipts			
9. Gross Receipts (Add lines 7	and 8) 1065		
10. Total Cost of Event (Total Cost includes In-Kind Co	405	Made For the Event)	
11. Check if event was a jo	int fund raiser and complete the	following:	
Co-Sponsor(s)	Contribution S (%)	plit	Expenditure Split (%)
		·	

	<u>abanda de estados esta</u>		

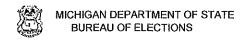
• The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.

• Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.

Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

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FUND RAISER SCHEDULE 1F

CANDIDATE CO	DMMITTEE	2. Committee	Name Vote Jei	n Eyer	
	- USE A SEPAR	RATE SHEET	FOR EACH E	VENT -	
3. Date Event Was Held	Number of Individual or Participating (whiche greater)		ype of Fund Raising A	ctivity	 Address and Name (If any) of the place where the activity was held. 101 N Washington Sq. Ste
11/11/2019	16	Of	fice Party		1400 Lansing, MI 48933 Private Residence
7. Total Contributions	2175				
8. Other Receipts	•••••				
9. Gross Receipts (Add lines 7	and 8) 2175				
10. Total Cost of Event (Total Cost includes In-Kind Co	200 ntributions and All E	xpenditures Mad	e For the Event)		
11. Check if event was a jo	int fund raiser and co	omplete the follo	wing:		
Co-Sponsor(s)	Co	ntribution Split (%)			Expenditure Split (%)
			_		
-			-		
	_				
		vidaden emergen er e	_		
			_		
			_		

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

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