

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

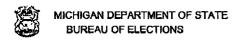
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FOR OFFICIAL USE ONLY

COVER PAGE	IACUMB CO Tr. Clemen	UNTY CLERK IS HICKLE AR			
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by indidate.	3. This Statement covers From	8-27-18 10	10-21-8	
1. Committee I.D. Number		4. Candidate Lasi Name	First Name	M.I.	
69598		Brown	DON		
2. Committee Name		4a. Office Sought Including Dis		(If applicable)	
		COUNTY COM	nissioner		
CTE DON Brown		4b. County of Residence			
5. Committee's Mailing Address (515 OID CONCH TRAIL WASKINGTON MI 48024		6. Treasurer's Name & Reside	nlial Address		
		DON Brown			
		WASHINGTON MI 48094 HELL S			
		Washington MI 78011			
Area Code and Phone 586-419-2443					
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.		Area Code & Phone <u>58<-919-348</u>			
7. Tressurer's Business Address		8. Designated Record Keeper's Name and Address (If the committee has			
1 SOUTH NAIN		Designated Record Keeper)			
MT. Camers MI 48043		N/A			
480	43			'	
ero, 4,0~03					
Area Code and Phone 586-469-5		Area Code and Phone	9e. Dissolution of Candid	ofe Committee	
9. TYPE OF STATEMENT	Required ONLY if candidate				
9a. Pre-Election OR 9b. Post-Election	is not on the current year.	ballot for the		We certify any outstanding debt	
Pre-Election or Post-Election Statement relates to:	· · · · ·			and no longer collectible from lee has no oustanding assets,	
Primary	July Quart	епу	owes no lates fees or has an	y ouslanding debt.	
X General	October Q	tuerterly	Further, if the dissolution car	and be granted, that this he	
Convention			considered a request for the	Reporting Walver.	
Special	9¢.		•		
School		l Stalement () Coverage Year	Effective date of d	iseolution	
	_{9d.}	dment to Campaign Statement			
Caucus	(Com	plete Item 9e, 9b, 9c or 9e to te which Statement is being		dual funds must be reported on	
	атело	• • • • •	Schedule 1B and the Summ	ary Page.	
Date of Election, Convention or Caucus					
11-6-18					
				,	
10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.					
Current Treasurer or A (Con (a)) May By as					
Designated Record keeper Dow Brown Mary Date 5-29-18					
	,	1 1		1	
Candidate Dan Brown Nation Data 10-29-18					
Type or Print Name Signature					



1. Committee I.D. Number <u>69598</u>

SUMMARY PAGE

ME Nas Brain)

CANDIDATE COMMITTEE	2. Committee Name		
RECEIPT8	Column I This Period	Column II Cumulative this election cycle	
3. Contributions	~	Junioratio and dicolor cycle	
a. Itemized (Schedule 1A - Column 8)	(9a.) \$		
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	.	
c. Subtotal of "Contributions"	(3c.) \$	(18.) \$	
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$	
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	(20.) \$	
IN-KIND CONTRIBUTIONS & EXPENDITURES	,	,	
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$	
7. In-Kind Expenditures (Schedule 1B-IK, Calumn 6)	(7.) \$	(22.) \$	
EXPENDITURES			
8. Expenditures			
a. Iternized (Schedule 1B, Column 6)	(8a.) \$		
b. Itemized Get-Out-line-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.) \$	(23.) \$	
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		·	
10. Disbursements a. Itemized (Schedule 1C, Column θ)	(10a.) \$		
b. Unltermized (lese than \$50.01 each - no Schadule)	(10b,)\$		
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	(24.) \$	
DERTS AND OBLIGATIONS 12. Debts and Obligations	N		
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.) \$ 7.097-31		
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$		
(Line 5, Total Contributions & Other Receipts)	0 - 0-7 0 1		
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(15.) = \$ <u>7,097.31</u>		
(Add lines 9 and 11)	(16.) - \$		
17. ENDING BALANCE (Subtract line 16 from line 15)	(17) \$ 9.0 97.31 .		
(Subtract line 16 from line 15)	(11.)		