

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

COVER PAGE

FOR OFFICIAL USE ONLY

COVER PAGE				1/20/10	
Report must be legible, typed or printed in ink and sig the treasurer (or designated record keeper) and cand	idate.		11/26/18_ 10	7/20/19	
Committee I.D. Number		4. Candidate Last Name	First Name	Ë	
139610		KOPP 4a. Office Sought Including District			_
2. Committee Name		LLASHINGTON TON	P. TRUSTER		団
ATE GARYE. KOPP		4b. County of Residence			
Committee's Mailing Address		6. Treasurer's Name & Residenti	al Address		
59276 BLACIER CLL	a De	GARY E. KOP	P . 1	$\overline{}$	
WASHINGTON TWP. Mi		59276 GLACIER CLUB De.			
48094		WASHINGTON TWP. Mi. 48094			
Area Code and Phone 586-873-690	6_				
Area Code and Phone 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 fling official.		Area Code & Phone <u>586-873-6906</u>			
7. Tananania Business Address	7)-0	8. Designated Record Keeper's Designated Record Keeper)	Name and Address (If the	<i>1</i> /	
59276 GACIEL GUA De.		59276 GLACIER CLUB DE			
WASHINGTON TWP. M. 48094		59276 GLACIER CLUB DE WASHINGTON TWP. M; 48094			
		33.23.773.27		Fro	2
			16 072-1988	7.3	3
Area Code and Phone <u>586-873-690</u>	6	Area Code and Phone 58	0-2/5-6/00		
9. TYPE OF STATEMENT			Se Dissolution of Cano	C)	55
9a. Pre-Election OR 9b. Post-Election	Required ONLY if candidate is not on the ballot for the current year:		By checking this item I/We certify any anding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from		
Pre-Election or Post-Election Statement relates to:	J uly Qua	rterly	the committee. The commoves no lates fees or has	Wittee US2 un napram	uning assers,
Primary		_	-		
General	October	Quarterly	Further, if the dissolution considered a request for the second considered and second considered as the second considered as the second considered conside	cannot be granted, the Reporting Waiver	nat this be
Convention			00110120100		
Special	9c. Ann	ual Statement ()	Effective date	of dissolution	
School		Coverage Year			
Caucus	1 (1.0)	endment to Campaign Statement mplete Item 9a, 9b, 9c or 9e to	Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.		
	indi	cate which Statement is being ended.)			
	1				
Date of Election, Convention or Caucus					
10. Verification: I/We certify that all reasonable dilig	ence was us	ed in the preparation of this statem	ent and attached schedul	es (if any) and to the	best of
mylour knowledge and ballet the contents are live,	accurate and	complete.			
Current Treasurer or Designated Record keeper Type or Print Name	مور	/My6X	777 Da	ite	0/19
Type or Print Name		Signature	1/	•	/
Candidate LARY E. KOPP		Marial))	nte <u> </u>	12
Type or Print Name	3	Signature			
Authority granted under P.A. 388 of 1976	<u>-</u>				



MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

SUMMA	ARY PAGE
CANDIDATE	COMMITTEE

1. Committee I.D. Number 139610

2. Committee Name ATE GARY E. KOPP

CANDIDATE COMMITTEE		Column II
RECEIPTS	Column I This Period	Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) S	
b. Uniterrized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c) \$	(18.) S
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) S Ø	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 18, Column 6)	(8a.) \$	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c. Uniternized (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 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.)\$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	(24.) \$
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.)\$ <u>2000</u>	
b. Owed to the Committee (Schedule 1E)	(12b.)\$	
	RAI ANCE STATEMENT	
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Armount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15)	(13.) $5 \frac{26/9.33}{6.6/9.33}$ (14.) $+ 5 \frac{6}{6.6/9.33}$ (16.) $- 5 \frac{6}{6.6/9.33}$	- - - -
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