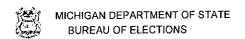
CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Papert must be legible, typed as printed in ink and signed by	1				
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement	covers From: 13/31/04to 1/1	1/08		
1. Committee I.D. Number	4. Candidate La	^	M.I.		
69598	1	grown Don			
-	4a. Office Sought	Including District # or Community Served (If applica	ble)		
2. Committee Name	COV	NTY COMMISSIONIET, 1.	3TH DISTRICT		
CTE DON Brown		,			
	4b. County of Res	idence MACOMB COUNTY			
5. Committee's Mailing Address	6. Treasurer's Name & Residential Address				
6515 OID CONCH TE	Don Brown				
_	DON DIOWN TR				
WASHINGTON MI 48094	6515 OD COREP 110000				
	INASHINATON TWP ME 48049				
Area Code and Phone 546786-7806	DON Brown 6515 OID COACH TR. WASHINGTON TWP MI 48094 Area Code & Phone 586-786-9806				
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.					
7. Treasurer's Business Address	8. Designated Re	cord keeper's Name and Mailing Address (If the cor	nmittee has a		
10 SU. MAIN STREET	Designăted Record keeper)				
MT. CLEMENS MI			ıκ co ≻c co		
•					
48043					
		- 55 471	e unit		
		ÿÄ.	The second secon		
Area Code and Phone	Area Code and P	hone			
9. TYPE OF STATEMENT		<u> </u>	-		
98. Pro Flortion OP 9h Doct Flortion		9c. Annual Statement (O 7 Coverage	no. w		
9a. Pre-Election OR 9b. Post-Election		Annual Statement (C) Coverage	it call		
		9d. Amendment to Campaign Statement (Com	plete Item 9a, 9b, 9c		
Pre-Election or Post-Election Statement relates to:		or 9e to indicate which Statement is being	amended)		
		9e. Dissolution of Candidate Committee			
Primary Gen	Primary General				
Convention		Effective Date of Dissolution			
Convention	001				
Special	rue	· · · · · · · · · · · · · · · · · · ·			
Caucus		By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for			
Date of Election, Convention or Caucus					
		the Reporting Waiver.	,		
N		Note: The disposition of residual funds must be rep 1B and the Summary Page.	orted on Schedule		
A committee that does not have a Reporting Waiver must file all re	quired Campaign S		all applicable		
A committee that does not have a Reporting Waiver must file all re Schedules. Direct contributions, in-kind contributions, loans, expel If any of the information listed in items 2.4.5.6.7 or 8 has change	nditures, and outsta	nding debts count against the \$1,000 Reporting Wa	iver threshold.		
If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.					
10. Verification: NWe certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of mylour knowledge and belief the contents are true, accurate and complete.					
Current Treasurer or A A A -					
Designated Record keeper Don Brown / Mm Brown Type or Print Name Signature Candidate Don Brown / Nm Brown Date 1-30-08					
Type or Print Name	Signature				
N	$\mathcal{A}_{i,j}$	Ra	2		
Candidate DON Brown	/ NM	Date	50° 0 8		
Type or Print Name	Signature				



1. Committee I.D. Number 69598

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name CTE DON Brown

RECEIPTS	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	
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, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	
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.) \$	(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.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ <i>1395.5</i> 2	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$	
(Line 5, Total Contributions & Other Receipts)	(15.) = \$	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(16.) - \$	
(Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>1395.52</u>	<u>.*</u>