



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

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: <u>08/24/10</u> to <u>10/17/10</u> | | |
| 4. Candidate Last Name | First Name | M.I. |
| Brown | Don | |
| 4a. Office Sought Including District # or Community Served (If applicable) | | |
| Macomb County Commissioner 7th District | | |
| 4b. County of Residence Macomb | | |
| 6. Treasurer's Name & Residential Address | | |
| Don Brown 6515 Old Coach Trail Washington MI 48094 | | |
| Area Code & Phone (586) 786-9808 | | |
| 8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) | | |
| N/A | | |
| Area Code and Phone | | |

| |
|---|
| 1. Committee I.D. Number |
| 69598 |
| 2. Committee Name |
| CTE Don Brown |
| 5. Committee's Mailing Address |
| 6515 Old Coach Trail Washington MI 48094 |
| Area Code and 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 |
| 10 South Main Mt. Clemens MI 48043 |
| Area Code and Phone (586) 469-5125 |

| | |
|---|---|
| 9. TYPE OF STATEMENT | |
| 9a. <input checked="" type="checkbox"/> Pre-Election | OR 9b. <input type="checkbox"/> Post-Election |
| Pre-Election or Post-Election Statement relates to: | |
| <input type="checkbox"/> Primary | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Convention | <input type="checkbox"/> School |
| <input type="checkbox"/> Special | <input type="checkbox"/> Caucus |
| Date of Election, Convention or Caucus <u>11/02/10</u> | |
| 9c. <input type="checkbox"/> Annual Statement (_____ Coverage Year) | |
| 9d. <input checked="" type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended) | |
| 9e. <input type="checkbox"/> Dissolution of Candidate Committee | |
| Effective Date of Dissolution _____ | |
| 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 the Reporting Waiver. | |
| Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page. | |

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver 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: 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 Designated Record keeper | <u>Don Brown</u> | / | Signature | Date | <u>11-14-10</u> |
| Type or Print Name | | | | | |
| Candidate | <u>Don Brown</u> | / | Signature | Date | <u>11-14-10</u> |
| Type or Print Name | | | | | |



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 69596

2. Committee Name CTE Don Brown

**SUMMARY PAGE
CANDIDATE COMMITTEE**

| RECEIPTS | Column I This Period | Column II Cumulative this election cycle |
|---|--------------------------------|---|
| 3. Contributions | | |
| a. Itemized (Schedule 1A - Column 6) | (3a.) \$ <u>0.00</u> | |
| b. Unitemized (less than \$20.01 each - no Schedule) | (3b.) \$ <u>NOT APPLICABLE</u> | |
| c. Subtotal of "Contributions" | (3c.) \$ <u>\$0.00</u> | (18.) \$ <u>\$28,045.00</u> |
| 4. Other Receipts (Schedule 1A -1, Column 6) | (4.) \$ <u>\$0.00</u> | (19.) \$ <u>\$0.00</u> |
| 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) | (5.) \$ <u>\$0.00</u> | (20.) \$ <u>\$28,045.00</u> |
| IN-KIND CONTRIBUTIONS & EXPENDITURES | | |
| 6. In-Kind Contributions (Schedule 1-IK, Column 7) | (6.) \$ <u>\$0.00</u> | (21.) \$ <u>\$0.00</u> |
| 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) | (7.) \$ <u>\$0.00</u> | (22.) \$ <u>\$0.00</u> |
| EXPENDITURES | | |
| 8. Expenditures | | |
| a. Itemized (Schedule 1B, Column 6) | (8a.) \$ <u>\$1,000.00</u> | |
| b. Itemized Get-Out-the-Vote (Schedule 1B-G) | (8b.) \$ <u>\$0.00</u> | |
| c. Unitemized (less than \$50.01 each - no Schedule) | (8c.) \$ <u>\$0.00</u> | |
| 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) | (9.) \$ <u>\$1,000.00</u> | (23.) \$ <u>\$1,000.00</u> |
| INCIDENTAL EXPENSE DISBURSEMENTS (Officers/holders Only) | | |
| 10. Disbursements | | |
| a. Itemized (Schedule 1C, Column 6) | (10a.) \$ <u>\$0.00</u> | |
| b. Unitemized (less than \$50.01 each - no Schedule) | (10b.) \$ <u>\$0.00</u> | |
| 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) | (11.) \$ <u>\$0.00</u> | (24.) \$ <u>\$0.00</u> |
| DEBTS AND OBLIGATIONS | | |
| 12. Debts and Obligations | | |
| a. Owed by the Committee (Schedule 1E) | (12a.) \$ <u>\$13,500.00</u> | |
| b. Owed to the Committee (Schedule 1E) | (12b.) \$ <u>\$0.00</u> | |
| BALANCE STATEMENT | | |
| 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) | (13.) \$ <u>\$12,235.72</u> | |
| 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) | (14.) + \$ <u>\$0.00</u> | |
| | (15.) = \$ <u>\$12,235.72</u> | |
| 15. SUBTOTAL Add lines 13 and 14 | (16.) - \$ <u>\$1,000.00</u> | |
| 16. Amount expended during reporting period (Add lines 9 and 11) | (17.) \$ <u>\$11,235.72</u> | |
| 17. ENDING BALANCE (Subtract line 16 from line 15) | | |