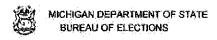


COVER PAGE

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 19/21/14 to12/31/14			
1. Committee I.D. Number		4. Candidate Last Name	om_18/21/19 to -12 First Name	WI.	
95371		Fournier	Michael	C	
		4a. Office Sought Including District # or Community Served (If applicable)			
2. Committee Name		City Commissioner Royal Oak			
Friends of Mike Fournie		4b. County of Residence OA	THE GLASS AS		
5. Committee's Mailing Address		6. Treasurer's Name & Residential Address			
711 S. Alexander Ave. Royal Oak, MI 48067 Area Code and Phone (248) 721-9748 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 filling official.		Michael Fournier			
		711 S. Alexander Ave. Royal Oak, MI 48067 Area Code & Phone (248) 721-9748			
Same as above		Designated Record Keeper)			
Control of Special Control of Sp			[T	8 55	
		Harries Land			
Area Code and Phone		Area Code and Phone			
9. TYPE OF STATEMENT			9e. Dissolution of Candidate C	Committee	
9a. Pre-Election OR 9b. Post-Election	is not on the	LY if candidate belief for the	By checking this item I/We certify any outstanding debt		
Pre-Election or Post-Election Statement relates to:	current year.		by the committee to the candidate by discharged and forgiven and r	e or his or her spouse is here	
	July Quarterly		the committee. The committee has no outstanding assets,		
L_Primary	N .	Constitute	owes no lates fees or has any out	istanding dect.	
X General	X October Q	uarteny	Further, if the dissolution cannot be granted, that this be		
Convention	H		considered a request for the Rep	orting Walver.	
Special	9c. Appur	I Statement (9 - Will no may be larger that the man		
School		Coverage Year	Effective date of dissolution		
Caucus	ad Amen	dment to Campaign Statement		State Control	
Vacand.	(Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)		Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.		
Date of Election, Convention or Caucus			at all after an amount of the last in		
10. Verification: IVVe certify that all reasonable dilio	ence was used	n the preparation of this statem	ent and attached schedules (if env	and to the heat of	
 Verification: IIWe certify that all reasonable dilig myour knowledge and belief the contents are true, 	accurate and co	mplete.	and anomica opiculas (il any	, mm to tile best of	
Current Treasurer or Michael Fouri	nier	The same of the sa		1-28-15	
Designated Record Keeper Type or Print Name		Signature	Date		
	-	Signature 7			
Candidate Michael Fournier Type or Print Name	- P	James Marie	Date	1-28-15	
Authority granted under P.A. 388 of 1976	7	Signature -			

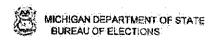


1. Committee I.D. Number 95371

SUMMARY PAGE

2 Committee Name Friends of Mike Fournier

CANDIDATE COMMITTEE	2. Committee Name	
RECEIPTS	Column I This Period	Column II Cumulative this election cycle:
Contributions		S. D. C. W. S. S. S. W.
a. //emized (Schedule 1A Column 6)	(3a.) \$ 0.00	
b. Uniterrized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ \$0.00	(18.) \$ \$0.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$0.00	(19.) \$ \$0.00
S. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5) \$ \$0.00	(20.) \$ \$0.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$0.00	(21.) \$ \$0.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7) \$ \$0.00	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		
a, Itamized (Schedule 1B, Column 6)	(6a.) \$ \$0.00	
b. Itemized Get-Out-the-Vate (Schedule 1B-G)	(8b.) \$ \$ 0.00	
c. Uniternized (less than \$50.01 each - no Schedule)	(8c.) \$ \$0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$0.00	(23.) \$ \$0.00
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 8)	(10a.) s \$0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(106.) \$ \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS		
(Add Line 10a + Line 10b)	(11.) s \$0.00	(24.) \$ \$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a, Owed by the Committee (Schedule 1E)	(12a.) \$ \$300.00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ \$0.00	
Annual Control of the	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) s \$578.94	TAXANA
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14) + \$ \$0.00	Name of the state
(Line 5, Total Contributions & Other Receipts) 15, SUBTOTAL Add lines 13 and 14	(15.) = \$ \$578.94	
16. Amount expended during reporting period	\$0.00	
(Add lines 9 and 11) 17. ENDING BALANCE	Street St	Quan
(Subtract line 16 from line 15)	(17.) \$ \$578.94	*



DEBTS AND OBLIGATIONS 10	ommittee I.D. Number 9537	1	. 1		
SCHEDULE 1E CANDIDATE COMMITTEE 2.C	ommittee Name Friends of	Mike Fournier			
This Schedule itemizes:	Hastista in the state of the st	onto on the contract the contract of the contr			
a Debts and obsgations owed by or forgiven the com (Che	mittee OR b. Debt	is and obligations owed <u>to</u> our	forgiven by the con	imittee,	
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was Incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)	
Debt #1 Corp? Yes Owed to or by:	4. Type: loan	\$			
Michael Fournier 711 S. Alexander Royal Oak Mi 48067	5. Date Debt Was Incurred: 06/10/11 6. Original Amount of Debt: \$ 100.00	\$ S S S S S S S S S S S S S S S S S S S	\$	\$ 100.00 FORGIVEN	
If bank loan, name of endorser or guarantor:					
Debt #2. Corp? Yes Owed to dr by: Michael Fournier 711 S. Alexander Royal Oak Mi 48067 If bank loan, name of endorser or guarantor.	4. Type: Loan 5 Date Debt Was incurred: 7/26/11 5. Original Amount of Debt: \$ 200.00	\$ \$ \$ \$	s	\$ 200.00 FORGIVEN	
Debt #3 Corp? Yes Owed to or by:	4. Type: 5. Date Debt Was Incurred: 6. Original Amount of Debt: 5.	\$ S	\$	\$FORGIVEN	
If bank loen, name of endorser or guarantor:	The state of the s	À	mount Endorsed: \$_		
C	omplete on last page of Schedule	Grand Total	(Outstanding debt) of all Schedules 1E	\$300.00 \$300.00	
A debt or obligation must be shown on this Scheduthis Campaign Statement or it was forgiven during	ale if there was an outstanding a	mount award on it at the e		Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page	