CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

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	11/26/19	to 07/20	/20	
1. Committee I.D. Number		4. Candidate Last Name	Firs	st Name	M.I.	
95371		Fournier	Michae	1	c	
93371		4a. Office Sought Including District # or Community Served (If applicable)				
2. Committee Name		Mayor, City of Royal Oak				
Friends of Mike Fournier	•	4b. County of Residence OAI	KLAND			
5. Committee's Mailing Address		6. Treasurer's Name & Residential Address				
711 S. Alexander Ave		Michael Fournier				
Royal Oak, MI		711 S Alexander Ave				
		Royal Oak, MI				
Area Code and Phone (248) 224-3772 If the address in this box is different from the committee						
mailing address on the Statement of Organization, r be sent to this address by the filing official.	nail may	Area Code & Phone (248) 224-3772				
7. Treasurer's Business Address		Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)				
n/a		n/a			A	
		1110			3 9 4	
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	Required ONLY if candidate is not on the ballot for the current year:		By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no oustanding assets, owes no lates fees or has any oustanding debt.			
Pre-Election or Post-Election Statement relates to:						
Primary			owes no lates lee	SUI HAS ANY UU	standing debt.	
General	October C	Quarterly	Further, if the diss	solution cannot	be granted, that this be	
Convention			considered a requ	lest for the Repo	orting Waiver.	
Special	9c. 🗀 .					
School	LAnnua	al Statement () Coverage Year	Effectiv	e date of dissol	ution	
	Amer	ndment to Campaign Statement				
Caucus	9d. 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						
10. Verification: I\We certify that all reasonable diligramylour knowledge and belief the contents are true,	ence was used accurate and c	in the preparation of this statem omplete.	ent and attached s	chedules (if any	y) and to the best of	
Current Treasurer or Designated Record keeper Michael Fourt	nier		7		7/27/20	
Type or Print Name		Signature	_//	—— Date ——		
NAC-L LET 1			/			
Candidate Michael Fournier			/	Date	7/27/20	
Type or Print Name		Signature				

I. Committee I.D. Numb	_{cr} 95371
I. Committee I.D. Numb	er ooo, .

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Friends of Mike Fournier

CANDIDATE COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions	0.00	
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>0.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	40.00
c. Subtotal of "Contributions"	(3c.) \$ \$0.00	(18.) \$ \$0.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ _\$0.00	(20.) \$ \$0.00
IN-KIND CONTRIBUTIONS & EXPENDITURES	4.2.2.2	
6. In-Kind Contributions (Schedule 1-lK, 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. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$0.00	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ \$0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	(23.) \$ \$0.00
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ \$0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ _\$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ \$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	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$_\$33,493.94	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$ \$0.00	
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$_\$0.00	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ \$0.00	
17. ÈNDING BALANCÉ (Subtract line 16 from line 15)	(17.) \$ \$33,493.94	*
1		



DEBTS AND OBLIGATIONS 1.	Committee I.D. Number 9537	1		
SCHEDULE 1E CANDIDATE COMMITTEE 2.	Committee Name Friends of	Mike Fournier		
This Schedule itemizes:				
a ☑Debts and obligations owed by or forgiven the co	mmittee OR b. Debte neck either a or b. Use only for the pu	s and obligations owed <u>to</u> o urpose checked.)	r forgiven <u>by</u> the com	nmittee.
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	<u> </u>		
Michael Fournier 711 S. Alexander Royal Oak, MI	5. <u>Date Debt Was Incurred</u> : 06/10/11 6. <u>Original Amount of Debt</u> : \$ 100.00	\$ \$ \$	\$	\$FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$ 1	00.00
Debt #2 Corp? Yes Owed to or by: Michael Fournier 711 S. Alexander Royal Oak, MI	4. Type: Loan 5. <u>Date Debt Was Incurred</u> : 7/26/11 6. <u>Original Amount of Debt</u> : \$ 200.00	\$ \$ \$	\$	\$FORGIVEN
If bank loan, name of endorser or guarantor:		\$	mount Endorsed: \$_	200.00
Debt #3 Corp? Yes Owed to or by:	4. Type:	\$ \$ \$ \$	\$	\$FORGIVEN
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$_	
	(Complete on last page of Schedule	Grand Total	I (Outstanding debt) I of all Schedules 1E or to the committee)	\$300.00 \$300.00 Enter this total
A debt or obligation must be shown on this Sche this Campaign Statement or it was forgiven durin			closing date of	on line 12a "owe by" or line 12b "owed to" of the Summary Page

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