



25 OCT 2021 AM 12:35

OAKLAND COUNTY CLERK
PONTIAC, MICHIGAN

FOR OFFICIAL USE ONLY

**CANDIDATE COMMITTEE
COVER PAGE**

3. This Statement covers From: 07/21/2021 to 10/20/2021

1. Committee I.D. Number 95685		4. Candidate Last Name BROWN		First Name LISA		M.I. R
2. Committee Name LISA BROWN FOR COUNTY CLERK		4a. Office Sought Including District # or Community Served (If applicable) COUNTY CLERK/REGISTER OF DEEDS, OAKLAND COUNTY				
5. Committee's Mailing Address PO BOX 251552 WEST BLOOMFIELD, MI 48325		4b. County of Residence OAKLAND COUNTY				
7. Treasurer's Business Address 4480 STRATHDALE LN. WEST BLOOMFIELD, MI 48323		6. Treasurer's Name & Residential Address LISA R BROWN 4480 STRATHDALE LN. WEST BLOOMFIELD, MI 48323				
Area Code and Phone (248) 953-1050 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.		Area Code & Phone (248) 953-1050				
Area Code and Phone (248) 953-1050		Area Code and Phone _____				
9. TYPE OF STATEMENT 9a. ☐ Pre-Election OR 9b. ☐ Post-Election Pre-Election or Post-Election Statement relates to: ☐ Primary ☐ General ☐ Convention ☐ Special ☐ School ☐ Caucus Date of Election, Convention or Caucus _____		Required ONLY if candidate is not on the ballot for the current year: ☐ July Quarterly ☒ October Quarterly 9c. ☐ Annual Statement (2021) Coverage Year 9d. ☐ Amendment to Campaign Statement (Complete Item 9a, 9b , 9c or 9e to indicate which Statement is being amended.)		9e. Dissolution of Candidate Committee ☐ 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 outstanding assets, owes no lates fees or has any outstanding debt. Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Effective date of dissolution _____ Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.		
10. Verification: \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 Lisa Brown Type or Print Name		[Signature] Signature		Submitted electronically, signature on file Date 10/25/2021		
Candidate la Brown Type or Print Name		[Signature] Signature		Submitted electronically, signature on file Date 10/25/2021		



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 95685

2. Committee Name LISA BROWN FOR COUNTY CLERK

**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>10,426.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>10,426.00</u>	(18.) \$ <u>10,426.00</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>10,426.00</u>	(20.) \$ <u>10,426.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>2,046.67</u>	(21.) \$ <u>2,046.67</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>93.05</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>93.05</u>	(23.) \$ <u>93.05</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders 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>65,534.28</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>15,436.68</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>10,426.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>25,862.68</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>93.05</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>25,769.63</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/10/2021</u> Name & Address: <u>PATRICE AARON</u> <u>2800 STEIN CT</u> <u>ANN ARBOR, MI 48105</u>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>WHOLEHEART GROUP</u> Business Address <u>2800 STEIN CT, ANN ARBOR, MI 48105</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/14/2021</u> Name & Address: <u>JODY WEISSLER DEFOE</u> <u>23470 RIVERVIEW DR</u> <u>SOUTHFIELD, MI 48034</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/14/2021</u> Name & Address: <u>LINDA KOCH</u> <u>30563 RIDGEFIELD AVE</u> <u>WARREN, MI 48088</u>		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/14/2021</u> Name & Address: <u>JOHN DIAMOND</u> <u>60 E MONROE ST</u> <u>UNIT 5501</u> <u>CHICAGO, IL 60603</u>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>AIR SALES/CONSULTING</u> Employer <u>SELF</u> Business Address <u>60 E MONROE ST, CHICAGO, IL 60603</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal 830.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
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1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/16/2021</u> Name & Address: VALERIE QUINN 4753 ENNISMORE DR VILLAGE OF CLARKSTON, MI 48346		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/2021</u> Name & Address: PATRICIA MARTINICO 2179 BORDEAUX ST WEST BLOOMFIELD TOWNSHIP, MI 48323		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: STANLEY BERSHAD 4824 PARK HILL CT WEST BLOOMFIELD TOWNSHIP, MI 48323		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: ELIZABETH KELLY 5383 GRANGE HALL RD HOLLY, MI 48442		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **350.00**

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: MARI KAFTAN 2970 OAKBROOKE CT WEST BLOOMFIELD TOWNSHIP, MI 48323		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: PATRICIA COONEY 6694 MELLOW WOOD LN WEST BLOOMFIELD TOWNSHIP, MI 48322		\$ <u>75.00</u>	\$ <u>75.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: ELEANOR SIEWERT 576 ABBEY ST BIRMINGHAM, MI 48009		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: JUDY WEINER 4621 VALLEYVIEW DR WEST BLOOMFIELD TOWNSHIP, MI 48323		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **325.00**

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: IRVING MILLER 6192 FOREST GROVE WEST BLOOMFIELD TOWNSHIP, MI 48322		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: TERRY PRITCHETT 62823 TOURNAMENT DR WASHINGTON, MI 48094		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: PAULA RICCARDO 1166 DRESDEN CT HOFFMAN ESTATES, IL 60192		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: RANDY STON 6702 BLUE SPRUCE CT WEST BLOOMFIELD TOWNSHIP, MI 48324		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **350.00**

Grand Total of All Schedules 1A
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line 3a of Summary
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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: DAVID BONIOR 1000 NEW JERSEY AVE SE WASHINGTON, DC 20003	\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: PEGGY DAITCH 777 PURDY ST BIRMINGHAM, MI 48009	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: BARRY LEPLER 13159 NADINE AVE HUNTINGTON WOODS, MI 48070	\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: EUNICE RING 25665 RIVER DR FRANKLIN, MI 48025	\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		

Page Subtotal **900.00**

Grand Total of All Schedules 1A
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line 3a of Summary
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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: <u>TOM MCKENNEY</u> <u>304 E MAPLE ST</u> <u>HOLLY, MI 48442</u>		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>1121 N SAGINAW ST, STE. 5, HOLLY, MI 48442</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: <u>CLAUDIA SILLS</u> <u>125 ASPEN RD</u> <u>BIRMINGHAM, MI 48009</u>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>INVESTOR</u> Employer <u>FIRST HOLDING MGMT</u> Business Address <u>6960 ORCHARD LAKE RD, #300, WEST BLOOMFIELD TOWNSHIP, MI 48322</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: <u>HENRY GRIX</u> <u>6100 WING LAKE RD</u> <u>BLOOMFIELD HILLS, MI 48301</u>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>DICKINSON WRIGHT PLLC</u> Business Address <u>2600 W BIG BEAVER RD, STE. 300, TROY, MI 48084</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: <u>MARLENE BRESLER</u> <u>5361 OLD POND WAY</u> <u>WEST BLOOMFIELD TOWNSHIP, MI 48323</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal 1,350.00

Grand Total of All Schedules 1A
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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: JUDITH ANCELL 37524 BURTON CT FARMINGTON HILLS, MI 48331		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: ROBERT JOHNCOX 21401 CONCORD ST SOUTHFIELD, MI 48076		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: CYNTHIA CHURCHES 22543 CRANBROOKE DR NOVI, MI 48375		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: WILLIAM STERN 6727 POST OAK DR WEST BLOOMFIELD TOWNSHIP, MI 48322		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **430.00**

Grand Total of All Schedules 1A
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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: LINDA ONDERKO 3073 MASSENA AVE COMMERCE TWP, MI 48382		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: JON FIELBRANDT 32830 SARATOGA AVE WARREN, MI 48093		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: SARAH WEINSTEIN 914 SYMES AVE ROYAL OAK, MI 48067		\$ <u>36.00</u>	\$ <u>36.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: FREYA WEBERMAN 10144 LUDLOW AVE HUNTINGTON WOODS, MI 48070		\$ <u>35.00</u>	\$ <u>35.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **171.00**

Grand Total of All Schedules 1A
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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: HANNAH DONIGAN SHEARWATER CIR COMMERCE TWP, MI 48393		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: MICHAEL FRANK 2818 BALTANE RD WEST BLOOMFIELD TOWNSHIP, MI 48323		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: SHELDON GOLDMAN 7305 MEADOWLAKE HILLS DR BLOOMFIELD TWP, MI 48301		\$ <u>300.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>INVESTOR</u> Employer <u>LSG INSURANCE PARTNERS</u> Business Address <u>2600 S TELEGRAPH RD, BLOOMFIELD HILLS, MI 48302</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: JOHN RAUCHMAN 1067 PEARSON ST FERNDAL, MI 48220		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **450.00**

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: GILMER EVANS 4851 COMMERCE RD ORCHARD LAKE, MI 48324		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: DONALD NADEL 4851 COMMERCE RD ORCHARD LAKE, MI 48324		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: JOYCE LALONDE 24801 ROSALIND AVE EASTPOINTE, MI 48021		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☒ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: MICHIGAN REGIONAL COUNCIL OF CARPENTERS 400 RENAISSANCE CENTER SUITE 1010 DETROIT, MI 48243		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal 1,000.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: MICHELLE DEBEAUSSAERT 39856 BRYLOR CT CLINTON TWP, MI 48038		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: GARY MURPHY 1553 S BATES ST BIRMINGHAM, MI 48009		\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/25/2021</u> Name & Address: RICK FLYNN 43225 CHARDONNAY DR STERLING HEIGHTS, MI 48314		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/26/2021</u> Name & Address: BRIANNA KNOPPOW 1321 FAIRMONT ST NW WASHINGTON, DC 20009		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **520.00**

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/26/2021</u> Name & Address: PAMELA KELLAR 59987 CARLTON N APT. B WASHINGTON, MI 48094		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/27/2021</u> Name & Address: MARY MILLS 5065 CROOKS RD #51 ROYAL OAK, MI 48073		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/30/2021</u> Name & Address: SHELDON MILLER 30300 NORTHWESTERN HWY FARMINGTON HILLS, MI 48334		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>30300 NORTHWESTERN HWY, STE 230, FARMINGTON HILLS, MI 48334</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/30/2021</u> Name & Address: ELAINE MILLER 30300 NORTHWESTERN HWY FARMINGTON HILLS, MI 48334		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>HOMEMAKER</u> Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **650.00**

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 95685

2. Committee Name LISA BROWN FOR COUNTY CLERK

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/30/2021</u>	
Name & Address: GERALDINE BARCLAY 32241 SOUTHFIELD RD BEVERLY HILLS, MI 48025		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/30/2021</u>	
Name & Address: JANICE SOBEL 7420 SHERWOOD CREEK CT WEST BLOOMFIELD TOWNSHIP, MI 48322		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/30/2021</u>	
Name & Address: KAY WATNICK 268 FAIRFAX ST BIRMINGHAM, MI 48009		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/30/2021</u>	
Name & Address: DEBRA DOROSH 44188 RINA LN CLINTON TWP, MI 48038		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal 200.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/30/2021</u> Name & Address: PATRICIA CAMPBELL 6659 FIRESIDE CT WEST BLOOMFIELD TOWNSHIP, MI 48322	\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/30/2021</u> Name & Address: LINDA SAMELSON 5622 CAROL RUN N WEST BLOOMFIELD TOWNSHIP, MI 48322	\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/30/2021</u> Name & Address: CAROLYN LOWE 6608 RED CEDAR LN WEST BLOOMFIELD TOWNSHIP, MI 48324	\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/30/2021</u> Name & Address: PATRICIA MARTINICO 2179 BORDEAUX ST WEST BLOOMFIELD TOWNSHIP, MI 48323	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		

Page Subtotal **250.00**

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☒ YES 4. Date of Receipt <u>09/30/2021</u> Name & Address: SHEET METAL WORKERS LOCAL 80 17100 W 12 MILE RD SOUTHFIELD, MI 48076		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/30/2021</u> Name & Address: DIANE BAUER 1141 ISLAND DR COMMERCE TWP, MI 48382		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/30/2021</u> Name & Address: KAY NOWACZOK 40430 PRITTS CT CLINTON TWP, MI 48038		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/30/2021</u> Name & Address: JENNIFER MILLER 162 RIVERSIDE DR MT CLEMENS, MI 48043		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PLAN ADMINISTRATOR</u> Employer <u>MEA</u> Business Address <u>1216 KENDALE BLVD, EAST LANSING, MI 48823</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal 1,100.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/30/2021</u> Name & Address: JEAN SCHACHERMEYER 2502 PACKARD ST #3109 ANN ARBOR, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/30/2021</u> Name & Address: LINDA FLYNN 43225 CHARDONNAY DR STERLING HEIGHTS, MI 48314 5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>250.00</u>	\$ <u>250.00</u>
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/06/2021</u> Name & Address: THEODORE METRY 657 BLAIRMOR CT GROSSE POINTE WOODS, MI 48236 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/06/2021</u> Name & Address: NANCY GLEN 8561 HENDRIE BLVD HUNTINGTON WOODS, MI 48070 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>100.00</u>	\$ <u>100.00</u>

Page Subtotal 550.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/06/2021</u> Name & Address: PEARL WALKER 6295 BROMLEY CT WEST BLOOMFIELD TOWNSHIP, MI 48322		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/06/2021</u> Name & Address: RONALD GRUMET 26515 W 13 MILE RD FRANKLIN, MI 48025		\$ <u>300.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/06/2021</u> Name & Address: DENNIS FIEMS 9095 SATELITE DR WHITE LAKE TWP, MI 48386		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/06/2021</u> Name & Address: SANDRA RAITT 271 THOMPSON BLVD BUFFALO GROVE, IL 60089		\$ <u>300.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CONSULTANT</u> Employer <u>SANDY RAITT CONSULTING, LLC</u> Business Address <u>271 THOMPSON BLVD, BUFFALO GROVE, IL 60089</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **800.00**

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/06/2021</u> Name & Address: SHAUNA COLEMAN 3989 ORCHARD HILL DR BLOOMFIELD HILLS, MI 48304		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/06/2021</u> Name & Address: SUSAN HOARD 62721 FRANKLIN PARK DR WASHINGTON, MI 48095		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/14/2021</u> Name & Address: BEN MICHELSON 215 CREST ST ANN ARBOR, MI 48103		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt _____ Name & Address: _____ _____ _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **200.00**

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

10,426.00

Enter this total on
line 3a of Summary
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **95685**

CANDIDATE COMMITTEE

2. Committee Name **LISA BROWN FOR COUNTY CLERK**

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323 If over \$100.00 cumulative, please provide: Occupation: COUNTY CLERK/ REGISTER OF DEEDS Employer Name & Business Address: OAKLAND COUNTY 1200 N TELEGRAPH, WEST BLOOMFIELD, MI 48323 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☒ Goods or Services Purchased by Candidate or Others- LOAN Description DATABASE 5. Date Of Receipt: 08/01/2021 6. Vendor Name & Address: NGP VAN, INC 1445 NEW YORK AVE NW, SUITE 200, WASHINGTON, DC 20005	\$ 960.00	\$ 960.00
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323 If over \$100.00 cumulative, please provide: Occupation: COUNTY CLERK/ REGISTER OF DEEDS Employer Name & Address: OAKLAND COUNTY 1200 N TELEGRAPH, PONTIAC, MI 48341 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☒ Goods or Services Purchased by Candidate or Others- LOAN Description DOMAIN 5. Date Of Receipt: 08/14/2021 6. Vendor Name & Address: GO DADDY OPERATING COMPANY, LLC 14455 N HAYDEN RD, SCOTTSDALE, AZ 85260	\$ 270.04	\$ 270.04
Contribution #3 PAC Receipt? ☐ Yes Name & Address: JENNIFER MILLER 162 RIVERSIDE DR MT CLEMENS, MI 48043 If over \$100.00 cumulative, please provide: Occupation: PLAN ADMINISTRATOR Employer Name & Address: MEA 1216 KENDALE BLVD, EAST LANSING, MI 48823 ☒ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☒ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description POSTAGE 5. Date Of Receipt: 09/18/2021 6. Vendor Name & Address: MASS MAILING, LLC 35468 MOUND RD, STERLING HEIGHTS, MI 48310	\$ 154.62	\$ 154.62

Page Subtotal **1,384.66** **1,230.04**

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule)

Enter this total
on line 6 of Summary
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **95685**

CANDIDATE COMMITTEE

2. Committee Name **LISA BROWN FOR COUNTY CLERK**

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323 If over \$100.00 cumulative, please provide: Occupation: COUNTY CLERK/ REGISTER OF DEEDS Employer Name & Business Address: OAKLAND COUNTY 1200 N TELEGRAPH, PONTIAC, MI 48341 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☒ Goods or Services Purchased by Candidate or Others- LOAN Description DOMAIN 5. Date Of Receipt: 09/26/2021 6. Vendor Name & Address: GO DADDY OPERATING COMPANY, LLC 14455 N HAYDEN RD, STE. 219, SCOTTSDALE, AZ 85260	\$ 42.34	\$ 42.34
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: JENNIFER MILLER 162 RIVERSIDE DR MT CLEMENS, MI 48043 If over \$100.00 cumulative, please provide: Occupation: PLAN ADMINISTRATOR Employer Name & Address: MEA 1216 KENDALE BLVD, EAST LANSING, MI 48823 ☒ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☒ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description FOOD FOR FUNDRAISER 5. Date Of Receipt: 09/30/2021 6. Vendor Name & Address: NINO SALVAGGIO 17496 HALL RD, CLINTON TWP, MI 48038	\$ 269.46	\$ 269.46
Contribution #3 PAC Receipt? ☐ Yes Name & Address: JENNIFER MILLER 162 RIVERSIDE DR MT CLEMENS, MI 48043 If over \$100.00 cumulative, please provide: Occupation: PLAN ADMINISTRATOR Employer Name & Address: MEA 1216 KENDALE BLVD, EAST LANSING, MI 48823 ☒ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☒ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description DONUTS AND CIDER 5. Date Of Receipt: 09/30/2021 6. Vendor Name & Address: ZERILLI BAKERY 42171 GARFIELD RD, CLINTON TWP, MI 48038	\$ 70.00	\$ 70.00

Page Subtotal

381.80

42.34

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule)

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **95685**

CANDIDATE COMMITTEE

2. Committee Name **LISA BROWN FOR COUNTY CLERK**

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: JENNIFER MILLER 162 RIVERSIDE DR MT CLEMENS, MI 48043 If over \$100.00 cumulative, please provide: Occupation: PLAN ADMINISTRATOR Employer Name & Business Address: MEA 1216 KENDALE BLVD, EAST LANSING, MI 48823 ☒ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☒ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description TABLES/ CLOTHS RENTALS 5. Date Of Receipt: 09/30/2021 6. Vendor Name & Address: BLOOMFIELD PARTY RENTALS 2390 FRANKLIN RD, BLOOMFIELD TWP, MI 48302	\$ 280.21	\$ 280.21
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description 5. Date Of Receipt: 6. Vendor Name & Address: Click Here for Memo Itemization	\$	\$
Contribution #3 PAC Receipt? ☐ Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description 5. Date Of Receipt: 6. Vendor Name & Address: Click Here for Memo Itemization	\$	\$

Page Subtotal

280.21

280.21

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule)

2,046.67

Enter this total
on line 6 of Summary
Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number **95685**
2. Committee Name **LISA BROWN FOR COUNTY CLERK**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name FIRST DATA Address 5565 GLENRIDGE CON ATLANTA, GA 30342 ☐ Fund Raiser	Purpose: SERVICE FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/03/2021 Date	\$ 19.95
Expenditure #2 Name FIRST DATA Address 5565 GLENRIDGE CON ATLANTA, GA 30342 ☐ Fund Raiser	Purpose: SERVICE FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/03/2021 Date	\$ 19.95
Expenditure #3 Name FIRST DATA Address 5565 GLENRIDGE CON ATLANTA, GA 30342 ☐ Fund Raiser	Purpose: SERVICE FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/03/2021 Date	\$ 53.15
Expenditure #4 Name Address ☐ Fund Raiser	Purpose: _____ Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: _____ Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page

93.05

Grand Total of all Schedules 1B
(Complete on last page of Schedule)

93.05

Enter this total
on line 8a of
Summary Page



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

This Schedule itemizes:				
a. ☒ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee. (Check either a or b. Use only for the purpose checked.)				
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 endorser 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: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD TOWNSHIP, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>08/09/2012</u> 6. <u>Original Amount of Debt:</u> <u>\$ 703.25</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>703.25</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #2 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>08/27/2012</u> 6. <u>Original Amount of Debt:</u> <u>\$ 7,000.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>7,000.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #3 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>10/03/2012</u> 6. <u>Original Amount of Debt:</u> <u>\$ 15,000.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>15,000.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Page Subtotal (Outstanding debt)				22,703.25
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

This Schedule itemizes:

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Debt #1 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>11/04/2012</u> 6. <u>Original Amount of Debt:</u> <u>\$ 6,500.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>6,500.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>03/13/2013</u> 6. <u>Original Amount of Debt:</u> <u>\$ 887.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>887.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>11/06/2015</u> 6. <u>Original Amount of Debt:</u> <u>\$ 437.08</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>437.08</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) **7,824.08**

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

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DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

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Debt #1 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>04/04/2016</u> 6. <u>Original Amount of Debt:</u> <u>\$ 2,015.45</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>2,015.45</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #2 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>05/01/2016</u> 6. <u>Original Amount of Debt:</u> <u>\$ 960.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>960.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #3 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>07/01/2016</u> 6. <u>Original Amount of Debt:</u> <u>\$ 12,000.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>12,000.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Page Subtotal (Outstanding debt)				14,975.45
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

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Debt #1 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>10/31/2016</u> 6. <u>Original Amount of Debt:</u> <u>\$ 2,000.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>2,000.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>05/10/2017</u> 6. <u>Original Amount of Debt:</u> <u>\$ 157.70</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>157.70</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>10/22/2017</u> 6. <u>Original Amount of Debt:</u> <u>\$ 960.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>960.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Page Subtotal (Outstanding debt)				3,117.70
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

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DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee **OR** b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

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Debt #1 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>10/22/2017</u> 6. <u>Original Amount of Debt:</u> \$ <u>960.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>960.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>04/09/2018</u> 6. <u>Original Amount of Debt:</u> \$ <u>960.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>960.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>04/09/2018</u> 6. <u>Original Amount of Debt:</u> \$ <u>640.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>640.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

2,560.00

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee **OR** b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

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Debt #1 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>08/01/2019</u> 6. <u>Original Amount of Debt:</u> <u>\$ 960.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>960.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>08/14/2019</u> 6. <u>Original Amount of Debt:</u> <u>\$ 246.04</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>246.04</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>09/25/2019</u> 6. <u>Original Amount of Debt:</u> <u>\$ 42.34</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>42.34</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

1,248.38

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

This Schedule itemizes:

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Debt #1 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: LOAN 5. <u>Date Debt Was Incurred:</u> 11/01/2019 6. <u>Original Amount of Debt:</u> \$ 960.00	\$ \$ \$ \$ \$	\$ 0.00	\$ 960.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: LOAN 5. <u>Date Debt Was Incurred:</u> 02/01/2020 6. <u>Original Amount of Debt:</u> \$ 960.00	\$ \$ \$ \$ \$	\$ 0.00	\$ 960.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: LOAN 5. <u>Date Debt Was Incurred:</u> 05/01/2020 6. <u>Original Amount of Debt:</u> \$ 960.00	\$ \$ \$ \$ \$	\$ 0.00	\$ 960.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

2,880.00

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

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DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

This Schedule itemizes:

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(Check either a or b. Use only for the purpose checked.)

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: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>07/28/2020</u> 6. <u>Original Amount of Debt:</u> <u>\$ 6,000.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>6,000.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>08/01/2020</u> 6. <u>Original Amount of Debt:</u> <u>\$ 960.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>960.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>08/14/2020</u> 6. <u>Original Amount of Debt:</u> <u>\$ 254.04</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>254.04</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

7,214.04

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

This Schedule itemizes:				
a. ☒ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee. (Check either a or b. Use only for the purpose checked.)				
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 endorser 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: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>10/27/2020</u> 6. <u>Original Amount of Debt:</u> <u>\$ 779.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>779.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>11/01/2020</u> 6. <u>Original Amount of Debt:</u> <u>\$ 960.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>960.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>08/01/2021</u> 6. <u>Original Amount of Debt:</u> <u>\$ 960.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>960.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Page Subtotal (Outstanding debt)				2,699.00
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

This Schedule itemizes:				
a. ☒ Debts and obligations owed <u>by</u> or forgiven the committee OR b. ☐ Debts and obligations owed <u>to</u> or forgiven <u>by</u> the committee. (Check either a or b. Use only for the purpose checked.)				
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 endorser 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: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>08/14/2021</u> 6. <u>Original Amount of Debt:</u> <u>\$ 270.04</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>270.04</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? ☐ Yes Owed to or by: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>09/26/2021</u> 6. <u>Original Amount of Debt:</u> <u>\$ 42.34</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>42.34</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ \$ \$ \$ \$	\$ _____	\$ _____ ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Page Subtotal (Outstanding debt)				312.38
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				65,534.28

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 95685
2. Committee Name LISA BROWN FOR COUNTY CLERK

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>09/30/2021</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>71</u>	5. Type of Fund Raising Activity <u>EVENING RECEPTION</u>	6. Address and Name (If any) of the place where the activity was held. <u>1695 VILLA RD</u> <u>BIRMINGHAM, MI 48009</u> ☒ Private Residence
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7. Total Contributions 10,426.00
8. Other Receipts 0.00
9. Gross Receipts (Add lines 7 and 8) 10,426.00
10. Total Cost of Event 774.29
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.