



FILED

02 DEC 2024 AM 12:18

OAKLAND COUNTY CLERK
PONTIAC, MICHIGAN

FOR OFFICIAL USE ONLY

**CANDIDATE COMMITTEE
COVER PAGE**

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: 10/21/2024 to 11/25/2024

1. Committee I.D. Number

95685

2. Committee Name

LISA BROWN FOR COUNTY CLERK

4. Candidate Last Name

BROWN

First Name

LISA

M.I.

R

4a. Office Sought Including District # or Community Served (If applicable)

COUNTY CLERK/REGISTER OF DEEDS, OAKLAND COUNTY

4b. County of Residence **OAKLAND COUNTY**

5. Committee's Mailing Address

**PO BOX 251552
WEST BLOOMFIELD, MI 48325**

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.

6. Treasurer's Name & Residential Address

**LISA R BROWN
4480 STRATHDALE LN.
WEST BLOOMFIELD, MI 48323**

Area Code & Phone (248) 953-1050

7. Treasurer's Business Address

**4480 STRATHDALE LN.
WEST BLOOMFIELD, MI 48323**

Area Code and Phone (248) 953-1050

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)

**FRED MILLER
51 GROSSE PINES DR
ROCHESTER HILLS, MI 48309**

Area Code and Phone (586) 322-0072

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

11/05/2024

Required ONLY if candidate is not on the ballot for the current year:

- ☐ July Quarterly
☐ October Quarterly

9c. ☐ Annual Statement ()
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 late 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: 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

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

12/02/2024

Candidate

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

12/02/2024



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 95685

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name LISA BROWN FOR COUNTY CLERK

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>12,205.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>12,205.00</u>	(18.) \$ <u>82,975.00</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>12,205.00</u>	(20.) \$ <u>82,975.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>0.00</u>	(21.) \$ <u>18,734.42</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>3,248.42</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>3,248.42</u>	(23.) \$ <u>68,626.38</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>66,494.28</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>20,828.72</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>12,205.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>33,033.72</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>3,248.42</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>29,785.30</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>10/24/2024</u>	
Name & Address: GARY KARP 4455 S BAY DR ORCHARD LAKE VILLAGE, MI 48323		\$ <u>1,000.00</u>	\$ <u>1,000.00</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>10/24/2024</u>	
Name & Address: LINDA SAMELSON 5622 CAROL RUN N WEST BLOOMFIELD TOWNSHIP, MI 48322		\$ <u>25.00</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>10/24/2024</u>	
Name & Address: PEARL WALKER 6295 BROMLEY CT WEST BLOOMFIELD TOWNSHIP, MI 48322		\$ <u>100.00</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>10/24/2024</u>	
Name & Address: SIDNEY KARDON 13307 VERNON 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			

Page Subtotal **1,175.00**

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>10/24/2024</u>	
Name & Address: FARMINGTON DEMOCRATIC CLUB 28825 SALEM FARMINGTON HILLS, MI 48334		\$ <u>400.00</u>	\$ <u>400.00</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>10/28/2024</u>	
Name & Address: SHEET METAL WORKERS LOCAL 80 17100 W 12 MILE RD SOUTHFIELD, MI 48076		\$ <u>280.00</u>	\$ <u>1,160.00</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>10/28/2024</u>	
Name & Address: HENRY GRIX 6100 WING LAKE RD BLOOMFIELD HILLS, MI 48301		\$ <u>300.00</u>	\$ <u>800.00</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>10/29/2024</u>	
Name & Address: PAUL BORUCKI 3053 CARLY CT AUBURN HILLS, MI 48326		\$ <u>50.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal 1,030.00

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>10/30/2024</u> Name & Address: UAW MICHIGAN V- PAC 8000 E JEFFERSON AVE DETROIT, MI 48214	\$ <u>10,000.00</u>	\$ <u>10,000.00</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 _____ Name & Address _____	\$ _____	\$ _____
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 _____ Name & Address _____	\$ _____	\$ _____
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

10,000.00

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

12,205.00

Enter this total on
line 3a 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 ACTBLUE Address 366 SUMMER ST SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/23/2024 Date	\$ 2.08
Expenditure #2 Name ACTBLUE Address 366 SUMMER ST SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/25/2024 Date	\$ 37.23
Expenditure #3 Name NGP VAN Address 1445 NEW YORK AVE NW WASHINGTON, DC 20005 ☐ Fund Raiser	Purpose: DATABASE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/28/2024 Date	\$ 960.00
Expenditure #4 Name PRACTICAL POLITICAL DATA Address 1197 PRESCOTT DR EAST LANSING, MI 48823 ☐ Fund Raiser	Purpose: CONSULTING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/28/2024 Date	\$ 250.00
Expenditure #5 Name POSTMASTER Address 7007 METRO PKWY STERLING HEIGHTS, MI 48311 ☐ Fund Raiser	Purpose: POSTAGE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/29/2024 Date	\$ 1,644.38

Subtotal this page **2,893.69**

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

Enter this total
on line 8a 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 MASS MAILING LLC Address 35468 MOUND RD STERLING HEIGHTS, MI 48310 ☐ Fund Raiser	Purpose: MAILING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/29/2024 Date	\$ 332.70
Expenditure #2 Name ACTBLUE Address 366 SUMMER ST SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/31/2024 Date	\$ 2.08
Expenditure #3 Name FIRST DATA Address 5565 GLENRIDGE CON ATLANTA, GA 30342 ☐ Fund Raiser	Purpose: SERVICE FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	11/04/2024 Date	\$ 19.95
Expenditure #4 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	_____ Date	\$ _____
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	_____ Date	\$ _____

Subtotal this page **354.73**
Grand Total of all Schedules 1B
(Complete on last page of Schedule) **3,248.42**

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.



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.
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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)

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.

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

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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

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>10/31/2016</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)

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.

Enter this total on line 12a "owed by" or line 12b "owed to" of the 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, 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)

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.

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

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>11/01/2019</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>02/01/2020</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>05/01/2020</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: \$ _____				

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)

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.

Enter this total on line 12a "owed by" or line 12b "owed to" of the 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, 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)

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.

Enter this total on line 12a "owed by" or line 12b "owed to" of the 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.
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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)

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.

Enter this total on line 12a "owed by" or line 12b "owed to" of the 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.
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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: LISA BROWN 4480 STRATHDALE LN WEST BLOOMFIELD, MI 48323	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>08/03/2023</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)

1,272.38

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

66,494.28

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.