



FILED

26 JUL 2026 PM 11:41

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: 01/01/2026 to 07/20/2026

1. Committee I.D. Number

95685

2. Committee Name

LISA BROWN FOR COUNTY CLERK

4. Candidate Last Name First Name M.I.

BROWN LISA 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

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

- ☒ July Quarterly
☐ October Quarterly

9c. ☐ Annual Statement (2026)
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: 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

07/26/2026

Candidate

Type or Print Name

Signature

Submitted electronically,
signature on file

Date

07/26/2026



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>7,020.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>7,020.00</u>	(18.) \$ <u>12,920.00</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>7,020.00</u>	(20.) \$ <u>12,920.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>1,084.37</u>	(21.) \$ <u>4,538.17</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0.00</u>	(22.) \$ <u>0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>1,142.26</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>1,142.26</u>	(23.) \$ <u>2,415.31</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>34,412.25</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>7,020.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>41,432.25</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>1,142.26</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>40,289.99</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>01/31/2026</u>	
Name & Address: LISA MENUCK 990 PIERCE ST BIRMINGHAM, MI 48009		\$ <u>50.00</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>01/31/2026</u>	
Name & Address: JENNIFER MILLER 51 GROSSE PINES DR ROCHESTER HILLS, MI 48309		\$ <u>50.00</u>	\$ <u>50.00</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			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>01/31/2026</u>	
Name & Address: GILDA JACOBS 8353 HENDRIE BLVD HUNTINGTON WOODS, MI 48070		\$ <u>100.00</u>	\$ <u>175.00</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>01/31/2026</u>	
Name & Address: MARGO LESSER 862 EDMONT RUN BLOOMFIELD HILLS, MI 48304		\$ <u>25.00</u>	\$ <u>25.00</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 225.00

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>02/01/2026</u>	
Name & Address: THOMAS HITCHMAN 5275 N ADAMS RD BLOOMFIELD HILLS, MI 48304		\$ <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>02/01/2026</u>	
Name & Address: JOHN FOX 408 STEADFIELD ST COMMERCE, MI 48382		\$ <u>25.00</u>	\$ <u>25.00</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>02/03/2026</u>	
Name & Address: SUZANNE SIMON 5600 DRAKE RD #326 WEST BLOOMFIELD, MI 48322		\$ <u>36.00</u>	\$ <u>36.00</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			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>02/17/2026</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 <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser			

Page Subtotal **161.00**

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
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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>05/09/2026</u>	
Name & Address: MARC SUSSMAN 13154 BORGMAN AVE HUNTINGTON WOODS, MI 48070		\$ <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			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/09/2026</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>05/09/2026</u>	
Name & Address: CYNTHIA CHURCHES 22215 PONDVIEW NOVI, MI 48375		\$ <u>50.00</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 # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/09/2026</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 <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal 420.00

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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/10/2026</u>	
Name & Address: DAVID SABBAGH 3597 ROBINA AVE BERKLEY, MI 48072		\$ <u>100.00</u>	\$ <u>100.00</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			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/10/2026</u>	
Name & Address: MARI KAFTAN 2970 OAKBROOKE CT WEST BLOOMFIELD TOWNSHIP, MI 48323		\$ <u>50.00</u>	\$ <u>100.00</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			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/10/2026</u>	
Name & Address: SUZANNE SIMON 5600 DRAKE RD #326 WEST BLOOMFIELD, MI 48322		\$ <u>36.00</u>	\$ <u>72.00</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			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/10/2026</u>	
Name & Address: STEVEN ARTT 28317 FORESTBROOK DR FARMINGTON HILLS, MI 48334		\$ <u>50.00</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 236.00

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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/11/2026</u>	
Name & Address: LAWRENCE WOLFE 4786 S CHIPPING GLEN RD BLOOMFIELD HILLS, MI 48302		\$ <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>05/11/2026</u>	
Name & Address: NANCY GLEN 8561 HENDRIE BLVD HUNTINGTON WOODS, MI 48070		\$ <u>50.00</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>05/11/2026</u>	
Name & Address: DIANE KLEIN 29260 FRANKLIN RD #618 SOUTHFIELD, MI 48034		\$ <u>50.00</u>	\$ <u>50.00</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			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/11/2026</u>	
Name & Address: MARLENE BRESLER 5361 OLD POND WAY WEST BLOOMFIELD TOWNSHIP, MI 48323		\$ <u>75.00</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			

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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/11/2026</u>	
Name & Address: HARVEY BRONSTEIN 22490 HALLCROFT TRAIL SOUTHFIELD, MI 48034		\$ <u>50.00</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>05/11/2026</u>	
Name & Address: RICK FLYNN 43225 CHARDONNAY DR STERLING HEIGHTS, MI 48314		\$ <u>200.00</u>	\$ <u>450.00</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>05/12/2026</u>	
Name & Address: NINA ABRAMS 12959 TALBOT LN HUNTINGTON WOODS, MI 48070		\$ <u>500.00</u>	\$ <u>600.00</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>05/12/2026</u>	
Name & Address: WILLIAM STERN 6727 POST OAK DR WEST BLOOMFIELD TOWNSHIP, MI 48322		\$ <u>50.00</u>	\$ <u>75.00</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 800.00

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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/12/2026</u>	
Name & Address: ALICIA NELSON 29336 CHANTICLEER DR E SOUTHFIELD, MI 48034		\$ <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>05/12/2026</u>	
Name & Address: CLAUDIA SILLS 120 HAWTHORNE BIRMINGHAM, MI 48009		\$ <u>300.00</u>	\$ <u>550.00</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, SUITE 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>05/12/2026</u>	
Name & Address: LEO LALONDE 24801 ROSALIND AVE EASTPOINTE, MI 48021		\$ <u>100.00</u>	\$ <u>200.00</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>05/13/2026</u>	
Name & Address: JODY DEFOE 23470 RIVERVIEW DR SOUTHFIELD, MI 48034		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>DEPUTY COUNTY TREASURER</u> Employer <u>OAKLAND COUNTY</u> Business Address <u>1200 N TELEGRAPH, PONTIAC, MI 48341</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal 550.00

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3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/13/2026</u>	
Name & Address: CATHY KING 3555 TYLER AVE BERKLEY, MI 48072		\$ <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 #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/14/2026</u>	
Name & Address: EVE PICKMAN 315 RIVARD BLVD WATERFORD, MI 48327		\$ <u>50.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>COPYWRITER</u> Employer <u>ONE 10 MARKETING</u> Business Address <u>2800 LIVERNOIS RD, SUITE 400, TROY, MI 48083</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/15/2026</u>	
Name & Address: ASHLEY LOWE 1893 LONG POINTE DR BLOOMFIELD TWP, MI 48302		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>LAKE SHORE LEGAL AID</u> Business Address <u>35 W HURON ST, PONTIAC, MI 48342</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/15/2026</u>	
Name & Address: MARY MILLS 5065 CROOKS RD #51 ROYAL OAK, MI 48073		\$ <u>50.00</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 **450.00**

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**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>05/15/2026</u> Name & Address: GILDA JACOBS 8353 HENDRIE BLVD HUNTINGTON WOODS, MI 48070		\$ <u>100.00</u>	\$ <u>275.00</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>05/15/2026</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 <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>05/16/2026</u> Name & Address: FERN COHEN 4260 OLD DOMINION DR WEST BLOOMFIELD TOWNSHIP, MI 48323		\$ <u>25.00</u>	\$ <u>25.00</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>05/18/2026</u> Name & Address: DONNA STACHE 3640 WORTHINGTON CT ROCHESTER HILLS, MI 48309		\$ <u>25.00</u>	\$ <u>25.00</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 225.00

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>05/18/2026</u>	
Name & Address: SONDRA SCHREIR 20665 BRADFORD CT SOUTHFIELD, MI 48076		\$ <u>50.00</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>05/19/2026</u>	
Name & Address: NAT PERNICK 13313 LUDLOW AVE HUNTINGTON WOODS, MI 48070		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>PATHOLOGY/OUTLINES.COM INC</u> Business Address <u>30150 TELEGRAPH RD, SUITE 119, BINGHAM FARMS, MI 48025</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/20/2026</u>	
Name & Address: LAUREN COHEN 26550 HENDRIE BLVD HUNTINGTON WOODS, MI 48070		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SALES</u> Employer <u>LEON & LULU</u> Business Address <u>96 W 14 MILE RD, CLAWSON, MI 48017</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/20/2026</u>	
Name & Address: SILVERENIA KANOYTON 23780 RAVINEVIEW CT BINGHAM FARMS, MI 48025		\$ <u>25.00</u>	\$ <u>25.00</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 275.00

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

Enter this total on
line 3a of Summary
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**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>05/22/2026</u> Name & Address: JOSEPH KAPELCZAK 3656 LORENA DR WATERFORD TWP, MI 48329		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SURVEYOR</u> Employer <u>TRI-COUNTY SURVEYING LLC</u> Business Address <u>8615 RICHARDSON RD, COMMERCE, MI 48390</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/24/2026</u> Name & Address: PAUL BORUCKI 3053 CARLY CT AUBURN HILLS, MI 48326		\$ <u>200.00</u>	\$ <u>300.00</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			
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/26/2026</u> Name & Address: JAMES RYDER 1115 CHAPIN AVE 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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/26/2026</u> Name & Address: JUDITH CUNNINGHAM 2897 COLONIAL TRAIL BLOOMFIELD HILLS, MI 48304		\$ <u>100.00</u>	\$ <u>200.00</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 700.00

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

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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>05/27/2026</u>	
Name & Address: PATRICIA MARTINICO 2179 BORDEAUX ST WEST BLOOMFIELD TOWNSHIP, MI 48323		\$ <u>100.00</u>	\$ <u>200.00</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>05/28/2026</u>	
Name & Address: ZINA KRAMER 1600 APPLE LN BLOOMFIELD HILLS, MI 48302		\$ <u>100.00</u>	\$ <u>100.00</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			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/28/2026</u>	
Name & Address: CRAIG JONES 11715 MEADOW PL WASHINGTON, MI 48094		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CHIEF DEPUTY REGISTER</u> Employer <u>OAKLAND COUNTY</u> Business Address <u>1200 N TELEGRAPH, PONTIAC,</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/28/2026</u>	
Name & Address: HARVEY BECK 33000 COVINGTON CLUB DR APT 30 FARMINGTON HILLS, MI 48334		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address <u>MI</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal 400.00

Grand Total of All Schedules 1A
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line 3a of Summary
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**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>05/29/2026</u>	
Name & Address: BRIAN DEREY 33 NORWICH PLEASANT RIDGE, MI 48069		\$ <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>05/30/2026</u>	
Name & Address: JOSEPHINE DUCO 10784 LASALLE BLVD HUNTINGTON WOODS, MI 48070		\$ <u>25.00</u>	\$ <u>25.00</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>05/30/2026</u>	
Name & Address: BARRY LEPLER 13159 NADINE AVE HUNTINGTON WOODS, MI 48070		\$ <u>50.00</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 # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/31/2026</u>	
Name & Address: ROBERT MIJAC 43710 VIA ANTONIO DR STERLING HEIGHTS, MI 48314		\$ <u>50.00</u>	\$ <u>129.89</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BUSINESS OWNER</u> Employer <u>SELF</u> Business Address <u>35468 MOUND RD, STERLING HEIGHTS, MI 48310</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal 375.00

Grand Total of All Schedules 1A
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line 3a of Summary
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**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>05/31/2026</u>	
Name & Address: SHADIA MARTINI 1717 HERON RIDGE DR BLOOMFIELD TWP, MI 48302		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>REAL ESTATE BROKER</u> Employer <u>SELF</u> Business Address <u>1717 HERON RIDGE DR, BLOOMFIELD HILLS, MI 48302</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/31/2026</u>	
Name & Address: GERALDINE BARCLAY 32241 SOUTHFIELD RD BEVERLY HILLS, MI 48025		\$ <u>100.00</u>	\$ <u>200.00</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>05/31/2026</u>	
Name & Address: BETHANN KALT 1743 BELLWOOD CT BLOOMFIELD TWP, MI 48302		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PSYCHOLOGIST</u> Employer <u>SELF</u> Business Address <u>1743 BELLWOOD CT, MI 48302</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/31/2026</u>	
Name & Address: ELAINE MILLER 30300 NORTHWESTERN HWY FARMINGTON HILLS, MI 48334		\$ <u>250.00</u>	\$ <u>750.00</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 550.00

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

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line 3a of Summary
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**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>05/31/2026</u>	
Name & Address: ANNSLEY METZ 3007 VINSETTA BLVD ROYAL OAK, MI 48073		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PHYSICIAN'S ASSISTANT</u> Employer <u>HURLEY MEDICAL CENTER</u> Business Address <u>ONE HURLEY PLAZA, FLINT, MI 48503</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/31/2026</u>	
Name & Address: VALERIE QUINN 4753 ENNISMORE DR VILLAGE OF CLARKSTON, MI 48346		\$ <u>250.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ADMINISTRATIVE ASSISTANT</u> Employer <u>OAKLAND COUNTY</u> Business Address <u>1200 N TELEGRAPH, PONTIAC, MI 48341</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/31/2026</u>	
Name & Address: RANDY MILLER 3555 FOREST HILL RD BLOOMFIELD HILLS, MI 48302		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>RANDALL S. MILLER AND ASSOCIATES</u> Business Address <u>43252 WOODWARD AVE, BLOOMFIELD TWP, MI 48302</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>05/31/2026</u>	
Name & Address: JOHN RAUCHMAN 1067 PEARSON ST FERNDAL, MI 48220		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ADMINISTRATIVE ASSISTANT</u> Employer <u>MEA</u> Business Address <u>13969 PLUMBROOK RD, STERLING HEIGHTS, MI 48312</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal 700.00

Grand Total of All Schedules 1A
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line 3a of Summary
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**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>05/31/2026</u> Name & Address: COUNTY EMPLOYEES FOR GOOD GOVERNMENT PAC 10785 KINGSTON AVE HUNTINGTON WOODS, MI 48070		\$ <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>05/31/2026</u> Name & Address: LUTHER TAYLOR 17556 E GOLDWIN ST SOUTHFIELD, MI 48075		\$ <u>3.00</u>	\$ <u>8.00</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>06/01/2026</u> Name & Address: CLAUDIA OSBORN 10554 LUDLOW AVE HUNTINGTON WOODS, MI 48070		\$ <u>25.00</u>	\$ <u>25.00</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			
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/02/2026</u> Name & Address: STANLEY BERSHAD 4824 PARK HILL CT WEST BLOOMFIELD TOWNSHIP, MI 48323		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>GOLDSTEIN BERSHAD AND FRIED PC</u> Business Address <u>4000 TOWN CENTER, SUITE 1200, SOUTHFIELD, MI 48075</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal **178.00**

Grand Total of All Schedules 1A
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line 3a of Summary
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**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>06/17/2026</u>	
Name & Address: JUDITH ANCELL 3300 CRUMB RD APT 116 COMMERCE, MI 48390		\$ <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>06/24/2026</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 <u>ARTIST</u> Employer <u>SELF</u> Business Address <u>3073 MASSENA AVE, COMMERCE TWP, MI 48382</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>06/26/2026</u>	
Name & Address: DEBORAH VANDER 26724 HUMBER ST 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 _____	
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 **350.00**

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

7,020.00

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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 <u>all</u> 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: FRED MILLER 51 GROSSE PINES DR ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: DEPUTY COUNTY CLERK/REGISTER 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 WEBSITE 5. Date Of Receipt: 03/30/2026 6. Vendor Name & Address: GO DADDY. COM, LLC 100 S MILL AVE, SUITE 1600, TEMPE, AZ 85281	\$ 203.88	\$ 601.79
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: FRED MILLER 51 GROSSE PINES DR ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: DEPUTY COUNTY CLERK/REGISTER 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 INVITATIONS 5. Date Of Receipt: 04/14/2026 6. Vendor Name & Address: GREAT PAPERS 555 WATERS EDGE LN, LOMBARD, IL 60148	\$ 165.23	\$ 767.02
Contribution #3 PAC Receipt? ☐ Yes Name & Address: FRED MILLER 51 GROSSE PINES DR ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: DEPUTY COUNTY CLERK/REGISTER 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 ENVELOPES 5. Date Of Receipt: 04/21/2026 6. Vendor Name & Address: STAPLES 1950 S ROCHESTER RD, ROCHESTER HILLS, MI 48307	\$ 117.51	\$ 884.53

Page Subtotal **486.62** **0.00**

Grand Total of all Schedules 1-IK
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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 <u>all</u> 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: FRED MILLER 51 GROSSE PINES DR ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: DEPUTY COUNTY CLERK/REGISTER 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 ICE CREAM 5. Date Of Receipt: 05/31/2026 6. Vendor Name & Address: TREAT DREAMS 22965 WOODWARD AVE, FERNDAL, MI 48220	\$ 207.76	\$ 1,092.29
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: FRED MILLER 51 GROSSE PINES DR ROCHESTER HILLS, MI 48309 If over \$100.00 cumulative, please provide: Occupation: DEPUTY COUNTY CLERK/REGISTER 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 MAILING 5. Date Of Receipt: 06/03/2026 6. Vendor Name & Address: MASS MAILING 35468 MOUND RD, STERLING HEIGHTS, MI 48310	\$ 389.99	\$ 1,482.28
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 **597.75** **1,482.28**

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) **1,084.37**

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 ACTBLUE Address 366 SUMMER ST SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: PROCESSING FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	02/19/2026 Date	\$ 16.13
Expenditure #2 Name AMERICAN GRAPHICS PRINTING CO Address 34895 GROESBECK HWY CLINTON TWP, MI 48035 ☐ Fund Raiser	Purpose: LETTERHEAD AND ENVELOPES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/14/2026 Date	\$ 967.80
Expenditure #3 Name GO DADDY Address 2155 E GODADDY WAY TEMPE, AZ 85284 ☐ Fund Raiser	Purpose: DOMAIN ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/11/2026 Date	\$ 46.38
Expenditure #4 Name ACTBLUE Address 366 SUMMER ST SOMERVILLE, MA 02144 ☐ Fund Raiser	Purpose: PROCESSING FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/03/2026 Date	\$ 111.95
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page **1,142.26**
Grand Total of all Schedules 1B
(Complete on last page of Schedule) **1,142.26**

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

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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.
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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)

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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

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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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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)

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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>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)

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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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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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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>11/01/2019</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)

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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>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)

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DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

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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 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.
(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: 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.



**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 05/31/2026	4. Number of Individuals Attending or Participating (whichever is greater) 59	5. Type of Fund Raising Activity ICE CREAM SUNDAES	6. Address and Name (If any) of the place where the activity was held. TREAT DREAMS 22965 WOODWARD AVE FERNDAL, MI 48220 ☐ Private Residence
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7. Total Contributions **6,634.00**
8. Other Receipts **880.49**
9. Gross Receipts (Add lines 7 and 8) **7,514.49**
10. Total Cost of Event **0.00**
(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.