



FILED
01 SEP 2022 AM 11:49
WASHTENAW COUNTY CLERK
ANN ARBOR, MICHIGAN

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**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: 07/18/2022 to 08/22/2022

1. Committee I.D. Number
C-2022-001

2. Committee Name
COMMITTEE TO ELECT CYNTHIA HARRISON

4. Candidate Last Name First Name M.I.
HARRISON **CYNTHIA** **D**

4a. Office Sought Including District # or Community Served (If applicable)
COUNCIL MEMBER, WARD 1, ANN ARBOR

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

5. Committee's Mailing Address
**P.O. BOX 131354
ANN ARBOR, MI 48113**

Area Code and Phone (734) 834-4946
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
**AMY SAMPLE
2719 PROVINCETOWN CT.
ANN ARBOR, MI 48103**

Area Code & Phone (734) 945-7897

7. Treasurer's Business Address
**2719 PROVINCETOWN CT.
ANN ARBOR, MI 48103**

Area Code and Phone (734) 945-7897

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

Area Code and Phone () -

9. TYPE OF STATEMENT

9a. Pre-Election OR 9b. Post-Election

Pre-Election or Post-Election Statement relates to:

Primary
 General
 Convention
 Special
 School
 Caucus

Date of Election, Convention or Caucus
08/02/2022

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 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	/	Submitted electronically, signature on file _____ Signature	Date <u>09/01/2022</u>
Candidate _____ Type or Print Name	/	Submitted electronically, signature on file _____ Signature	Date <u>09/01/2022</u>



1. Committee I.D. Number C-2022-001

2. Committee Name COMMITTEE TO ELECT CYNTHIA HARRISON

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>405.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>405.00</u>	(18.) \$ <u>39,856.20</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>405.00</u>	(20.) \$ <u>39,856.20</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>0.00</u>	(21.) \$ <u>1,865.00</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>7,545.69</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>7,545.69</u>	(23.) \$ <u>31,660.53</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>0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0.00</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>15,336.36</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>405.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>15,741.36</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>7,545.69</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>8,195.67</u> *	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2022-001
2. Committee Name COMMITTEE TO ELECT CYNTHIA HARRISON

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? <input type="checkbox"/> YES 4. Date of Receipt <u>07/18/2022</u> Name & Address: KAREN WATANABE 1619 GRANGER AVE ANN ARBOR, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>25.00</u>	\$ <u>75.00</u>
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/25/2022</u> Name & Address: TONYA BERRY 2255 WOODHAVEN CT ANN ARBOR, MI 48105 5. If over \$100.00 cumulative, please provide: Occupation <u>UTILITY EXECUTIVE</u> Employer <u>CONSUMERS ENERGY</u> Business Address <u>1 ENERGY PLAZA, JACKSON, MI 49201</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/26/2022</u> Name & Address: MARYANN SAROSI 1322 BROOKLYN AVE ANN ARBOR, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation <u>CONSULTANT</u> Employer <u>SELF</u> Business Address <u>1322 BROOKLYN AVE, ANN ARBOR, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/27/2022</u> Name & Address: SANDRA SMITH 515 N ASHLEY ST ANN ARBOR, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation <u>REAL ESTATE BROKER</u> Employer <u>TRILLIUM REAL ESTATE</u> Business Address <u>323 BRAUN CT, ANN ARBOR, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>

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 C-2022-001
2. Committee Name COMMITTEE TO ELECT CYNTHIA HARRISON

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? <input type="checkbox"/> YES 4. Date of Receipt <u>07/28/2022</u> Name & Address: AMANDA SLAYBAUGH 812 BARTON DR ANN ARBOR, MI 48105 5. If over \$100.00 cumulative, please provide: Occupation <u>FUNDRAISER</u> Employer <u>UNIVERSITY OF MICHIGAN</u> Business Address <u>1000 S STATE ST, ANN ARBOR, MI 48109</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>25.00</u>	\$ <u>25.00</u>
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/31/2022</u> Name & Address: LEIF ELIAS 3443 OAK DR ANN ARBOR, MI 48105 5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>3443 OAK DR, ANN ARBOR, MI 48105</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>25.00</u>	\$ <u>225.00</u>
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/04/2022</u> Name & Address: S. KARENE MOORE 1108 FOUNTAIN ST ANN ARBOR, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>WASHTENAW COUNTY CIRCUIT COURT</u> Business Address <u>3235 FERNWOOD AVE, ANN ARBOR, MI 48108</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>200.00</u>
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/11/2022</u> Name & Address: JEAN LEVERICH 912 POMONA RD ANN ARBOR, MI 48103 5. If over \$100.00 cumulative, please provide: Occupation <u>SOCIAL WORKER</u> Employer <u>SELF</u> Business Address <u>912 POMONA RD, ANN ARBOR, MI 48103</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>10.00</u>	\$ <u>105.00</u>

Page Subtotal **110.00**

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 C-2022-001
2. Committee Name COMMITTEE TO ELECT CYNTHIA HARRISON

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? <input type="checkbox"/> YES 4. Date of Receipt <u>08/13/2022</u> Name & Address: <u>LAURETTA CODRINGTON</u> <u>2116 THALER AVE</u> <u>ANN ARBOR, MI 48103</u>	\$ <u>20.00</u>	\$ <u>160.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PHARMACY TECH</u> Employer <u>RITE AID PHARMACY</u> Business Address <u>2116 THALER AVE, ANN ARBOR, MI 48103</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/15/2022</u> Name & Address: <u>AARON TYSON</u> <u>731 S PLYMOUTH CT</u> <u>APARTMENT #714 BB</u> <u>CHICAGO, IL 60605</u>	\$ <u>25.00</u>	\$ <u>175.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EVENT MANAGER</u> Employer <u>CARHARTT</u> Business Address <u>1300 E LAFAYETTE ST, DETROIT, MI 48207</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/18/2022</u> Name & Address: <u>KAREN WATANABE</u> <u>1619 GRANGER AVE</u> <u>ANN ARBOR, MI 48104</u>	\$ <u>25.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>NOT EMPLOYED</u> Employer <u>NOT EMPLOYED</u> Business Address <u>1619 GRANGER AVE, ANN ARBOR, MI 48104</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address: _____	\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		

[Click Here for Memo Itemization](#)

Page Subtotal	70.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	405.00

Enter this total on line 3a of Summary Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2022-001
2. Committee Name COMMITTEE TO ELECT CYNTHIA HARRISON

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ALLIED MEDIA Address 247 N FENWAY DR FENTON, MI 48430 <input type="checkbox"/> Fund Raiser	Purpose: <u>PRINT MAIL</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/20/2022</u> Date	<u>\$ 1,279.73</u>
Expenditure #2 Name ALLIED MEDIA Address 247 N FENWAY DR FENTON, MI 48430 <input type="checkbox"/> Fund Raiser	Purpose: <u>PRINT MAIL</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/21/2022</u> Date	<u>\$ 1,205.25</u>
Expenditure #3 Name ALLIED MEDIA Address 247 N FENWAY DR FENTON, MI 48430 <input type="checkbox"/> Fund Raiser	Purpose: <u>PRINT MAIL</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/21/2022</u> Date	<u>\$ 197.86</u>
Expenditure #4 Name ALLIED MEDIA Address 247 N FENWAY DR FENTON, MI 48430 <input type="checkbox"/> Fund Raiser	Purpose: <u>PRINT MAIL</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/25/2022</u> Date	<u>\$ 812.59</u>
Expenditure #5 Name SCALE TO WIN Address 13742 HARPER ST SANTA ANA, CA 92703 <input type="checkbox"/> Fund Raiser	Purpose: <u>TEXTING SERVICES</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/26/2022</u> Date	<u>\$ 311.54</u>

Subtotal this page **3,806.97**

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 C-2022-001
2. Committee Name COMMITTEE TO ELECT CYNTHIA HARRISON

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ACT BLUE Address PO BOX 441146 SOMERVILLE, MA 02144 <input type="checkbox"/> Fund Raiser	Purpose: <u>SERVICE FEE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/31/2022</u> Date	\$ <u>3.76</u>
Expenditure #2 Name BLUE PATH SOLUTIONS LLC Address PO BOX 2861 ANN ARBOR, MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>CONSULTING</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/02/2022</u> Date	\$ <u>1,400.00</u>
Expenditure #3 Name SCALE TO WIN Address 13742 HARPER ST SANTA ANA, CA 92703 <input type="checkbox"/> Fund Raiser	Purpose: <u>TEXTING SERVICES</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/04/2022</u> Date	\$ <u>196.00</u>
Expenditure #4 Name BLUE PATH SOLUTIONS LLC Address PO BOX 2861 ANN ARBOR, MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>CONSULTING</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/08/2022</u> Date	\$ <u>2,127.00</u>
Expenditure #5 Name ACTION NETWORK Address 39144 OCEAN DR GUALALA, CA 95445 <input type="checkbox"/> Fund Raiser	Purpose: <u>EMAIL SERVICE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/08/2022</u> Date	\$ <u>10.00</u>

Subtotal this page **3,736.76**
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 C-2022-001
2. Committee Name COMMITTEE TO ELECT CYNTHIA HARRISON

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ACT BLUE Address PO BOX 441146 SOMERVILLE, MA 02144 <input type="checkbox"/> Fund Raiser	Purpose: <u>SERVICE FEE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/22/2022</u> Date	\$ <u>1.96</u>
Expenditure #2 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #3 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #4 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page **1.96**
Grand Total of all Schedules 1B
(Complete on last page of Schedule) **7,545.69**

Enter this total on line 8a of Summary Page