MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

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 07/19/2026

1. Committee I.D. Number
C-2021-019

2. Committee Name
JENNIFER CORNELL FOR ANN ARBOR

4. Candidate Last Name: CORNELL First Name: JENNIFER M.I.: E

4a. Office Sought Including District # or Community Served (If applicable)
COUNCIL MEMBER, WARD 5, ANN ARBOR

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

5. Committee's Mailing Address
1402 W. WASHINGTON ST.
ANN ARBOR, MI 48103

Area Code and Phone (734) 649-1975
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
JOAN LOWENSTEIN
502 BURSON PL.
ANN ARBOR, MI 48104

Area Code & Phone (734) 649-1975

7. Treasurer's Business Address
502 BURSON PL.
ANN ARBOR, MI 48104

Area Code and Phone (734) 649-1975

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. [X] Pre-Election **OR** 9b. [ ] Post-Election

Pre-Election or Post-Election Statement relates to:

- [X] Primary
- [ ] General
- [ ] Convention
- [ ] Special
- [ ] School
- [ ] Caucus

Date of Election, Convention or Caucus
08/04/2026

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 oustanding assets, owes no lates fees or has any oustanding 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 _____ / _____ Submitted electronically, signature on file Date _____
Type or Print Name Signature

Candidate _____ / _____ Submitted electronically, signature on file Date _____
Type or Print Name Signature

Authority granted under P.A. 388 of 1976

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number C-2021-019

SUMMARY PAGE
CANDIDATE COMMITTEE

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) $ 21,093.31	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $ 21,093.31	(18.) $ 32,164.82
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) $ 0.00	(19.) $ 0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) $ 21,093.31	(20.) $ 32,164.82
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) $ 125.93	(21.) $ 980.56
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) $ 0.00	(22.) $ 0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) $ 17,961.18	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) $ 0.00	
c. Unitemized (less than $50.01 each - no Schedule)	(8c.) $ 0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) $ 17,961.18	(23.) $ 18,458.28
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) $ 125.00	
b. Unitemized (less than $50.01 each - no Schedule)	(10b.) $ 0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) $ 125.00	(24.) $ 1,125.00
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed **by** the Committee (Schedule 1E)	(12a.) $ 0.00	
b. Owed **to** the Committee (Schedule 1E)	(12b.) $ 0.00	

BALANCE STATEMENT

13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) $ 12,151.43
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + $ 21,093.31
15. SUBTOTAL Add lines 13 and 14	(15.) = $ 33,244.74
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $ 18,086.18
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $ 15,158.56 *

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2021-019

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 01/02/2026

Name & Address:
JEAN LEVERICH
912 POMONA RD
ANN ARBOR, MI 48103

$ 25.00 $ 275.00

5. If over $100.00 cumulative, please provide:

Occupation CLINICAL SOCIAL WORKER Employer UNIVERSITY OF MICHIGAN

Business Address 912 POMONA RD, ANN ARBOR, MI 48103

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/02/2026

Name & Address
LAUREN BIGELOW
4031 THORNOAKS DR
ANN ARBOR, MI 48104

$ 100.00 $ 100.00

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 02/02/2026

Name & Address:
JEAN LEVERICH
912 POMONA RD
ANN ARBOR, MI 48103

$ 25.00 $ 300.00

5. If over $100.00 cumulative, please provide:

Occupation CLINICAL SOCIAL WORKER Employer UNIVERSITY OF MICHIGAN

Business Address 912 POMONA RD, ANN ARBOR, MI 48103

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 02/06/2026

Name & Address
LINH SONG
1290 BARDSTOWN TRAIL
ANN ARBOR, MI 48105

$ 1,225.00 $ 1,225.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal 1,375.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2021-019

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 02/11/2026

Name & Address:
MELISSA ADAMS
1016 DANIEL ST
ANN ARBOR, MI 48103

$ 1,225.00 | $ 1,225.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 02/28/2026

Name & Address
ALEX LOWE
2532 PITTSFIELD BLVD
ANN ARBOR, MI 48104

$ 120.00 | $ 1,001.69

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE DEVELOPER Employer CANONICAL USA

Business Address 12 CHRISTOPHER WY, EATONTOWN, NJ 07724

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/02/2026

Name & Address:
MATTHEW BOWER
2098 SCIO CHURCH CT
ANN ARBOR, MI 48103

$ 50.00 | $ 50.00

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 03/02/2026

Name & Address
BILLIE OCHBERG
1216 W WASHINGTON ST
ANN ARBOR, MI 48103

$ 50.00 | $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal 1,445.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2021-019

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 03/02/2026

Name & Address:
JEAN LEVERICH
912 POMONA RD
ANN ARBOR, MI 48103

$ 25.00 $ 325.00

5. If over $100.00 cumulative, please provide:

Occupation CLINICAL SOCIAL WORKER Employer UNIVERSITY OF MICHIGAN

Business Address 912 POMONA RD, ANN ARBOR, MI 48103

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/15/2026

Name & Address
JONATHAN OBERHEIDE
1908 SCOTTWOOD AVE
ANN ARBOR, MI 48104

$ 1,225.00 $ 1,225.00

5. If over $100.00 cumulative, please provide:

Occupation SELF-EMPLOYED Employer SELF

Business Address 1908 SCOTTWOOD AVE, ANN ARBOR, MI 48104

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 03/16/2026

Name & Address:
ASHLEY OBERHEIDE
1908 SCOTTWOOD AVE
ANN ARBOR, MI 48104

$ 1,225.00 $ 1,225.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 03/25/2026

Name & Address
STEVEN FISHER
322 E LIBERTY ST
ANN ARBOR, MI 48104

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal 2,975.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2021-019

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 03/28/2026

Name & Address:
ALEX LOWE
2532 PITTSFIELD BLVD
ANN ARBOR, MI 48104

$ 120.00 | $ 1,121.69

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE DEVELOPER Employer CANONICAL USA

Business Address 12 CHRISTOPHER WY, EATONTOWN, NJ 07724

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 03/28/2026

Name & Address
ALEX LOWE
2532 PITTSFIELD BLVD
ANN ARBOR, MI 48104

$ 103.31 | $ 1,225.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE DEVELOPER Employer CANONICAL USA

Business Address 12 CHRISTOPHER WY, EATONTOWN, NJ 07724

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 04/02/2026

Name & Address:
JEAN LEVERICH
912 POMONA RD
ANN ARBOR, MI 48103

$ 25.00 | $ 350.00

5. If over $100.00 cumulative, please provide:

Occupation CLINICAL SOCIAL WORKER Employer UNIVERSITY OF MICHIGAN

Business Address 912 POMONA RD, ANN ARBOR, MI 48103

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 04/08/2026

Name & Address
CHARLES SMITH
517 KRAUSE ST
ANN ARBOR, MI 48103

$ 200.00 | $ 400.00

5. If over $100.00 cumulative, please provide:

Occupation URBAN PLANNING Employer WADE TRIM

Business Address GRISWOLD ST, DETROIT, MI 48226

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal 448.31

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2021-019

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 04/08/2026

Name & Address:
PETER HONEYMAN
113 S 4TH AVE
ANN ARBOR, MI 48104

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 04/22/2026

Name & Address
MARK MADONNA
836 S MAIN ST
ANN ARBOR, MI 48104

$ 50.00 $ 50.00

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 04/22/2026

Name & Address:
ROB UTTERBACK
545 S SEVENTH AVE
ANN ARBOR, MI 48103

$ 50.00 $ 50.00

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 05/02/2026

Name & Address
JEAN LEVERICH
912 POMONA RD
ANN ARBOR, MI 48103

$ 25.00 $ 375.00

5. If over $100.00 cumulative, please provide:

Occupation CLINICAL SOCIAL WORKER Employer UNIVERSITY OF MICHIGAN

Business Address 912 POMONA RD, ANN ARBOR, MI 48103

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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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.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2021-019

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 05/05/2026

Name & Address:
JEAN HENRY
504 W WILLIAM ST
ANN ARBOR, MI 48103

$ 50.00 $ 50.00

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 05/05/2026

Name & Address
BRADLEY JODOIN
906 EDGEWOOD PL
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

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 05/05/2026

Name & Address:
BARBARA MCMULLEN
703 DUNCAN ST
ANN ARBOR, MI 48103

$ 50.00 $ 150.00

5. If over $100.00 cumulative, please provide:

Occupation QUALITY ASSURANCE ANALYST Employer E.L.F. BEAUTY, INC

Business Address 570 10TH ST, OAKLAND, CA 94607

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/06/2026

Name & Address
KERRY SHELDON
1405 ARBORVIEW BLVD
ANN ARBOR, MI 48103

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 250.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2021-019

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 05/06/2026

Name & Address:
DANIEL MAIER
720 W JEFFERSON ST
ANN ARBOR, MI 48103

$ 100.00 $ 350.00

5. If over $100.00 cumulative, please provide:

Occupation RETIRED Employer

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 05/10/2026

Name & Address
ROBERT BOLEY
1619 DICKEN DR
ANN ARBOR, MI 48103

$ 50.00 $ 50.00

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 05/11/2026

Name & Address:
ADRIAN IRAOLA
7129 TUPELO DR
ANN ARBOR, MI 48103

$ 500.00 $ 500.00

5. If over $100.00 cumulative, please provide:

Occupation RESTAURANT OWNER Employer SELF

Business Address 7129 TUPELO DR, ANN ARBOR, MI 48103

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/12/2026

Name & Address
PATRICIA HOGAN
3575 STANTON CT
ANN ARBOR, MI 48105

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 675.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2021-019

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 05/25/2026

Name & Address:
MARILYN KNEPP
1408 PAULINE BLVD
ANN ARBOR, MI 48103

$100.00 $100.00

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 05/26/2026

Name & Address
KELLY BAKULSKI
742 GOTT ST
ANN ARBOR, MI 48103

$100.00 $100.00

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 05/26/2026

Name & Address:
COLLYER SMITH
1693 CYPRESS POINTE CT
ANN ARBOR, MI 48108

$100.00 $200.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/01/2026

Name & Address
HEIDI BURKHARDT
633 BARBER AVE
ANN ARBOR, MI 48103

$25.00 $25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 325.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2021-019

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☑ YES 4. Date of Receipt 06/01/2026

Name & Address:
IRONWORKERS LOCAL 25
25150 TRANS X RD
NOVI, MI 48375

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/02/2026

Name & Address
JEAN LEVERICH
912 POMONA RD
ANN ARBOR, MI 48103

$ 25.00 $ 400.00

5. If over $100.00 cumulative, please provide:

Occupation CLINICAL SOCIAL WORKER Employer UNIVERSITY OF MICHIGAN

Business Address 912 POMONA RD, ANN ARBOR, MI 48103

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/04/2026

Name & Address:
CONAN SMITH
234 EIGHTH ST
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

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 06/05/2026

Name & Address
LEAH GILLON
1021 BRUCE ST
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal 475.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2021-019

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 06/08/2026

Name & Address:
ROBERT THOMAS
1112 W LIBERTY ST
ANN ARBOR, MI 48103

$ 250.00 $ 250.00

5. If over $100.00 cumulative, please provide:

Occupation MANAGER Employer GOOGLE LLC

Business Address 2300 TRAVERWOOD DR, ANN ARBOR, MI 48105

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/14/2026

Name & Address
STEVEN GULICK
437 SUMARK WAY
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

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 06/18/2026

Name & Address:
MICHAEL HORTSCH
420 ROSE DR
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

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 06/18/2026

Name & Address
ANN ARBOR FOR EVERYONE PAC
502 BURSON PL
ANN ARBOR, MI 48104

$ 2,450.00 $ 2,450.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 2,900.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2021-019

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 06/20/2026

Name & Address:
DANIEL DEACON
1207 W LIBERTY ST
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

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 06/20/2026

Name & Address
ELYCE ROTELLA
500 W JEFFERSON ST
ANN ARBOR, MI 48103

$ 200.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation NOT EMPLOYED Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/21/2026

Name & Address:
CATIE GLIWA
308 WILTON ST
ANN ARBOR, MI 48103

$ 50.00 $ 50.00

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 06/23/2026

Name & Address
ANDREW SHAWHAN
106 N REVENA BLVD
ANN ARBOR, MI 48103

$ 50.00 $ 75.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 400.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number: C-2021-019

2. Committee Name: JENNIFER CORNELL FOR ANN ARBOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 06/29/2026

Name & Address:
ROSS SMITH
1607 CHARLTON AVE
ANN ARBOR, MI 48103

$ 100.00 $ 350.00

5. If over $100.00 cumulative, please provide:

Occupation SENIOR SRE Employer TEMPORAL

Business Address 1607 CHARLTON AVE, ANN ARBOR, MI 48103

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/29/2026

Name & Address
GAURAV KULKARNI
5467 TAFT AVE
OAKLAND, CA 94618

$ 100.00 $ 200.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer ASHBY

Business Address 548 MARKET ST, SF, CA 94104

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/29/2026

Name & Address:
MARK MADONNA
836 S MAIN ST
ANN ARBOR, MI 48104

$ 500.00 $ 550.00

5. If over $100.00 cumulative, please provide:

Occupation DATA ANALYST Employer DOCKER

Business Address 836 S MAIN ST, ANN ARBOR, MI 48104

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/29/2026

Name & Address
JOHN ERIC IVANCICH
1324 WELLS ST
ANN ARBOR, MI 48104

$ 100.00 $ 309.82

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer IBM

Business Address 1 ORCHARD RD, ARMONK, NY 10504

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal: 800.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2021-019

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 06/29/2026

Name & Address:
BRANDON DIMCHEFF
1401 HARPST ST
ANN ARBOR, MI 48104

$ 100.00 $ 400.00

5. If over $100.00 cumulative, please provide:

Occupation SOFTWARE ENGINEER Employer OPENLY

Business Address 131 DARTMOUTH ST, BOSTON, MA 02116

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/29/2026

Name & Address
COURTNEY PIOTROWSKI
517 KRAUSE ST
ANN ARBOR, MI 48103

$ 1,000.00 $ 1,000.00

5. If over $100.00 cumulative, please provide:

Occupation LANDSCAPE ARCHITECT Employer LIVING LAB

Business Address 1420 WASHINGTON BLVD, DETROIT, MI 48226

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 07/02/2026

Name & Address:
JULIA UPFAL
705 DELLWOOD DR
ANN ARBOR, MI 48103

$ 400.00 $ 785.00

5. If over $100.00 cumulative, please provide:

Occupation PROJECT SPECIALIST Employer OHM

Business Address 3767 RANCHERO DR, ANN ARBOR, MI 48108

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 07/02/2026

Name & Address
ANDREW ROBBINS
2355 LANCASHIRE DR
ANN ARBOR, MI 48105

$ 25.00 $ 25.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 1,525.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2021-019

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 07/02/2026

Name & Address:
JEAN LEVERICH
912 POMONA RD
ANN ARBOR, MI 48103

$ 25.00 $ 425.00

5. If over $100.00 cumulative, please provide:

Occupation CLINICAL SOCIAL WORKER Employer UNIVERSITY OF MICHIGAN

Business Address 912 POMONA RD, ANN ARBOR, MI 48103

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 07/06/2026

Name & Address
JONATHAN ZEMKE
4221 CASS AVE
DETROIT, MI 48201

$ 50.00 $ 50.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 07/08/2026

Name & Address:
PETER HONEYMAN
113 S 4TH AVE
ANN ARBOR, MI 48104

$ 100.00 $ 300.00

5. If over $100.00 cumulative, please provide:

Occupation RETIRED Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 07/14/2026

Name & Address
ROBIN WAGNER
1120 W LIBERTY ST
ANN ARBOR, MI 48103

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

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Page Subtotal 275.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number C-2021-019

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☑ YES 4. Date of Receipt 07/14/2026

Name & Address:
LABORERS LOCAL 499
3080 PLATT RD
ANN ARBOR, MI 48108

$ 2,000.00 $ 2,000.00

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 07/15/2026

Name & Address
MICHIGAN REGIONAL COUNCIL OF CARPENTERS
11687 AMERICAN AVENUE
SUITE 200
DETROIT, MI 48204

$ 5,000.00 $ 5,000.00

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:

$ _____ $ _____

Click Here for Memo Itemization

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:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal	7,000.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	21,093.31

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number C-2021-019

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: JENNIFER CORNELL 1402 W WASHINGTON ST ANN ARBOR, MI 48103 **If over $100.00 cumulative, please provide:** Occupation: EXECUTIVE DIRECTOR Employer Name & Business Address: ANN ARBOR ART ASSOCIATION 117 W LIBERTY ST, ANN ARBOR, MI 48104 ☐ 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 HOSTING 5. Date Of Receipt: 01/11/2026 6. **Vendor Name & Address:** GODADDY 100 S MILL AVE, TEMPE, AZ 85281	$ 17.99	$ 680.82
Contribution # 2 PAC Receipt? ☐ Yes Name & Address JENNIFER CORNELL 1402 W WASHINGTON ST ANN ARBOR, MI 48103 **If over $100.00 cumulative, please provide:** Occupation: EXECUTIVE DIRECTOR Employer Name & Address: ANN ARBOR ART CENTER 117 W LIBERTY ST, ANN ARBOR, MI 48104 ☐ 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 HOSSTING 5. Date Of Receipt: 02/11/2026 6. **Vendor Name & Address:** GODADDY 100 S MILL AVE, TEMPE, AZ 85281	$ 17.99	$ 698.81
Contribution #3 PAC Receipt? ☐ Yes Name & Address: JENNIFER CORNELL 1402 W WASHINGTON ST ANN ARBOR, MI 48103 **If over $100.00 cumulative, please provide:** Occupation: EXECUTIVE DIRECTOR Employer Name & Address: ANN ARBOR ART CENTER 117 W LIBERTY ST, ANN ARBOR, MI 48104 ☐ 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 HOSTING 5. Date Of Receipt: 03/11/2026 6. **Vendor Name & Address:** GODADDY 100 S MILL AVE, TEMPE, AZ 85281	$ 17.99	$ 716.80
	Page Subtotal	53.97	0.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		

Enter this total on line 6 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number C-2021-019

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: JENNIFER CORNELL 1402 W WASHINGTON ST ANN ARBOR, MI 48103 **If over $100.00 cumulative, please provide:** Occupation: EXECUTIVE DIRECTOR Employer Name & Business Address: ANN ARBOR ART CENTER 117 W LIBERTY ST, ANN ARBOR, MI 48104 ☐ 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 WEB HOSTING 5. Date Of Receipt: 04/11/2026 6. **Vendor Name & Address:** GODADDY 100 S MILL AVE, TEMPE, AZ 85281	$ 17.99	$ 734.79
Contribution # 2 PAC Receipt? ☐ Yes Name & Address JENNIFER CORNELL 1402 W WASHINGTON ST ANN ARBOR, MI 48103 **If over $100.00 cumulative, please provide:** Occupation: EXECUTIVE DIRECTOR Employer Name & Address: ANN ARBOR ART CENTER 117 W LIBERTY ST, ANN ARBOR, MI 48104 ☐ 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 WEB HOSTING 5. Date Of Receipt: 05/11/2026 6. **Vendor Name & Address:** GODADDY 100 S MILL AVE, TEMPE, AZ 85281	$ 17.99	$ 752.78
Contribution #3 PAC Receipt? ☐ Yes Name & Address: JENNIFER CORNELL 1402 W WASHINGTON ST ANN ARBOR, MI 48103 **If over $100.00 cumulative, please provide:** Occupation: EXECUTIVE DIRECTOR Employer Name & Address: ANN ARBOR ART CENTER 117 W LIBERTY ST, ANN ARBOR, MI 48104 ☐ 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 WEB HOSTING 5. Date Of Receipt: 06/11/2026 6. **Vendor Name & Address:** GODADDY 100 S MILL AVE, TEMPE, AZ 85281	$ 17.99	$ 770.77
	Page Subtotal	53.97	0.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		

Enter this total on line 6 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK
CANDIDATE COMMITTEE

1. Committee I. D. Number C-2021-019

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: JENNIFER CORNELL 1402 W WASHINGTON ST ANN ARBOR, MI 48103 **If over $100.00 cumulative, please provide:** Occupation: EXECUTIVE DIRECTOR Employer Name & Business Address: ANN ARBOR ART CENTER 117 W LIBERTY ST, ANN ARBOR, MI 48104 ☐ 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 WEB HOSTING 5. Date Of Receipt: 07/11/2026 6. **Vendor Name & Address:** GODADDY 100 S MILL AVE, TEMPE, AZ 85281	$ 17.99	$ 788.76
Contribution # 2 PAC Receipt? ☐ Yes Name & Address **If over $100.00 cumulative, please provide:** Occupation: Employer Name & Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- **LOAN** Description _____ 5. Date Of Receipt: _____ 6. **Vendor Name & Address:** Click Here for Memo Itemization	$	$
Contribution #3 PAC Receipt? ☐ Yes Name & Address: **If over $100.00 cumulative, please provide:** Occupation: Employer Name & Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- **LOAN** Description _____ 5. Date Of Receipt: _____ 6. **Vendor Name & Address:** Click Here for Memo Itemization	$	$
	Page Subtotal	17.99	788.76
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	125.93	

Enter this total on line 6 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number: C-2021-019

2. Committee Name: JENNIFER CORNELL FOR ANN ARBOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name BANK OF ANN ARBOR Address 125 S 5TH AVE ANN ARBOR, MI 48104 ☐ Fund Raiser	Purpose: PRINTED CHECKS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	03/31/2026 Date	$ 27.95
Expenditure #2 Name MICHIGAN DEMOCRATIC PARTY Address 606 TOWNSEND ST LANSING, MI 48933 ☐ Fund Raiser	Purpose: VAN LIST ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/08/2026 Date	$ 150.00
Expenditure #3 Name SAWICKI & SONS Address 1521 W LAFAYETTE BLVD DETROIT, MI 48216 ☐ Fund Raiser	Purpose: YARD SIGNS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/01/2026 Date	$ 1,817.90
Expenditure #4 Name USPS Address 2075 W STADIUM BLVD ANN ARBOR, MI 48103 ☐ Fund Raiser	Purpose: POSTAGE STAMPS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/29/2026 Date	$ 31.20
Expenditure #5 Name ALLIED MEDIA Address 240 N FENWAY DR FENTON, MI 48430 ☐ Fund Raiser	Purpose: CAMPAIGN LITERATURE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/05/2026 Date	$ 1,293.13

Subtotal this page	3,320.18
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number C-2021-019

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

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 240 N FENWAY DR FENTON, MI 48430 ☐ Fund Raiser	Purpose: MAILER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/17/2026 Date	$ 2,951.79
Expenditure #2 Name FACEBOOK Address 1 HACKER WY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: DIGITAL ADS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/29/2026 Date	$ 500.00
Expenditure #3 Name FACEBOOK Address 1 HACKER WY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: DIGITAL ADS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/03/2026 Date	$ 500.00
Expenditure #4 Name ALLIED MEDIA Address 240 N FENWAY DR FENTON, MI 48430 ☐ Fund Raiser	Purpose: MAILER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/07/2026 Date	$ 2,231.14
Expenditure #5 Name ALLIED MEDIA Address 240 N FENWAY DR FENTON, MI 48430 ☐ Fund Raiser	Purpose: MAILER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/08/2026 Date	$ 1,005.86

Subtotal this page	7,188.79
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number C-2021-019

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name FACEBOOK Address 1 HACKER WY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: DIGITAL ADS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/10/2026 Date	$ 500.00
Expenditure #2 Name EZRA LEE Address 2590 MILLER RD ANN ARBOR, MI 48103 ☐ Fund Raiser	Purpose: FIELD DIRECTOR ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/14/2026 Date	$ 750.00
Expenditure #3 Name ALLIED MEDIA Address 240 N FENWAY DR FENTON, MI 48430 ☐ Fund Raiser	Purpose: MAILER ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/16/2026 Date	$ 1,378.36
Expenditure #4 Name ACORN CIVIC STRATEGIES, LLC Address 10 WITHERELL ST DETROIT, MI 48226 ☐ Fund Raiser	Purpose: CAMPAIGN MANAGEMENT ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/17/2026 Date	$ 3,900.00
Expenditure #5 Name FACEBOOK Address 1 HACKER WY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: DIGITAL ADS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/17/2026 Date	$ 500.00

Subtotal this page 7,028.36

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

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number C-2021-019

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

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: ONLINE CONTRIBUTION FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/19/2026 Date	$ 167.47
Expenditure #2 Name STRIPE Address 354 OYSTER POINT BLVD SOUTH SAN FRANCISCO, CA 94080 ☐ Fund Raiser	Purpose: ONLINE CONTRIBUTION FEES ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/19/2026 Date	$ 256.38
Expenditure #3 Name Address ☐ Fund Raiser	Purpose: _____ Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	$ _____
Expenditure #4 Name Address ☐ Fund Raiser	Purpose: _____ Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	$ _____
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: _____ Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	$ _____

Subtotal this page	423.85
Grand Total of all Schedules 1B (Complete on last page of Schedule)	17,961.18

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

INCIDENTAL OFFICE EXPENSE DISBURSEMENTS SCHEDULE 1C CANDIDATE COMMITTEE

(For use by officeholders only)

1. Committee I. D. Number C-2021-019

2. Committee Name JENNIFER CORNELL FOR ANN ARBOR

3. Name and address of person to whom disbursement was made	4. Description of Disbursement (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address: COLLEGE DEMS AT UNIVERSITY OF MICHIGAN 300 W MICHIGAN AVE YPSILANTI, MI 48197	Purpose EVENT SPONSORSHIP Disbursement Code IO ☐ Fund Raiser	04/14/2026 Date	$100.00
☐ Check box if this disbursement is payment of debt or obligation reported on previous statement			
Disbursement # 2 Name & Address: WASHTENAW DEMOCRATIC PARTY BLACK CAUCUS PO BOX 980027 YPSILANTI, MI 48198	Purpose MEMBERSHIP FEE Disbursement Code IO ☐ Fund Raiser	04/29/2026 Date	$25.00
☐ Check box if this disbursement is payment of debt or obligation reported on previous statement			
Disbursement # 3 Name & Address:	Purpose Click for Memo Itemization Type Disbursement Code ☐ Fund Raiser	Date	$
☐ Check box if this disbursement is payment of debt or obligation reported on previous statement			
Disbursement # 4 Name & Address:	Purpose Click for Memo Itemization Type Disbursement Code ☐ Fund Raiser	Date	$
☐ Check box if this disbursement is payment of debt or obligation reported on previous statement			

Subtotal this page	125.00
Grand Total of all Schedules 1C (Complete on last page of Schedule)	125.00

Enter this total on line 10a of Summary Page

***PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES**

Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY