

FILED WASHTENAW COUNTY, MI

CANDIDATE COMMITTEE COVER PAGE

COVER PAGE 200	14 OCT 22 P	1: 52 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 of	pyers From: August 24.04 to October 17, 700 4		
1. Committee I.D. Number (-2004-001 2. Committee Name Lawrence Kestenbaum for Clerk Register	4. Candidate Las Kesten 4a. Office Sought I Wahtenau			
5. Committee's Mailing Address P. D. Box 2563 Area Code and Phone 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.	PARMA 2330 Ad	ne & Residential Address YARKIN aul Rd, Ann Abon, MI 48104 e (734 336 0107		
7. Treasurer's Business Address 2330 Adare Rd. Ann Mbn, MI 48104 Area Code and Phone (734 332.0207	Designated Record	ord keeper's Name and Mailing Address (If the committee has a likeeper)		
Area dode and Friend 1				
9. TYPE OF STATEMENT		9c. Annual Statement (Coverage Year)		
9a. Pre-Election OR 9b. ☐ Pos	t-Election	9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)		
Pre-Election or Post-Election Statement relates to: Primary	eral	9e. ☐ Dissolution of Candidate Committee		
☐ Convention ☐ Scho	ool	Effective Date of Dissolution		
Date of Election, Convention or Caucus No vember 2, 200 Month Day Year	cus	Month Day Year By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.		
A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.				
10. Verification: (\We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my\our knowledge and belief the contents are true, accurate and complete.				
Current Treasurer or Designated Record keeper PARMA YARKIN	Signatu	Date 10/22/04 Mo Day Year		
Candidate LAWRENCE FESTENBAUM Type or Print Name	Candidate Candid			

Authority granted under P.A. 388 of 1976





1. Committee I.D. Number (-2004-00)
2. Committee Name Keslenbaum For Clark
Register

SUMMARY PAGE CANDIDATE COMMITTEE

RECEIPTS	Column I	Column II
3. Contributions	This Period	Column II Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 5470.00	
b. Uniternized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ <u>5470.00</u>	(18.) \$ 3,315.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$ 189.20
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>\$ \$ 570.00</u>	(20.) \$ 13504.20
IN-KIND CONTRIBUTIONS & EXPENDITURES	0 59 63	200 62
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ 376.6Z	(21.) \$ 398.62.
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures	a. a .	
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ 8109.40	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ (500.00)	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ 8109.40	(23.) \$ 12.826.48
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.)\$ O	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)		D
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$	(24.) \$
a. Owed by the Committee (Schedule 1E)	(12a.) \$ 2739.00	
b. Owed to the Committee (Schedule 1E)	(425.) 6	
	(12b.) \$ BALANCE STATEMENT	
42. Ending Polonce of last ranget filed	2217 10	
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	550-00	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ 35/0.50	
	(15.) = \$ 8/B/. [2	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(16.) - \$ 8109.40	
(Add lines 9 and 11) 17. ENDING BALANCE	(17.) \$ 677.72	
(Subtract line 16 from line 15)	(11.)	



1. Committee I.D. Number	C-200	4-	001	•
2. Committee Name	stenbaum	(0)	Clark	Legist

CANDIDATE COMMITTEE	01,000,11	0,004
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 from committees 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 8/26/04 Name: Daniel Delmence		
Address: 8175 W. Lamaneaux fowlaville, M148836 5. If over \$100.00 cumulative, please provide:	25.00	75.00
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		·
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/26/64 Name: Www.fved Motherwea		
Address: 1153 Haslett Rd, Haslett, MI 48840 5. If over \$100.00 cumulative, please provide:	25.00	25.00
OccupationEmployer		:
Business Address		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8/26/04 Name: Galc Schertzing Address: 236 Kedzie Cast Lansmy M1 48823 5. If over \$100.00 cumulative, please provide:	40.00	40.00
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 5/1/2/04 Name: Best am P. Kenon Address: 420 Wayland East Langley M 48823 5. If over \$100.00 cumulative, please provide:	25.00	25, TO
OccupationEmployer		•
Business Address		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	115.00	

Enter this total on line 3 of Summary Page.



1. Committee I.D. Number	C- 2	504-	00	1
2. Committee Name	tenbau	n For Cl	erk Re	Ricti

OARDATE COMMITTEE		
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 from committees 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 8/26/04 Name: James E. Vande Bunte Address: 2074 Lac Du Mont Has lett, M 48840 5. If over \$100.00 cumulative, please provide:	50.00	50.00
OccupationEmployer Business Address		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/46/04 Name: Mark Latter man Address: 1305 5. We shington, Lansing MI 48978 5. If over \$100.00 cumulative, please provide: OccupationEmployer Business Address Type of Contribution: Direct	100.50	100.00
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8/24/04 Name: Thomas E. Woods III. Address: 421 W Ioma Lansung M1 48933 5. If over \$100.00 cumulative, please provide: OccupationEmployer	100.00	100.00
Business Address Type of Contribution: Direct		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 8/76/04 Name: Alan for Address: 1515 Rexboodsh Ave E. Lansing M 48823 5. If over \$100.00 cumulative, please provide:	50.00	50.00
OccupationEmployer		
Business Address Type of Contribution:		
Grand Total of All Schedules 1A (Complete on last page of Schedule)	300.00	

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1. Committee I.D. Number	C-10	04-c	001
2. Committee Name	lenbaum	Es Olike	Kegister

CANDIDATE COMMITTEE		
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 from committees 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 7, 5004 Name: PAC Receipt? YES 4. Date of Receipt 7, 5004 Address: 237 5 Keerel and 4, Richmond, KV 4097 5. If over \$100.00 cumulative, please provide: Occupation Employer	5 25.D	25.00
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/26/04 Name: Audrey 8. Marron Address: 1208 Lilac F. M. Sing, MI 48823 5. If over \$100.00 cumulative, please provide:	25.03	US .50
Business Address Type of Contribution: Loan from a person Employer Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8/26/04 Name: Mark 0. There are Address: P. O. Box 196 E. Lansing 48826 5. If over \$100.00 cumulative, please provide:	30.00	36.00
OccupationEmployer Business Address Type of Contribution:		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 8/26/04 Name: Martha A. Davi (u.g.) Address: 3340 E. Dobson Pl., Ann Arbo MI 4810 5. If over \$100.00 cumulative, please provide: Occupation Employer	75.00	75.00
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	155.00	

Enter this total on line 3 of Summary Page.

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1. Committee I.D. Number	<u> </u>	001.
2. Committee Name Ke	scen bour for	Clark - Roylete

CANDIDATE COMMITTEE		- Great it
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 from committees 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 8/26/04 Name: John P. Hansen Address: 7880 54h St, Dexte, MI 48130	50.00	75,00
5. If over \$100.00 cumulative, please provide:		()/00
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/26/64 Name: Richard Friedman Address: 8/1 Berkshire Rd, Ann Arbo MI 4810 5. If over \$100.00 cumulative, please provide:	1 25.00	25.00
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8/26/04 Name: Chris Swope. Address: 1402 N Genesee. D1, Lansing MH895 5. If over \$100.00 cumulative, please provide:	20.50	20.50
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 8/26/04 Name: Paul C. Pratt Address: 416 West Dr, Lansing, MI 48915 5. If over \$100.00 cumulative, please provide:	100.00	100.00
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	195.00	

Enter this total on line 3 of Summary Page.



1. Committee I.D. Number C-2004-001
2. Committee Name Kl Slenbaum for Clark. Reg 156

CANDIDATE COMMITTEE		
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 from committees 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 8/26/04 Name: Thomas P. Wilby		
Address: 1784 Mivableau DV OKemos MI 48864 5. If over \$100.00 cumulative, please provide:	50.00	50.00
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/26/04 Name: H. Lynn Jordahl		
Address: 4709 Woodcraft Okemos, M 48864 5. If over \$100.00 cumulative, please provide:	50.00	50.00
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Tundary Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8/26/04 Name: Ruth B. fox Address: 18/2 Purecrest Dr. E. Lanny, MI 48823 5. If over \$100.00 cumulative, please provide:	50.00	50.00
OccupationEmployer		
Business Address Type of Contribution:		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 8/26/04 Name: During Byung Address: 4933 Bellevus Rd Onadagy, M. 49264 5. If over \$100.00 cumulative, please provide:	25.0D	25.00
OccupationEmployer		
Business Address Type of Contribution: Loan from a person Yeund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	175.00	
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1. Committee I.D. Number	C - 1004	-001
2. Committee Name	< estenbaum	for Clerk

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees 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 9 11 04 Name: Gwen O. Nystuen Address: 1016 01701a, Ann Arbor, MI 4810H 5. If over \$100.00 cumulative, please provide: Occupation 12 11 2 Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	100.00	170.00
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9/13/04 Name: Joseph H. Spiegel + Janel S. Fain Address: 2640 Gladstone, Ann Arbor, WI 48/04		
5. If over \$100.00 cumulative, please provide: Occupation Alto new Employer Business Address 825 VICOS Way Angel My YSULF Type of Contribution: Direct Loan from a person Fund Raiser	, 250.00	250.00
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 9/10/04 Name: Washtenaw County Democratic Committee Address: 212 Lakeview Dr., Whitmore Lake, MI		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer	500.00	500.00
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 917104 Name: Pan Byrnes For State Representative Address: 7412 Black Forest Dr., Dexter, MI 48130		A la serie de la constante de
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	50.00	50.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	900.00	

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1. Committee I.D. Number	C - TOOH	1-0	01	
2. Committee Name Kes	tenbaum.	foo	Cleok	Register

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 from committees 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 9 5 04 Name: Scott W. and Mc Donna Street		
Address: 1446 whittier, Yesilanti, MI 48197		
5. If over \$100.00 cumulative, please provide:		
Occupation retried Employer		300.00
Business Address	50.00	300.00
Type of Contribution: Direct Loan from a person V Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9 6 0 4		
Address: 2910 Daleview Dr., Ann Arbor, MI 48105		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address Type of Contribution: Direct	50.00	100.00
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 917104 Name: Joan Lowen Stein		
Address: 502 Busson PL., Ann Arbor, MI 5 If over \$100.00 cumulative places provide: 48104		
o. Il over \$100.00 cultulative, please provide.		
Occupation A Honey Employer Jake Snyder		
Business Address 2015 May Ste 300 Min Man Mu (810) Type of Contribution: Direct Loan from a person Mr Fund Raiser	4 50.00	150.00
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 9/4/04 Name: Nary C. Crichton		
Address: 1610 Westurinster Pl., Ann Arbor, MI		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address Type of Contribution: Direct	30.00	65.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	180.00	

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1. Committee I.D. Number	C-700H-	.001	
2 Committee Name K	ctenbaum	For Clark	Register

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 from committees 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 10 12 04 Name: Koren March		
Address: GOLLE S.O. A.		
Address: 5245 Saline Walerworks Rd, Saline MI 4817. 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address	50.00	50.00
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9110104		
Address: 3473 Woodale Ct., Ann Arbor, MI 48104		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address	25.00	60.00
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 9110104 Name: June A. Rusten		
Address: 1733 Ourmore, Ann Arbor, WI 48103		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	30.00	60.00
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 911004 Name: Peter C. Eckstein		
Address: 2551 Londonderry Rd., Ann Arbor, MIT		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address	50.00	100.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	155.50	

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1. Committee I.D. Number <u>C-2004-001</u>

2. Committee Name Kesten baum too Clerk Register

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 from committees 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 9 1004 Name: Loi≤ J. Godel		
Address: P.O. BOX 7376, Ann Arbor, WI 48107		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser	50.00	50.00
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 911010H Name: TLan Gittlen		
Address: 6 Regent Ct., Ann Aubor, WI 48104		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		ı
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	50,∞	90.00
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 9 9 9 0 H		
Address: 3875 E. Huron River Dr., Ann Arbor, MI 48104		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address Type of Contribution:	50.00	85.00
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 919104 Name: Philip Zazor		
Address: 2903 Craig Rd., Ann Aubor, MI 48103		
5. If over \$100.00 cumulative, please provide:		
Occupation faculty Employer Unwersety of Mich		
Business Address 1500 & Med Ctr Dr, Annhybn M 48109 Type of Contribution: Direct	50.00	250.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	200.00	

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2. Committee Name Kestenbaum for Clerk Register

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 from committees 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 9110104 Name: Douglas C. Kelley		
Address: 910 Sunset Rd., Ann Aubor, WI 48103		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	50.00	50.00
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 911004		
Address: 3470 Carpenter Rd. #211, Ypsilantig MI		!
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	50,00	75.00
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 91(0104 Name: コ ave Michevev		
Address: 2115 Devenshive, Ann Arbor, MT 5. If over \$100.00 cumulative, please provide: 48104		
OccupationEmployer		
Business Address Type of Contribution: D Direct Loan from a person M Fund Raiser	50.00	75.00
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 91004 Name: Richard E. Derick		
Address: 415 High St., Ann Arbor, NIT 48104		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	50.00	50.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	200.00	

Enter this total on line 3 of Summary Page.

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1. Committee I.D. Number	-001
2. Committee Name Kestenbaum	For Clerk

CANDIDATE COMMITTEE		Meg 15t
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 from committees 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 TIOIOH		
Name: Ann Evans Lavionore		
Address: 916 Olivia Ave., Ann Arbor, WIT		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	50.00	50.00
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9110164 Name: Helen M. Graves		
Address: 2200 Fuller Ct. #701B, Ann Arbor, WIT		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	50.00	75.00
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 711004		
Address: 1523 Kirtland Dr., Ann Arbor, MI		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	100,00	100.00
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 1110104 Name: Wichael Koen		
Address: 1930 Washtenaw Ave., Ann Arbor, WIT 5. If over \$100.00 cumulative, please provide: #8104		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address	50.00	50.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	250.00	



1. Committee I.D. Number	C-2004-	.001	
2. Committee Name · Ke	stenbaum E	or Clerk	Register

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 from committees 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 91004		
Name: Keith Orr		
Address: 1710 Fair St., Ann Arbor, WI 48103		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address	70.00	2
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	70.00	70.00
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 91ししゅ		
Name: Alan Richardson		
Address: 2330 Adare Rd., Ann Arbor, MI 48104		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		_
Business Address Type of Contribution: Direct Loan from a personFund Raiser	50.00	50.00
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 82604 Name: Stephen L. Wanchester		
Address: 514 Westmoneland, Lansing, wit		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address	:	25.50
Type of Contribution: ☐ Loan from a person ☐ Fund Raiser	25.00	25.00
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 9/5/04 Name: Ed Viel mette, The Vacuum Goup		
Address: 317 S. Division, PMB 218, 17mn Arbert MI	20.00	20.00
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	165.00	

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1. Committee I.D. Number	C-2004-00	1 -
2. Committee Name	Tenbaum Cox Ole	Mr. Registe

CANDIDATE COMMITTEE		
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 from committees 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 8/74/04 Name: Daniel Fox	25	
Address: 3652 9. Meadows Okomos, MI 48864 5. If over \$100.00 cumulative, please provide:	25.00	25.00
OccupationEmployer		
Business Address Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/26/04		
Davoure J. Verges	25 5	20 5
Address: 1231 Chartwell, East Lansing M148823 5. If over \$100.00 cumulative, please provide:	25,00	105.00
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8/2/04		
Name: DO 15 Sutheiland Address: 1667 Linden East Lansing, W1 48823	75 m	25.00
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 8/26/04 Name: Jay Rissen		
Address: 931 Wick Ct East Lansing MI 48823	25.00	25.50
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	100.00	
(Somplete on last page of oblicable)		

Enter this total on line 3 of Summary Page.

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1. Committee I.D. Number C- 2004-001
2. Committee Name Lestenbaum for Clerk-Register

CANDIDATE COMMITTEE		
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 from committees 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 8/26/04 Name: Mark Grebner		
Address: P.O. Bex 6249 E. Lansing MI 48826	25.00	
5. If over \$100.00 cumulative, please provide:	25.00	
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/26/04 Name: Neula Mae Tillman		
Address: 837 W. Northrup Lansing MI 48911	25.00	
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8/26/04 Name: Lynne mannet		
Address: 306 Les Cie St Langung M1 48912. 5. If over \$100.00 cumulative, please provide:	25.00	
OccupationEmployer		
Business Address		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 8/26/04 Name: USA A. Deaden		
Address: 1925 Bowker Lansing, MI 48911 5. If over \$100.00 cumulative, please provide:	25.00	
OccupationEmployer		
Business Address Type of Contribution:		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	100.00	

Enter this total on line 3 of Summary Page.

Page 4 of 18



1. Committee I.D. Number C 2004 - 001
2. Committee Name Kestenbaum En Clark Rogister

J. (12.12.11.12.00 (1)) (1)		
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 from committees 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 10/5/04 Name: Jean Ledwith King Address: 255 E. Liberty, Ste 289, Awn Arbo M 480 5. If over \$100.00 cumulative, please provide:	f 50.00	50.00
OccupationEmployer Business Address Type of Contribution: Direct		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/5/04 Name: Touloa L. Walvod		
Address: 1201 Meadowhook St, Ann Arbo, M 48104 5. If over \$100.00 cumulative, please provide:	40.00	50.00
OccupationEmployer		
Business Address		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/4/04 Name: Barbara H. Kraner Address: 505 Highland Rd, Ann Avbn, MI 48/04 5. If over \$100.00 cumulative, please provide:	25.00	25.00
OccupationEmployer		
Business Address		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 9/10/04 Name: Graham Teall Address: 1208 Parockly Ave, Awn Arbn, MI 48104 5. If over \$100.00 cumulative, please provide: Occupation 155t US A try Employer US D15t Attorneys Off Business Address Detroit MI US 226 Type of Contribution: Direct Loan from a person Fund Raiser	250.00	250.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	375,00	

line 3 of Summary Page.

Enter this total on

Page 15 of 18



1. Committee I.D. Number C-2004-001

2. Committee Name Kestenbawm For Clark-Registra

GANDIDATE GOMINITTEE		
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 from committees 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 9/29/64 Name: Den Delmenco		
Address: 8175 W. Lamoreaux, Fowlerville, M1488	%	
5. If over \$100.00 cumulative, please provide:	_	
Occupation 10500 TWY Clark Employer 10500 TWP	100.00	
Business Address 2550 By addy Rd, Webberville, M 4899 Type of Contribution: Direct Loan from a person Fund Raiser	2	175.00
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9/25/09 Name: James R. 91 ddings		
Address: 6000 Loursbury Rd, Williamston, MI 4889	•	
5. If over \$100.00 cumulative, please provide:	25.00	25.00
OccupationEmployer		
Business Address,		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 9/28/04 Name: Robert C. Grady.		
Address: 3290 Charry Cross Rd, Am Ason, MI 48/08 5. If over \$100.00 cumulative, please provide:	20.00	
OccupationEmployer		·
Business Address /		10.00
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt /0/2/04 Name: Kenneth R. JORNHAMS		
Address: 1209 Miller Ave, Ann Arbon, MI 48103	150.00	150-50
5. If over \$100.00 cumulative, please provide:		130-00
Occupation network analyst Employer MSU Computer Cab		
Business Address C. Langing M. 48824 Type of Contribution: Direct Loan front a person Fund Raiser		
Page Subtotal	_	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	295,00	
(Complete on last page of Schedule)		

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SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number	<u> </u>	2004	1-00)	•
2. Committee Name <u>Va</u>	stenk	wm	Gor C	lork-	Register

CANDIDATE COMMITTEE		The state of the s
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 from committees 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 9/16/04		
Name: hvalle Gutbround		
Address: 210 Applewood, Lakeside Park, KY41017	00	25.00
5. If over \$100.00 cumulative, please provide:	25.00	23.00
5. II Over \$100.00 cumulative, piease provide.		
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 8/14/04		
Name: Allia J. Perez-Bannet		
Address: 804 Shlawassee, Lansing MI 48915	15 5	14 600
	10.00	10.00
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8/30/04		
Name: Debra Nolan	25	25.50
,	25,00	25.00
Address: 43 U Heart wood, Okenos, MI 48864		
5. If over \$100.00 cumulative, please provide:		•
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 10/2/64		
Name: UAW Michigan V-PAC.		
Address: 8000 E. Jellerson, Detrort, MI 48214	500.00	500,00
5. If over \$100.00 cumulative, please provide:		,
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	<u></u>	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	560.00	

Enter this total on line 3 of Summary Page.

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1. Committee I.D. Number		- 20	04	-001	
2. Committee Name_Ke	skni	bour	Kes	Clerk	Rogesta

OANDIDATE OOMMITTEE		
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 from committees 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 10/2/04 Name: Law Yence Keslewbaum		
Address: 1726 W Stadium, Ann Avbo, My 48103	1000.00	
5. If over \$100.00 cumulative, please provide:	1000.00	
OccupationEmployer		_
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		2300.00
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/2/04 Name: The odore J. St., Antorne		
Address: 1421 Roxbury Rd, Ann Arbo, M148104	50.00	
5. If over \$100.00 cumulative, please provide:		50.00
OccupationEmployer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt Name:		
Address:		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
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:		
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	1050.00	
, , , , , , , , , , , , , , , , , , , ,	5470.00	

Enter this total on line 3 of Summary Page.

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ITEMIZED OTHER RECEIPTS SCHEDULE 1A-1 CANDIDATE COMMITTEE

1. Committee I.D. Nu	mber	(-	WI	4.	- 00	1	
2. Committee Name	Kest	enb	avm	60	Car	K.Re	9186

Page

3. Name & Address From Whom Received		of Receipt	5. Type of Receipt	6. Amount
Receipt#1 Name: Washtenaw Cornty (Der Address: 200 N. Main Ann Mybor, M. 45/04[Loan from a Lending Institution Interest Refund \Rebate \Congress Other (Specify)	160.00
Receipt #2 Name: Address:	Date of Receipt _		Loan from a Lending Institution Interest Refund \Rebate Other (Specify)	
Receipt #3 Name: Address:	Date of Receipt _		Loan from a Lending Institution Interest Refund \Rebate Other (Specify)	
Receipt #4 Name: Address:	Date of Receipt _		Loan from a Lending Institution Interest Refund \Rebate Other (Specify)	
Receipt #5 Name: Address:	Date of Receipt _		Loan from a Lending Institution Interest Refund \Rebate Other (Specify)	
Receipt #6 Name: Address:	Date of Receipt _		Loan from a Lending Institution Interest Refund \Rebate Other (Specify)	
Receipt #7 Name: Address:	Date of Receipt		Loan from a Lending Institution Interest Refund \Rebate Other (Specify) Page Subtotal	100 00
			Grand Total of All Schedules 1A -1 (Complete on last page of Schedule)	Enter this total on line 4 of Summary

Page ____ of ___



ITEMIZED EXPENDITURES SCHEDULE 1B

1. Committee I. D. Number <u>C - 2004 - 00</u>]
2. Committee Name <u>Kestenbaum for Clerk Log 1 ste</u>

CANDIDATE COMMITTEE 2. C	committee Name CESTON COMPANY	Cul	Peg 1848
Name and address of person or vendor to whom paid	Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1 Name Sawicki & Son Address 1521 W. Lafayette Detroit, MI 48216 Fund Raiser	Purpose: Yard Signs Expenditure Code* SA Check box if this expenditure is payment of debt or obligation reported on previous statement	8/30	1061.70
Expenditure #2 Name Partner's Press. Address 1958 S. Dnobustrial Ann Arbn M1 48104 [] Fund Raiser	Purpose:	9/1	95,40
Expenditure #3 Name Office Max Address 2777 Oak Valley Dr PiHSfield Twp, Mi 48103	Purpose: Labels Expenditure Code* S Check box if this expenditure is payment of debt or obligation reported on previous statement	9/2	71.24
Expenditure #4 Name Postmaster W. Stadium Blvd. Address Ann Arbo, M1 48103 [Fund Raiser	Purpose: Postage Expenditure Code* MA Check box if this expenditure is payment of debt or obligation reported on previous statement		460.00
Expenditure #5 Name Jennifes Dye. Address 20941 Olympia Redford, MI 48240 Fund Raiser	Purpose: Event Planning Expenditure Code* IC Check box if this expenditure is payment of debt or obligation reported on previous statement	9/2	380.00
	Subtotal th Grand Total of all Sched (Complete on last page of Sc	ules 1B	2068,34



ITEMIZED EXPENDITURES **SCHEDULE 1B** CANDIDATE COMMITTEE

1. Committee I. D. Number C-2004-001 2. Committee Name Kestenbaum For Clerk Register

CANDIDATE COMMITTEE		T E D.L.	I C A
3. Name and address of person or vendor to whom paid	Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1 Name Washtonan Rambow Address Action Project 325 Braun Ct Ann Arbo, MI 48104 Fund Raiser	Purpose: Booth rental Expenditure Code* RE Check box if this expenditure is payment of debt or obligation reported on previous statement	9/10	20.00
Expenditure #2 Name Washtenaw Jew (Sh Naws Address 2935 Birch Hollow Rd Ann Arbo, MI 48108 [Fund Raiser	Purpose: <u>Qdver hsmort</u> Expenditure Code* <u>PA</u> Check box if this expenditure is payment of debt or obligation reported on previous statement	9/20	220.80
Expenditure #3 Name 15th Dist Democratic Party. Address P.O. Box 32540 Detvort, MI 48232. Fund Raiser	Purpose: Expenditure Code* Check box if this expenditure is payment of debt or obligation reported on previous statement	9/20	500.00
Expenditure #4 Name Unt Packaging Address 119 Enlerprize DV Suo Tup, MI 48103 Fund Raiser	Purpose: Maling Expenditure Code* MA Check box if this expenditure is payment of debt or obligation reported on previous statement	10/12	2870.18
Name Poutners Press. Address 1958 S. Industriel Ann Arbo, MI 48104 Fund Raiser	Purpose: Prunding Expenditure Code* PA Check box if this expenditure is payment of debt or obligation reported on previous statement	10/13	2430.88
	Subtotal thi Grand Total of all Sched		6041.06

(Complete on last page of Schedule)

on line 8a of Summary Page



EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES SCHEDULE 1 B - G

CANDIDATE COMMITTEE

1. Committee I.D. Number <u>C - 2004 - 00 |</u> 2. Committee Name Kestenbaumfor C

Summary Page

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The -Vote activity in Item 4f.

ALL EXPEND	ITURES ARE REQUIRED TO BE ITEMIZED.		
Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
Expenditure #1 Name & Address: Str. District Denocratic Party P. D. 32540 Denocratic Party Pa	a. Election Day Busing of Voters To The Polls b. Slate Cards c. Challengers d. Poll Watchers e. Poll Workers f. Get-Out-The Vote Activity (Specify): Door - Knowling Check box if this expenditure is payment of debt or obligation reported on previous statement	9/20/04	\$ <u>500.00</u>
Statewide Proposal Name	Local Proposal NameIndi	cate County	
Expenditure #2 Name & Address:	a.		
For Activity Type b-f, check one:	f. Get-Out-The Vote Activity (Specify):		\$
If in support of, or in opposition to, a ballot proposal, check one: Support Oppose	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Statewide Proposal Name	Local Proposal NameIndic	cate County	
Expenditure #3 Name & Address:	a.		
For Activity Type b-f, check one:	f. Get-Out-The Vote Activity (Specify):		\$
If in support of, or in opposition to, a ballot proposal, check one: Support Oppose	☐ Check box if this expenditure is payment of debt or obligation reported on previous statement		
Statewide Proposal Name	Local Proposal NameInc		
	Subtotal this Grand Total of all Schedules (Complete on last page of Sch	1B-G)	
			Enter total on Line 8b



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number C-2004-001
2. Committee Name Kestenbaum for Clerk Reg 15 To

CANDIDATE COMMITTEE

This Schedule itemizes:						
a. Γ Debts and obligations owed \underline{by} or forgiven the committee OR b. Γ Debts and obligations owed \underline{to} or forgiven \underline{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 endorsers or guarantors, if any.	4. Type of Obligation (Indicate type and you may assign an expenditure code) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	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:	4. Type/MILIUG LIST	_ / / \$				
Practical Political (ansulting P.O. Box 6249 East LANSING MI 48826 If bank loan, name of endorser or guarantor:	5. Date Debt Was Incurred: 3/8/04 6. Original Amount of Debt:		\$ount Endorsed: \$	\$ <u>439.00</u> ☐ FORGIVEN		
Debt #2 Corp? Yes	1000					
Cowed to or by: Laurence Kestenbarn 1726 W. Stalim Block Andrew MI 48103	4. Type: COAN 5. Date Debt Was Incurred: 4/30/04 6. Original Amount of Debt: \$_300.00	/ / \$ // / \$ // / \$ // / \$	\$	FORGIVEN		
If bank loan, name of endorser or guarantor:		. Am	ount Endorsed: \$			
Owed to or by: Corp? Yes Owed to or by: Lawrence Kestenbour 1726 V Stadium An MI 4813	4. Type: Ohn Solution 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		0_			
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_			
A debt or obligation must be shown on this Schedu this Campaign Statement or it was forgiven during t	ete on last page of Schedule show le if there was an outstanding a the period covered by this Camp	mount owed on it at the cl	chedules 1E he committee)	Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page		
Page of						



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number C- 2004-00]
2. Committee Name Kestenbaum For Clark Register

CANDIDATE COMMITTEE					
This Schedule itemizes: a. Γ Debts and obligations owed by or forgiven the committee Γ Debts and obligations owed to or forgiven by the committee.					
a. I Debts and obligations owed <u>by</u> or forgiven the co-	mmittee OR b. $f I$ Deck either a or b. Use only for the pu		or forgiven <u>by</u> the co	ommittee.	
Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Indicate type and you may assign an expenditure code) 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 Oved to or by: Lawrence Festcysava 1726 C. Stedium Blod Ann Anla MI 48103 If bank loan, name of endorser or guarantor:	4. Type: La AV 5. Date Debt Was Incurred: (O Z O C C C C C C C C C C C C C C C C C		\$O	\$ 1000. 300 FORGIVEN	
	I	1			
Debt #2 Corp? Yes Owed to or by:	4. Type: 5. Date Debt Was Incurred:				
	6. Original Amount of Debt:		\$		
	\$			FORGIVEN	
If bank loan, name of endorser or guarantor:		An An	nount Endorsed: \$		
Debt #3 Corp? ☐ Yes Owed to or by:	4. Type:				
	5. Date Debt Was Incurred:				
	6. Original Amount of Debt:				
If bank loan, name of endorser or guarantor:		Ar	nount Endorsed: \$_	FORGIVEN	
		Page Subtotal (Outst	landing debt)	1000.00	
	A solution of Cabadala above	Grand Total of all S		2739.00	
(Complete A debt or obligation must be shown on this Scheduthis Campaign Statement or it was forgiven during	ete on last page of Schedule show lie if there was an outstanding a the period covered by this Cam	mount owed on it at the cl		Enter this total on line 12a "owed by"" or line 12b "owed to" of the Summary Page	



FUND RAISER SCHEDULE 1F

FUND RAISER SO	THE DOLL II	11 -1 1	004-001 um Go Clark Res 15te
CANDIDATE CO	- USE A SEPARATE SHI	FFT FOR FACH EVENT	
3. Date Event Was Held Avg 26 2004 Mooth Day Year	4. Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	Magdalena's 6. Address and Name (If any) of the place where the activity was held 2008 & McMgan Derivate Residence
 7. Total Contributions 8. Other Receipts 9. Gross Receipts (Add lines 7 10. Total Cost of Event (Total Cost includes In-Kind Coand All Expenditures Made Fo 	ontributions r the Event)	2	
Co-Sponsor(s)	contribution S (%)		Expenditure Split (%)
 period covered by the Receipts and expendit Schedule (1A), Itemize Summary Page. 	ired to file a separate Fund Rais Campaign Statement. ures listed on a Fund Raiser Schedul d In-Kind Contributions Schedul articipated in a joint fund raiser r	nedule must also be reported o le (1-IK), Itemized Expenditures	n the Itemized Contributions s Schedule (1B) and the



Page 2 of 3

FUND RAISER SCHEDULE 1F

	- USE A SEPARATE SH	ET FOR EACH EVE	NT -
B. Date Event Was Held Port Office Control of the	4. Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	ty 6. Address and Name (If any) of the place where the activity was held 5.8 South Sound Private Residence
Total Contributions	\$ 1125.	50	
Other Receipts	11100	মূহ্য	
Gross Receipts (Add lines 7	⊥ .		
). Total Cost of Event	\$ 626.	97	
otal Cost includes In-Kind Co nd All Expenditures Made Fo			
nd All Expenditures Made Fo		following:	
nd All Expenditures Made Fo	r the Event)		Expenditure Split (%)
nd All Expenditures Made Fo Check if event was a jo	r the Event) pint fund raiser and complete the Contribution S		
nd All Expenditures Made Fo . Check if event was a jo	r the Event) pint fund raiser and complete the Contribution S		
nd All Expenditures Made Fo . Check if event was a jo	r the Event) pint fund raiser and complete the Contribution S		
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nd All Expenditures Made Fo . Check if event was a jo	r the Event) pint fund raiser and complete the Contribution S		
nd All Expenditures Made Fo . Check if event was a jo	r the Event) pint fund raiser and complete the Contribution S		



Page 3 of 3

FUND RAISER SCHEDULE 1F

	- USE A SEPARATE SH	EET FOR EACH EVENT	-
3. Date Event Was Held Out 5 2504 Month Day Year	Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity, was held 2015, Man, Ann Abo, M 4810 Private Residence
7. Total Contributions 3. Other Receipts	\$425.	<u></u>	
9. Gross Receipts (Add lines 7	and 8) 3425 .	. රව	
10. Total Cost of Event Total Cost includes In-Kind Co and All Expenditures Made For	ntributions r the Event)		
	•		
•	int fund raiser and complete the	e following:	
•			Expenditure Split (%)
1. Check if event was a jo	oint fund raiser and complete the		
1. Check if event was a jo	oint fund raiser and complete the		
1. Check if event was a jo	oint fund raiser and complete the		
1. Check if event was a jo	oint fund raiser and complete the		
1. Check if event was a jo	oint fund raiser and complete the		



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK CANDIDATE COMMITTEE

1. Committee I. D. Nu	ımher 💙	2004		
2. Committee Name	Koclen	Sawm G	2 Clerk	lasta
Z. Committee Hame	120			

CANDIDATE COMMITTE			
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 Mac. Thomas Address: PO. Box 196 E. Lonsing MI 4886 If over \$100.00 cumulative, please provide: Occupation: Employer: Business Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description Nutation Printing enuelops 5. Date Of Receipt: S126104 6. Vendor Name & Address:	44.22	44.22
Contribution # 2 PAC Receipt? Yes Name May K Gubner + Alamity Address: P.O. Box 6249 E. Langung, MI 48826 If over \$100.00 cumulative, please provide: Occupation: Employer: Business Address:	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 Tood + drink Tems 5. Date Of Receipt: S/14/04 6. Vendor Name & Address:	108.00	108.00
Contribution #3 PAC Receipt? Yes Name Mayk Gyeb nen + Alanfox Address: P.D. Bax Lay 9 E. Lans In MI 48826 If over \$100.00 cumulative, please provide: Occupation: Employer: Business Address:	4.	246.40	354.40
Li Fullo ixalser Continuotton	Page Subtotal Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	398.62 398.62	,

Enter this total on line 6 of Summary Page

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