



FILED  
WASHTENAW COUNTY, MI

**CANDIDATE COMMITTEE  
COVER PAGE**

2006 JAN 30 P 4: 29  
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: LAWRENCE MI 11/23/2004 To: 12/31/2005  
COUNTY CM6 RR0 Day Year Mo Day Year

4. Candidate Last Name First Name M.I.  
Lawrence Kestenbaum for  
Clerk Register

4a. Office Sought Including District # or Community Served (If applicable)  
Clerk-Register Washtenaw County

4b. County of Residence Driver License # (Optional)  
Washtenaw

6. Treasurer's Name & Residential Address  
Denise Wilmarth  
2850 Elmwood  
Ann Arbor MI 48104  
Area code & Phone (734) 971-2865  
Driver License # (Optional) \_\_\_\_\_

8. Designated Recordkeeper's Name and Mailing Address (If the committee has a Designated Recordkeeper)  
Denise Wilmarth  
2850 Elmwood  
Ann Arbor MI 48104  
Area Code and Phone (734) 971-2865  
Driver License # (Optional) \_\_\_\_\_

1. Committee I.D. Number  
200400-1

2. Committee Name  
Lawrence Kestenbaum for Clerk Register

5. Committee's Mailing Address  
P. O. Box 2563  
Ann Arbor MI 48106  
Area Code and Phone (734) 769-7388

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.

7. Treasurer's Business Address  
152 Main St.  
Belleville MI 48111  
Area Code and Phone (734) 697-8000

9. TYPE OF STATEMENT

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

Pre-Election or Post-Election Statement relates to:

Primary  General  
 Convention  School  
 Special  Caucus

Date of Election, Convention or Caucus  
\_\_\_\_\_  
Month Day Year

9c.  Annual Statement (2005 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  
Effective Date of Dissolution  
\_\_\_\_\_  
Mon Day Year

By checking this item, I certify that the committee has no assets or outstanding debts, including late filing fees. 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 can not be waived.**

10. Verification: I certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Recordkeeper Denise Wilmarth Signature [Signature] Date 01/28/2006  
Type or Print Name Signature Mo Day Year

Candidate Lawrence Kestenbaum for Clerk Register Signature [Signature] Date 01/28/2006  
Type or Print Name Signature Mo Day Year

Authority granted under P.A. 388 of 1976





**SUMMARY PAGE  
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>700.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>0.00</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>700.00</u>	(18.) \$ <u>700.00</u>
<b>4. Other Receipts (Schedule 1A -1, Column 6)</b>	(4.) \$ <u>12.31</u>	(19.) \$ <u>12.31</u>
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$ <u>712.31</u>	(20.) \$ <u>712.31</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
<b>6. In-Kind Contributions (Schedule 1-IK, Column 7)</b>	(6.) \$ <u>0.00</u>	(21.) \$ <u>0.00</u>
<b>7. In-Kind Expenditures (Schedule 1B-IK, Column 6)</b>	(7.) \$ <u>0.00</u>	(22.) \$ <u>0.00</u>
<b>EXPENDITURES</b>		
<b>8. Expenditures</b>		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>457.75</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0.00</u>	
<b>9. TOTAL EXPENDITURES</b> (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>457.75</u>	(23.) \$ <u>457.75</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)		
<b>10. Disbursements</b>		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0.00</u>	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$ <u>0.00</u>	(24.) \$ <u>0.00</u>
<b>DEBTS AND OBLIGATIONS</b>		
<b>12. Debts and Obligations</b>		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>14617.10</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0.00</u>	
<b>BALANCE STATEMENT</b>		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>277.29</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + <u>712.31</u>	
15. SUBTOTAL Add Lines 13 and 14	(15.) = <u>712.31</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - <u>457.75</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ <u>531.85</u>	

NOTE: Direct contributions, in-Kind contributions, loans, expenditures and outstanding debts count against the \$1,000.00 Reporting Waiver threshold.  
All required schedules must be included with this statement. \*If your ending balance is negative, please recheck your math.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 200400-1

2. Committee Name Lawrence Kestenbaum for Clerk Register

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 )
<p>3. Contribution # <u>1</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>12/14/2004</u></p> <p>Name: <u>Patricia Cwiek</u> Address: <u>15206 Mack Ave.</u> <u>#9</u> <u>Grosse Pointe Woods MI 48230</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Local Govt Affairs Di-</u> Employer <u>Michian Land Title Association</u></p> <p>Business Address <u>1000 W. Saint Joseph Hwy. #200</u> <u>P.O. Box 15339</u> <u>Lansing MI 48901-5339</u></p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>	500.00	500.00
<p>3. Contribution # <u>2</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/07/2005</u></p> <p>Name: <u>Paul Haas</u> Address: <u>1803 Superior Rd.</u> <u>Superior Twp MI 48198-9645</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Computer Consultant</u> Employer <u>Self Employed</u></p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>	200.00	200.00

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

700.00
700.00

Enter this total on  
line 3a of  
Summary Page



**ITEMIZED OTHER RECEIPTS  
SCHEDULE 1A-1  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 200400-1

2. Committee Name Lawrence Kestenbaum for Clerk Register

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt # 1 Name: <u>Paypal</u>  Address:  <div style="text-align: right;"><input type="checkbox"/> Fund Raiser</div>	Date of Receipt <u>11/30/2005</u>	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input checked="" type="checkbox"/> Refund \ Rebate <input type="checkbox"/> Other (Specify) Void Fees	12.31

Page Subtotal	12.31
Grand Total of All Schedules 1A-1 (Complete on last page of Schedule)	12.31

Enter this total on  
line 4 of Summary  
Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 200400-1

2. Committee Name Lawrence Kestenbaum for Clerk Register

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 1 Name: U of M Credit Union Address: 333 E. William Ann Arbor                  MI 48107 <input type="checkbox"/> Fund Raiser	Purpose: <u>Bank Charge</u> Expenditure Code <u>BK</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	11/30/2004	1.00
Expenditure # 2 Name: Postmaster Address: Ann Arbor                  MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> Expenditure Code <u>MA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	12/22/2004	37.00
Expenditure # 3 Name: HDL Address: 118 S. Washington Ypsilanti                  MI 48197 <input type="checkbox"/> Fund Raiser	Purpose: <u>Computer &amp; Internet Service</u> Expenditure Code <u>CO</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	02/19/2005	119.95
Expenditure # 4 Name: U of M Credit Union Address: 333 E. William Ann Arbor                  MI 48107 <input type="checkbox"/> Fund Raiser	Purpose: <u>Bank Charge</u> Expenditure Code <u>BK</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	05/26/2005	10.00
Expenditure # 5 Name: HDL Address: 118 S. Washington Ypsilanti                  MI 48197 <input type="checkbox"/> Fund Raiser	Purpose: <u>Computer &amp; Internet Service</u> Expenditure Code <u>CO</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	06/02/2005	39.80

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

207.75
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Enter this total  
on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 200400-1

2. Committee Name Lawrence Kestenbaum for Clerk Register

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 6 Name: Washtenaw Co. Dem Party Address: P. O. Box 3951 Ann Arbor          MI 48106-3951 <input type="checkbox"/> Fund Raiser	Purpose: <u>Program Ad</u> Expenditure Code <u>PA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	06/02/2005	250.00

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

250.00
457.75

Enter this total on line 8a of Summary Page



**DEBTS AND OBLIGATIONS  
SCHEDULE 1E  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 200400-1  
2. Committee Name Lawrence Kestenbaum for Clerk Register

This Schedule itemizes:				
a. <input checked="" type="checkbox"/> Debts and obligations owed <u>by</u> or forgiven the committee <b>OR</b> b. <input type="checkbox"/> Debts and obligations owed <u>to</u> or forgiven <u>by</u> the committee. (Check either a or b. Use only for the purpose checked.)				
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (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 Owed to or by: Practical Political Consulting  P. O. Box 6249  East Lansing MI 48826 Corp? <input checked="" type="checkbox"/> Yes	4. Type: <u>Mailing List</u> Code _____ 5. <u>Date Debt Was Incurred:</u> <u>03/08/2004</u> 6. <u>Original Amount of Debt:</u> \$ <u>439.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	0.00	439.00  <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt # 2 Owed to or by: Lawrence Kestenbaum  1726 W. Stadium Blvd.  Ann Arbor MI 48103 Corp? <input type="checkbox"/> Yes	4. Type: <u>Loan</u> Code _____ 5. <u>Date Debt Was Incurred:</u> <u>04/30/2004</u> 6. <u>Original Amount of Debt:</u> \$ <u>300.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	0.00	300.00  <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt # 3 Owed to or by: Lawrence Kestenbaum  1726 W. Stadium Blvd.  Ann Arbor MI 48103 Corp? <input type="checkbox"/> Yes	4. Type: <u>Loan</u> Code _____ 5. <u>Date Debt Was Incurred:</u> <u>07/11/2004</u> 6. <u>Original Amount of Debt:</u> \$ <u>1000.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	0.00	1000.00  <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

1739.00

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

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

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

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



**DEBTS AND OBLIGATIONS  
SCHEDULE 1E  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 200400-1  
2. Committee Name Lawrence Kestenbaum for Clerk Register

This Schedule itemizes:				
a. <input checked="" type="checkbox"/> Debts and obligations owed <u>by</u> or forgiven the committee OR b. <input type="checkbox"/> Debts and obligations owed <u>to</u> or forgiven <u>by</u> 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	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt # 4 Corp? <input type="checkbox"/> Yes Owed to or by: Lawrence Kestenbaum  1726 W. Stadium Blvd.  Ann Arbor MI 48103	4. Type: <u>Loan</u> Code _____ 5. <u>Date Debt Was Incurred:</u> <u>10/02/2004</u> 6. <u>Original Amount of Debt:</u> \$ <u>1000.00</u>	_____ \$ _____ _____ \$ _____ _____ \$ _____ _____ \$ _____	0.00	1000.00  <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt # 5 Corp? <input type="checkbox"/> Yes Owed to or by: Lawrence Kestenbaum  1726 W. Stadium Blvd.  Ann Arbor MI 48103	4. Type: <u>Loan</u> Code _____ 5. <u>Date Debt Was Incurred:</u> <u>10/27/2004</u> 6. <u>Original Amount of Debt:</u> \$ <u>1822.14</u>	_____ \$ _____ _____ \$ _____ _____ \$ _____ _____ \$ _____	0.00	1822.14  <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt # 6 Corp? <input type="checkbox"/> Yes Owed to or by: Lawrence Kestenbaum  1726 W. Stadium Blvd.  Ann Arbor MI 48103	4. Type: <u>Loan</u> Code _____ 5. <u>Date Debt Was Incurred:</u> <u>10/27/2004</u> 6. <u>Original Amount of Debt:</u> \$ <u>9000.00</u>	_____ \$ _____ _____ \$ _____ _____ \$ _____ _____ \$ _____	0.00	9000.00  <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

11822.14
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Grand Total of all Schedules 1E  
(Complete on last page of Schedule showing amounts owed by or to the committee.)

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

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

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





**DEBTS AND OBLIGATIONS  
SCHEDULE 1E  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 200400-1  
2. Committee Name Lawrence Kestenbaum for Clerk Register

This Schedule itemizes:  
a.  Debts and obligations owed by or forgiven the committee **OR** b.  Debts and obligations owed to or forgiven by the committee.  
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the 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 # 7 Owed to or by: Practical Political Consulting  P. O. Box 6249  East Lansing MI 48826 Corp? <input checked="" type="checkbox"/> Yes	4. Type: <u>Mailing List</u> Code _____ 5. <u>Date Debt Was Incurred:</u> <u>12/20/2004</u> 6. <u>Original Amount of Debt:</u> \$ <u>698.30</u>	\$ _____ \$ _____ \$ _____ \$ _____	0.00	698.30  <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Debt # 8 Owed to or by: Practical Political Consulting  P. O. Box 6249  East Lansing MI 48826 Corp? <input checked="" type="checkbox"/> Yes	4. Type: <u>Mailing List</u> Code _____ 5. <u>Date Debt Was Incurred:</u> <u>12/20/2004</u> 6. <u>Original Amount of Debt:</u> \$ <u>357.66</u>	\$ _____ \$ _____ \$ _____ \$ _____	0.00	357.66  <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Debt # Owed to or by:    Corp? <input type="checkbox"/> Yes	4. Type: _____ Code _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ _____ \$ _____ \$ _____ \$ _____		     <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

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

1055.96
14617.10

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

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.