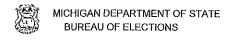


# CANDIDATE COMMITTEE COVER PAGE

## 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:	m07/20/20 to 08/24/20		
1. Committee I.D. Number		4. Candidate Last Name	First Name M.I.		
200400-1		Kestenbaum Lawrence			
		4a. Office Sought Including District # or Community Served (If applicable)			
2. Committee Name		Clerk-Register Washte	enaw County		
Lawrence Kestenbaum for Clerk-F	Register	4b. County of Residence <b>WA</b>	SHTENAW		
5. Committee's Malling Address		6. Treasurer's Name & Reside			
P.O. Box 2563		Denise W. Baker 8125 Lake Crest Dr. Ypsilanti, MI 48197  FIL  YPSILAM REFICE TO SEP - 2020 SEP - 20			
Ann Arbor, MI 48106		8125 Lake Crest Dr.			
		Ypsilanti, MI 48197	YOU SER SEP		
Area Code and Dhana (734) 769-7388			OCE P - WAN		
Area Code and Phone (734) 769-7388 If the address in this box is different from the committee		7A W Im			
mailing address on the Statement of Organization, r be sent to this address by the filing official.	naumay	Area Code & Phone (734) 219-7117			
7. Treasurer's Business Address		8. Designated Record Keeper	's Name and Mailing Address (If the committee has a		
152 Main St., Suite 2		Denice W Raker	Area Code & Phone (734) 219-7117  8. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper)  Denise W. Baker  22		
Belleville, MI 48111		8125 Lake Crest Dr.	AUM ATER		
		Ypsilanti, MI 48197	~		
Area Code and Phone		Area Code and Phone (734	) 219-7117		
9, TYPE OF STATEMENT	Paguirad Ob	It V if condidate	9e. Dissolution of Candidate Committee		
9a. Pre-Election OR 9b. Post-Election	Required ONLY if candidate is not on the ballot for the current year:		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		
Pre-Election or Post-Election Statement relates to:	July Quart	iorly	the committee. The committee has no outstanding assets,		
		, cony	owes no lates fees or has any outstanding debt.		
General	October C	)uarterly	Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.		
Convention			considered a request for the Reporting walver.		
Special	9c	al Statement ( )			
School		Coverage Year	Effective date of dissolution		
Caucus		ndment to Campaign Statement			
	(Com	plete Item 9a, 9b, 9c or 9e to te which Statement is being	Note: The disposition of residual funds must be reported of	on	
	amen		Schedule 1B and the Summary Page.		
Date of Election, Convention or Caucus					
08/04/20					
10. Verification: I/We certify that all reasonable dilig my/lour knowledge and belief the contents are true,	ence was used accurate and c	in the preparation of this statem omplete.	ent and attached schedules (If any) and to the best of		
Current Treasurer or Denise W. Ba	aker	for M	9/03/20		
Designated Record Keeper Type or Print Name		/Signature /	Date 9/3/20		
		$\mathcal{L}$	1 miles		
Candidate Lawrence Kestenbaum		ihawana li	Date Date		
Type or Print Name	9	Signature	<i>'</i>		



1. Committee I.D. Number 200400-1

## SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Lawrence Kestenbaum for Clerk-Register

OANDIDATE COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions	5 725 00	
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 5,725.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ \$5,725.00	(18.) \$ _\$16,346.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$5,725.00	(20.) \$ \$16,346.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$0.00	(21.) \$ \$10,395.14
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$ 0
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$14,779.98</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ \$1.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ _\$14,780.98	(23.) \$ \$14,979.84
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
Disbursements     a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)	(40h.) e	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(10b.) \$	
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$	(24.) \$
a. Owed by the Committee (Schedule 1E)	(12a.) \$ \$0.00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ \$12,642.91	
(Enter zero if no previous reports have been filed.)  14. Amount received during reporting period	(14.) + \$ \$5,725.00	
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$_\$18,367.91	
<ol> <li>Amount expended during reporting period (Add lines 9 and 11)</li> </ol>	(16.) - \$ \$14,780.98	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$3,586.93 *	

#### **CONTRIBUTIONS (1A) CANDIDATE COMMITTEE**

- Committee ID	200400-1
	Lawrence Kestenbaum for Clerk Register
- Branch of which were to write the same of the same o	
	Post-Election Primary

# 4880- -Add

PAC Receipt?:

Date of Receipt: 07/20/2020

Amt: 3,500.00

Cumul: 21,395.14

Name: Lawrence Kestenbaum Address: 424 Little Lake Dr #7

City: Ann Arbor State: MI

Zip: 48103

Occupation: Clerk Register

Employer: Washtenaw County Business Address: 220 N. Main St.

City: Ann Arbor State: MI

Zip: 48104

Type of Contribution: Direct

# 4881- -Add

PAC Receipt?:

Date of Receipt: 07/20/2020

Amt: 100,00

Cumul: 100.00

Name: Joseph Saul

Address: 5080 Ann Arbor-Saline Rd.

City: Ann Arbor State: MI

**Zip:** 48103

Occupation:

Employer:

**Business Address:** 

City: State:

Zip:

Type of Contribution: Direct

# 4879- -Add

PAC Receipt?:

Date of Receipt: 07/20/2020

Amt: 100.00

Cumul: 100.00

Name: Nancy Stryker

Address: 424 Little Lake Dr. #20

City: Ann Arbor State: MI

**Zip:** 48103

Occupation:

Occupation:

Employer:

**Business Address:** 

City: State:

Zip:

Type of Contribution: Direct

# 4882- -Add

PAC Receipt?:

Date of Receipt: 08/15/2020

Name: Ralph Keith

Address: 424 Little Lake Dr. Apt. 9 City: Ann Arbor State: MI

Zip: 48103

Type of Contribution: Direct

Amt: 25.00

**Employer: Business Address:** 

City: State:

Zip:

## **CONTRIBUTIONS (1A) CANDIDATE COMMITTEE**

# 4884- -Add

PAC Receipt?:

Date of Receipt: 08/22/2020

Occupation: Clerk Register

Amt: 2,000.00

Cumul: 23,395.14

Name: Lawrence Kestenbaum Address: 424 Little Lake Dr #7

City: Ann Arbor State: MI

Zip: 48103

Employer: Washtenaw County Business Address: 220 N. Main St.

City: Ann Arbor State: MI

**Zip:** 48104

Type of Contribution: Direct

### **DIRECT EXPENDITURES (1B) CANDIDATE COMMITTEE**

· Committee ID	200400-1
· Committee Name	Lawrence Kestenbaum for Clerk Register
Document Name	Post-Election Primary

# 4885- -Add

Date: 07/20/2020

Name: ActBlue

Address: P.O. Box 441146 City: Somerville State: MA

Zip: 02144-0031

Amt: 54.00

Purpose: Credit Card Fee

Fund Raiser:

Payment on Debt/Obligation

reported on

previous statement:

# 4891- -Add

Date: 07/22/2020

Name: Hess Printing Address: 201 Elm Suite A City: Wyandotte State: MI

**Zip:** 48192

Amt: 14,694.10

Purpose: Postcard printing and

mailing

Fund Raiser:

Payment on Debt/Obligation

reported on

previous statement:

# 4886- -Add

Date: 07/30/2020

Name: ActBlue Address: P.O. Box 441146

City: Somerville State: MA **Zip:** 02144-0031

Amt: 1.50

Purpose: Credit Card Fee

Fund Raiser:

Payment on Debt/Obligation

reported on

previous statement:

# 4888- -Add

Date: 08/15/2020

Name: ActBlue

**Address:** P.O. Box 441146 City: Somerville State: MA

**Zip:** 02144-0031

Amt: 0.38

Purpose: Credit Card Fee

**Fund Raiser:** 

Payment on Debt/Obligation

reported on

previous statement:

# 4889- -Add

Date: 08/22/2020

Name: ActBlue Address: P.O. Box 441146 City: Somerville State: MA

Zip: 02144-0031

Amt: 30,00

Purpose: Credit Card Fee

**Fund Raiser:** 

Payment on Debt/Obligation

reported on

previous statement:

Schedule Total