



JAN 29 2013

**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

INGHAM COUNTY CLERK

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: 01/01/11 to 12/31/11

1. Committee I.D. Number
458990-0

2. Committee Name
People for Kathie Dunbar

4. Candidate Last Name First Name M.I.
Dunbar Kathie A

4a. Office Sought Including District # or Community Served (If applicable)
Lansing City Council At-Large

4b. County of Residence **Ingham**

5. Committee's Mailing Address
**1334 Boston Blvd.
Lansing MI 48933**

Area Code and Phone (517) 614-9035

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
**Rebecca Bahar-Cook
535 Westmoreland
Lansing, MI 48915**

Area Code & Phone (517) 290-5845

7. Treasurer's Business Address
**124 W. Allegan St.
Ste. 1616
Lansing MI 48933**

Area Code and Phone (517) 485-9127

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

Area Code and Phone _____

9. TYPE OF STATEMENT

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

Pre-Election or Post-Election Statement relates to:

Primary General
 Convention School
 Special Caucus

Date of Election, Convention or Caucus
11/03/09

9c. Annual Statement (2011 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

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: 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 Rebecca Bahar-Cook *Rebecca Bahar Cook* Date 1-27-13

Type or Print Name Signature

Candidate Kathie Dunbar *Kathie Dunbar* Date 1-27-13

Type or Print Name Signature

F2013-0145
 1/30/13 8:22 AM Page 1 of 1
 Barb Byrum: Ingham County Clerk



1. Committee I.D. Number 458990-0

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name People for Kathie Dunbar

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>500.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>500.00</u>	(18.) \$ <u>28,440.00</u>
4. Other Receipts (Schedule 1A-1, Column 6)	(4.) \$ <u>0.00</u>	(19.) \$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>500.00</u>	(20.) \$ <u>28,440.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>0.00</u>	(21.) \$ <u>2,453.69</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0.00</u>	(22.) \$ <u>0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>0.00</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>0.00</u>	(23.) \$ <u>22,279.88</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>820.93</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>1,622.20</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>2,443.13</u>	(24.) \$ <u>4,806.67</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>500.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0.00</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>3,296.58</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>0.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>3,296.58</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>1,943.13</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>1,353.45</u>	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 458990-0

2. Committee Name People for Kathie Dunbar

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.

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 04/08/11

Name & Address:
Kathie Dunbar

6. Amount \$ 500 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 500

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)
Occupation Candidate Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 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

3. Contribution # 3 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

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 \$500.00
Grand Total of All Schedules 1A (Complete on last page of Schedule) \$500.00

Enter this total on line 3a of Summary Page.



**INCIDENTAL OFFICE EXPENSE
DISBURSEMENTS
SCHEDULE 1C
CANDIDATE COMMITTEE**
(For use by officeholders only)

1. Committee I. D. Number 458990-0
2. Committee Name People for Kathie Dunbar

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: Kroger 921 W. Holmes Rd. Lansing MI 48910	Purpose <u>food for nhbd event</u>	<u>04/24/11</u> Date	<u>\$107.95</u>
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>GO</u> <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type <input type="button" value="v"/>	
Disbursement # 2 Name & Address: Meijer W. Lake Lansing Rd East Lansing MI 48823	Purpose <u>office supplies</u>	<u>04/29/11</u> Date	<u>\$109.07</u>
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>BO</u> <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type <input type="button" value="v"/>	
Disbursement # 3 Name & Address: Carrabba's 6540 W. Saginaw Lansing, MI 48917	Purpose <u>meeting</u>	<u>07/11/11</u> Date	<u>\$103.91</u>
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>FO</u> <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type <input type="button" value="v"/>	
Disbursement # 4 Name & Address: Ingham County Clerk 315 S. Jefferson St. Mason, MI 48854	Purpose <u>late fee</u>	<u>04/08/11</u> Date	<u>\$500</u>
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code _____ <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type <input type="button" value="v"/>	

Subtotal this page **\$820.93**

Grand Total of all Schedules 1C
(Complete on last page of Schedule) **\$820.93**

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



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 458990-0
2. Committee Name People for Kathie Dunbar

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 endorser or guarantors, if any.	4. Type of Obligation (Description) 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? <input type="checkbox"/> Yes Owed to or by: Kathie Dunbar 1334 Boston Blvd. Lansing, MI 48910	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>04/08/11</u> 6. <u>Original Amount of Debt:</u> \$ <u>500</u>	<table border="1"> <tr><td>\$</td></tr> <tr><td>\$</td></tr> <tr><td>\$</td></tr> <tr><td>\$</td></tr> <tr><td>\$</td></tr> <tr><td>\$</td></tr> </table>	\$	\$	\$	\$	\$	\$	\$	\$ <u>500</u> <input type="checkbox"/> FORGIVEN
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If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____										
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	<table border="1"> <tr><td>\$</td></tr> <tr><td>\$</td></tr> <tr><td>\$</td></tr> <tr><td>\$</td></tr> <tr><td>\$</td></tr> <tr><td>\$</td></tr> </table>	\$	\$	\$	\$	\$	\$	\$	\$ _____ <input type="checkbox"/> FORGIVEN
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If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____										
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	<table border="1"> <tr><td>\$</td></tr> <tr><td>\$</td></tr> <tr><td>\$</td></tr> <tr><td>\$</td></tr> <tr><td>\$</td></tr> <tr><td>\$</td></tr> </table>	\$	\$	\$	\$	\$	\$	\$	\$ _____ <input type="checkbox"/> FORGIVEN
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If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____										

Page Subtotal (Outstanding debt) **\$500.00**
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee) **\$500.00**

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

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.