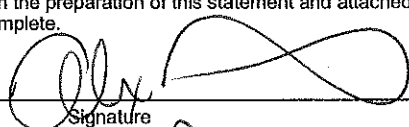
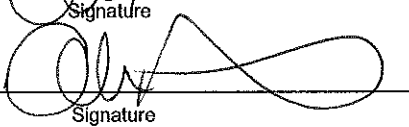




**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

<p>1. Committee I.D. Number C-2014-026</p> <p>2. Committee Name Alex Milshteyn for WCC Board of Trustees</p> <p>5. Committee's Mailing Address 315 Second St. #516 Ann Arbor, MI 48103 Area Code and Phone <u>734-417-3560</u> 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.</p> <p>7. Treasurer's Business Address 315 Second St. #516 Ann Arbor, MI 48103 Area Code and Phone <u>734-417-3560</u></p>		<p>3. This Statement covers: from <u>10/20/2014</u> to <u>11/24/2014</u></p> <p>4. Candidate Last Name Milshteyn First Name Aleksandr (Alex) M.I. 4a. Office Sought Including District # or Community Served (If applicable) Board Member - Local</p> <p>4b. County of Residence WASHTENAW</p> <p>6. Treasurer's Name & Residential Address Alex Milshteyn 315 Second St. #516 Ann Arbor, MI 48103 Area Code & Phone <u>734-417-3560</u></p> <p>8. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper) Area Code and Phone _____</p>	
<p>9. TYPE OF STATEMENT</p> <p>9a. <input type="checkbox"/> Pre-Election OR 9b. <input checked="" type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus</p> <p>Date of Election, Convention or Caucus <u>11/4/2014</u></p>		<p>Required ONLY if candidate is not on the ballot for the current year:</p> <p><input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly</p> <p>9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year</p> <p>9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)</p> <p>9e. <input type="checkbox"/> By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven and no longer collectible from the committee. The committee has no outstanding assets, owes no lates fees or has any outstanding debt.</p> <p>Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.</p> <p>Effective date of dissolution _____</p> <p>Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.</p>	
<p>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.</p> <p>Current Treasurer or Designated Record Keeper <u>Aleksandr Milshteyn</u>  Date <u>12/3/14</u> Type or Print Name Signature</p> <p>Candidate <u>Aleksandr Milshteyn</u>  Date <u>12/3/14</u> Type or Print Name Signature</p>			

FILED
WASHTENAW COUNTY, MI
2014 DEC 3 A 11:06
LAWRENCE J. ESTENBAUM
COUNTY CLERK/REGISTRAR



1. Committee I.D. Number C-2014-026

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Alex Milshteyn for WCC

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>151.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ _____	(18.) \$ _____
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _____	(19.) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>\$151.00</u>	(20.) \$ <u>\$16,851.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ _____	(21.) \$ _____
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ _____	(22.) \$ <u>\$914.05</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$7,298.91</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ _____	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>\$54.98</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>\$7,353.98</u>	(23.) \$ <u>\$15,950.13</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ _____	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ _____	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ _____	(24.) \$ _____
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$5,000.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _____	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>\$8,103.85</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$151.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$8,254.85</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$7,453.98</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$800.87</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number C-2014-026
2. Committee Name Alex Milshteyn for WCC Trustee

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 regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/24/14</u> Name & Address: Carol Kuhnke 1920 Longshore Ann Arbor, MI 48105	\$ <u>100</u>	\$ <u>300</u>
5. If over \$100.00 cumulative, please provide: <div style="display: flex; justify-content: space-between;"> Occupation <u>Judge</u> Employer <u>Washtenaw County</u> Click Here for Memo Itemization </div> Business Address <u>101 E Huron Ann Arbor, MI 48104</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution # 2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/25/14</u> Name & Address: Praveena Ramaswami 2936 Sheffield Ct Ann Arbor, MI 48105	\$ <u>51</u>	\$ <u>51</u>
5. If over \$100.00 cumulative, please provide: <div style="display: flex; justify-content: space-between;"> Occupation _____ Employer _____ Click Here for Memo Itemization </div> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address:	\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: <div style="display: flex; justify-content: space-between;"> Occupation _____ Employer _____ Click Here for Memo Itemization </div> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address:	\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: <div style="display: flex; justify-content: space-between;"> Occupation _____ Employer _____ Click Here for Memo Itemization </div> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		

Page Subtotal **\$151.00**

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

\$151.00

Enter this total on
line 3a of Summary
Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2014-026
2. Committee Name Alex Milshteyn for WCC Trustee

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name United Sonz Address 105 W Michigan Ypsilanti, MI 48197 <input type="checkbox"/> Fund Raiser	Purpose: <u>Direct Mail</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/21/14</u> Date	<u>\$ 2567.10</u> Click Here for Memo Itemization Type
Expenditure #2 Name Sawicki & Son Address 1521 Lafayette Detroit, MI 48126 <input type="checkbox"/> Fund Raiser	Purpose: <u>Yard Signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/21/14</u> Date	<u>\$ 676.81</u> Click Here for Memo Itemization Type
Expenditure #3 Name Ann Arbor Democratic Party Address PO Box 7497 Ann Arbor, MI 48106 <input type="checkbox"/> Fund Raiser	Purpose: <u>Coordinated Campaign</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/29/14</u> Date	<u>\$ 600</u> Click Here for Memo Itemization Type
Expenditure #4 Name Checkmate, LLC Address 113 Fieldcrest #103 Ann Arbor, MI 48103 <input type="checkbox"/> Fund Raiser	Purpose: <u>Consulting</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/29/14</u> Date	<u>\$ 1000</u> Click Here for Memo Itemization Type
Expenditure #5 Name MLive Media Group Address 111 N. Ashley Ann Arbor, MI 48104 <input type="checkbox"/> Fund Raiser	Purpose: <u>Online Ads</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/31/14</u> Date	<u>\$ 570</u> Click Here for Memo Itemization Type

Subtotal this page **\$5,413.91**
 Grand Total of all Schedules 1B
 (Complete on last page of Schedule) **\$7,298.91**

Enter this total on line 8a of Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number C-2014-026
2. Committee Name Alex Milshteyn for WCC

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name United Sonz Address 105 W Michigan Ypsilanti, MI 48197 <input type="checkbox"/> Fund Raiser	Purpose: <u>Direct Mail</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/31/14</u> Date	<u>\$ 1,885</u>
Expenditure #2 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #3 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #4 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page **\$1,885.00**

Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$7,298.91**

Enter this total
on line 8a of
Summary Page



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number C-2014-026
2. Committee Name CTE Alex Milshteyn for WCC Board of Trustees

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 (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: Alex Milshteyn 315 Second Street #516 Ann Arbor, MI 48103	4. Type: <u>Debt</u> 5. <u>Date Debt Was Incurred:</u> <u>6/14/14</u> 6. <u>Original Amount of Debt:</u> <u>\$ 5,000</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>5,000</u> <input type="checkbox"/> FORGIVEN
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> \$ _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ _____ <input type="checkbox"/> FORGIVEN
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> \$ _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) 5,000
Grand Total of all Schedules 1E 5,000
(Complete on last page of Schedule showing amounts owed by or to the committee)

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.