MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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06 MAR 30 AM 10:29
MACOMB COUNTY CLERK
MACOMB, MICHIGAN

CANDIDATE COMMITTEE COVER PAGE

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

FOR OFFICIAL USE ONLY

3. This Statement covers From: 11 23 04 (Mo Day Year) to 12 31 05 (Mo Day Year)

1. Committee I.D. Number: 137524

2. Committee Name: ELECT MICHAEL BARBER

4. Candidate Last Name: BARBER First Name: MICHAEL M.I.: M

4a. Office Sought Including District # or Community Served (If applicable): MACOMB PUBLIC WORKS COMMISSIONER

4b. County of Residence: MACOMB

5. Committee's Mailing Address: 33079 GARFIELD FRASER MI 48026

Area Code and Phone: 586 777-5298

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: MICHAEL BARBER 28221 LARCHMONT ST CLAIR SHORES MI 48081

Area Code & Phone: (586) 777 5298

7. Treasurer's Business Address:

Area Code and Phone ( )

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

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

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: 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: MICHAEL BARBER (Type or Print Name) Michael Barber (Signature) Date 3/28/06 (Mo Day Year)

Candidate: MICHAEL BARBER (Type or Print Name) Michael Barber (Signature) Date 3 28 06 (Mo Day Year)

Authority granted under P.A. 388 of 1976