



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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 From: 12-31-09 to 12-31-10
MO Day Year MO Day Year

1. Committee I.D. Number 33520
2. Committee Name JEFF WRIGHT 200

4. Candidate Last Name Wright First Name Jeff M.I.
4a. Office Sought Including District # or Community Served (if applicable)
Genesee County Drain Commissioner
4b. County of Residence Genesee

5. Committee's Mailing Address
2174 Lynamore
Burtovs mi - 48509
Area Code and Phone 810-742-0346
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
Jane Nemchski
2429 N. Genesee Rd.
Burtovs - mi 48509
Area Code & Phone (810) 743-3982

7. Treasurer's Business Address
2429 N. Genesee Rd.
Burtovs - mi. 48509
Area Code and Phone (810) 743-3982

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 (2110) Coverage Year(s)
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 Schedules 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 signed.

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 JANE NEMCHSKI Jane Nemchski Date 1 31 11
Type of Print Name Signature MO Day Year
Candidate JEFF WRIGHT Jeff Wright Date 1 31 11
Type of Print Name Signature MO Day Year

Authority granted under P.A. 368 of 1976

FILED
2011 JAN 31 P 25
GENESEE COUNTY CLERK



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 33520
2. Committee Name JEFF WRIGHT 2000

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>75,650.00</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>75,650.00</u> ✓	(20.) \$ <u>75,650.00</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.) \$ _____
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>80,140.16</u>	
b. Itemized Get-Out-the-Votes (Schedule 1B-G)	(8b.) \$ _____	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ _____	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>80,140.16</u> ✓	(23.) \$ <u>80,140.16</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officials 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.) \$ _____	
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>24,729.21</u> ✓	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>75,650.00</u> ✓	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>100,379.21</u> ✓	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>80,140.16</u> ✓	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>20,239.05</u> ✓	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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 from committees 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>2-9-10</u> Name: <u>JOHN MACDONALD</u> Address: <u>18764 VAN RD.</u> <u>LIVONIA - MI 48152</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>MARTIN CONTROL SER.</u> Business Address <u>23905 FREEWAY PH. - FARMINGTON HILLS</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-3-10</u> Name: <u>MARK COLEMAN</u> Address: <u>25694 BEECH ST.</u> <u>DEARBORN - MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>WADE TRIM</u> Business Address <u>601 N. SAG. - FLINT - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 500.00	\$ 500.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>2-17-10</u> Name: <u>DAVID VAGO</u> Address: <u>855 LAKELAND</u> <u>GROSSE PT. MI.</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>WADE TRIM</u> Business Address <u>555 S. SAGINAW - FLINT - 48502</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 500.00	\$ 500.00
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>2-26-10</u> Name: <u>DOUGLAS WATSON</u> Address: <u>12401 WOODLANDS CT.</u> <u>PLYMOUTH - MI - 48120</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>WADE TRIM</u> Business Address <u>555 S. SAG - FLINT - 48502</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 500.00	\$ 500.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$ 2500.00	✓

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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 from committees regardless of amount.	8. 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>2-26-10</u> Name: <u>NICHOLAS LDMAKO</u> Address: <u>20154 EDGEWOOD</u> <u>LIVONIA - MI - 48152</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>WADE TRIM</u> Business Address <u>555 S. SAGINAW - 48502</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 500.00	\$ 500.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>2-27-10</u> Name: <u>ANDREW McCUNE</u> Address: <u>985 GOLDEN CT.</u> <u>SALINE - MI - 48176</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>WADE TRIM</u> Business Address <u>555 S. SAG - FLINT - 48502</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 500.00	\$ 500.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>2-23-10</u> Name: <u>JOHN THOMPSON</u> Address: <u>4972 CONIC 4</u> <u>HARROW, ONTARIO</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>LIQUI FORCE</u> Business Address <u>28529 GOODARD - ROMULUS - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-16-10</u> Name: <u>ROBERT YOUNG</u> Address: <u>2280 RICEBROOK</u> <u>BURTON - MI - 48509</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>YOUNG'S ENVIRONMENTAL</u> Business Address <u>5305 N. OORT HWY - FLINT</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$ 3,000.00	✓

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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 from committees 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>3-3-10</u> Name: <u>MICHAEL D'ACOSTINA</u> Address: <u>17565 AUGUSTA</u> <u>MADONB, MI - 48042</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OFFICER</u> Employer <u>D4 ENTERPRISES</u> Business Address <u>6510 CADILLAC SQUARE - DETROIT 48226</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-3-10</u> Name: <u>SHERRY D'ACOSTINI</u> Address: <u>2281 POND VALLEE</u> <u>OKLAND - MI - 48363</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>HOUSEWIFE</u> Employer <u>D4 ENTERPRISES</u> Business Address <u>6510 CADILLAC - DET. 48226</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-2-10</u> Name: <u>LUIGI D'ACOSTINA</u> Address: <u>2281 POND VALLEE</u> <u>OKLAND - MI - 48363</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OFFICER</u> Employer <u>D4 ENTERPRISES</u> Business Address <u>6510 CADILLAC - DET - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-2-10</u> Name: <u>GINDA ACOSTINI</u> Address: <u>1319 MAIN ST.</u> <u>ROYAL OAK - MI - 48067</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>PROJECT MANN</u> Employer <u>D4 ENTERPRISES</u> Business Address <u>6510 CADILLAC SQ. - DET. 48226</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$ 4,000.00	✓

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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 from committees 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>3-4-10</u> Name: <u>ANTONINA D'AGOSTINI</u> Address: <u>3340 GREENSPRING LANE</u> <u>ROCHESTER - MI - 48309</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OFFICER</u> Employer <u>L-D'AGOSTINI & SONS</u> Business Address <u>15801 23 MILE - MACOMBA, MI - 48045</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-4-10</u> Name: <u>JAMES D'AGOSTINI</u> Address: <u>3340 GREENSPRINGS</u> <u>ROCHESTER - MI - 48309</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OFFICER</u> Employer <u>L-D'AGOSTINI + SONS</u> Business Address <u>15801 23 MILE - MACOMBA MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-8-10</u> Name: <u>ANTONIO D'AGOSTINI</u> Address: <u>11300 WALNUT</u> <u>STERLING HTS. - MI - 48313</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>L-D'AGOSTINI + SONS</u> Business Address <u>15801 23 MILE - MACOMBA - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-17-10</u> Name: <u>JOHN GREEN</u> Address: <u>278 BRIDGEVIEW</u> <u>SAC. - MI - 48604</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>MECH. CONTRACTOR</u> Employer <u>JOHN GREENE COMP,</u> Business Address <u>220 VICTOR AVE. - MI - 48203</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00

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

\$ 4,000.00 ✓

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MICHIGAN DEPARTMENT OF STATE
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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 from committees regardless of amount.	8. 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>3-10-10</u> Name: <u>STEVE NAGY</u> Address: <u>10359 ASPEN VALLEY FENTON - MI - 48430</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>GOULD ENG.</u> Business Address <u>2040 E MAPLE - FLINT - 48507</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1000.00	\$ 1,000.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-26-10</u> Name: <u>JEFF LEWIS</u> Address: <u>3431 FLINT RIVER RD. COLUMBIANVILLE - MI - 48421</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>North Arrow Eng.</u> Business Address <u>14165 Fenton Rd - Fenton - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1000.00	\$ 1,000.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-16-10</u> Name: <u>ANGELA SCHERZER</u> Address: <u>5470 4 MILE RD. BAY CITY - MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>SPICER</u> Business Address <u>1400 ZEER DR. - ST. JOHNS - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-26-10</u> Name: <u>LAWRENCE PROTASIEWICZ</u> Address: <u>3895 BANNER RD. ST. JOHNS - MI - 48879</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>Spicer</u> Business Address <u>1400 Zeer Dr. - St. Johns - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1000.00	\$ 1000.00

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

4,000.00 ✓

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CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520
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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 from committees regardless of amount.	8. 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>3-26-10</u> Name: <u>MICHAEL PIFER</u> Address: <u>6428 BOULDER FLUSHING - MI - 48433</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>KRAFT ENG.</u> Business Address <u>409 W 7th - FLINT - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 500.00	\$ 500.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-26-10</u> Name: <u>JOHN ZITO</u> Address: <u>8033 FENTON RD. GRAND BLANC MI - 48439</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>ZITO CONSTRUCTION</u> Business Address <u>8033 FENTON RD. - GRAND BLANC</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1000.00	\$ 1,000.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-26-10</u> Name: <u>GARY PORRETT</u> Address: <u>11453 CARR RD. DAVISON - MI - 48533</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>BELL WARE HOUSE</u> Business Address <u>1811 JAMES P. COLE - FLINT</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 2000.00	\$ 2,000.00
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-26-10</u> Name: <u>DANIEL ZITO</u> Address: <u>8033 FENTON RD. GRAND BLANC - MI - 48439</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>ZITO CONSTRUCTION</u> Business Address <u>8033 FENTON RD - GRAND BLANC</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1000.00	\$ 1000.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$ 4,500.00	✓

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-26-10</u> Name: <u>KEVIN COOK</u> Address: <u>5359 TERRITORIAL</u> <u>GRAND BLANC - MI - 48439</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>CHMP</u> Business Address <u>5359 TERRITORIAL - GRAND BLANC</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$1000.00	\$1000.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-25-10</u> Name: <u>BRIAN BUSCH</u> Address: <u>50722 SEADEN</u> <u>CHESTERFIELD - MI - 48047</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>Etra</u> Business Address <u>1416 N. Outer Dr - Arg. - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$2000.00	\$2,000.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-25-10</u> Name: <u>KIMBERLY YATES</u> Address: <u>2495 STONEGATE</u> <u>LAFER - MI - 48446</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>owner</u> Employer <u>Yates Construction</u> Business Address <u>Oxford - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$1000.00	\$1,000.00
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-26-10</u> Name: <u>FRED SALTZ</u> Address: <u>ONE LIGHTHOUSE POINT</u> <u>FENTON - MI - 48430</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$500.00	\$500.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	3,600.00	✓

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MICHIGAN DEPARTMENT OF STATE
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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 from committees regardless of amount.	8. 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>3-26-10</u> Name: <u>RICHARD FIGULA</u> Address: <u>4430 WARDIES WAY</u> <u>COLUMBIANVILLE - MI - 48431</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>STEVE'S PLUMBING</u> Business Address <u>14 GENESEE RD - BURTON</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 500.00	\$ 500.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4-5-10</u> Name: <u>JOHN MATONICH</u> Address: <u>540 S. SAG.</u> <u>FLINT - MI - 48502</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>RDWE PROF. SERVICES</u> Business Address <u>540 S. SAG - FLINT - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 3000.00	\$ 3000.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-2-10</u> Name: <u>ISHWAR NAIK</u> Address: <u>3825 MAPLE DR.</u> <u>YPSILANTI - MI - 48197</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>AIERS - LEWIS</u> Business Address <u>3959 RESEARCH - ANN ARBOR</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 2000.00	\$ 2000.00
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-10-10</u> Name: <u>MICHAEL DENEEN</u> Address: <u>12174 PINE ROW LANE</u> <u>GRAND BLANC - MI - 48439</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>MANAGER</u> Employer <u>MV PIPE + VALVE</u> Business Address <u>PIERSON RD.</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1200.00	\$ 1200.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$ 6700.00	✓

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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 from committees 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>3-9-10</u> Name: <u>BARRY WOLF</u> Address: <u>814 KENSINGTON</u> <u>FLINT - MI 48503</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF</u> Business Address <u>718 BEECH ST. FLINT - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-9-10</u> Name: <u>NABIL NANNOSHI</u> Address: <u>7305 SILVERBEECH</u> <u>WEST BLOOMFIELD - MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>owner</u> Employer <u>Food Castle</u> Business Address <u>16853 Dixie - Grand Blanc - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 500.00	\$ 500.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>2-12-10</u> Name: <u>JN BURNS</u> Address: <u>1662 WINGFIELD</u> <u>BIRMINGHAM - ALA</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>AM. PIPE</u> Business Address <u>9964 E. Grand River - Brighton - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-2-10</u> Name: <u>J MICHAEL O'BRIEN</u> Address: <u>1305 FAIRWAY</u> <u>HOOVER, ALA</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>Am Pipe</u> Business Address <u>9964 E. Grand River - Brighton - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00

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

3,500.00 ✓

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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 from committees 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>3-8-10</u> Name: <u>FRANK DIPONIO</u> Address: <u>5173 SIMONE IND. SHELBY TWP - MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>DIPONIO CONTRACTING</u> Business Address <u>5173 SIMONE IND. - SHELBY TWP - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-10-10</u> Name: <u>JEFF HAWKS</u> Address: <u>9301 CHESTERFIELD SWARTZ CREEK - MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>PRO-EX</u> Business Address <u>4150 FLINT ASPH. DR - BURTON - 48529</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 500.00	\$ 500.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-15-10</u> Name: <u>GARY HERAND</u> Address: <u>P.O. BOX 310289 FLINT - MI - 48531</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>MDI</u> Business Address <u>P.O. BOX 310289 - FLINT - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 500.00	\$ 500.00
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-10-10</u> Name: <u>JAMES PEARBODY</u> Address: <u>13195 FOLEY RD. FENTON - MI - 48430</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>INSURANCE AG.</u> Employer <u>SOUTH PEARBODY - STICEO</u> Business Address <u>1196 TORREY RD - FENTON - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 3,000.00	\$ 3,000.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$ 5,000.00	✓

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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 from committees 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>3-19-10</u> Name: <u>MATTHEW PUMFORD</u> Address: <u>1674 CHAMPAGNE</u> <u>SAC - M - 48604</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>PUMFORD CONST.</u> Business Address <u>1674 CHAMPAGNE - SAC - M.</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 500.00	\$ 500.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-12-10</u> Name: <u>JERRY MYERS</u> Address: <u>2520 4th ST.</u> <u>WINTHROP HARBOR</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>Natgun</u> Business Address <u>505 Riverside, Boston, Mass.</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 500.00	\$ 500.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-23-10</u> Name: <u>DANIEL POTTER</u> Address: <u>4468 MAPLELEAF DR.</u> <u>GRAND BLANC - MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>POTTER CONSULTING</u> Business Address <u>4468 MAPLELEAF - GRAND BLANC - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-23-10</u> Name: <u>WARREN VYVYAN</u> Address: <u>1455 LAURENTIAN PASS</u> <u>FLINT - MI - 48532</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>DEPUTY D.C.</u> Employer <u>GENESEE CT. DR. CDM.</u> Business Address <u>BEECHER RD - FLINT - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$ 3,000.00	✓

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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 from committees 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>2-23-10</u> Name: <u>STEVEN WORDELMAN</u> Address: <u>14321 CROSS CREEK RD. BOWLING GREEN - OH</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>JONES + HENRY ENG.</u> Business Address <u>2000 WEST CENTRAL - TOLEDO OHIO</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>2-26-10</u> Name: <u>THOMAS METCALF</u> Address: <u>2000 W. CENTRAL TOLEDO, OHIO</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>JONES + HENRY ENG.</u> Business Address <u>2000 W CENTRAL - TOLEDO - OHIO</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-1-10</u> Name: <u>JOSEPH HOTZ</u> Address: <u>4436 FLEETWOOD SYLVANNA - OHIO</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>JONES + HENRY ENG.</u> Business Address <u>2000 W. CENTRAL - TOLEDO - OHIO</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>2-9-10</u> Name: <u>BEVERLY D'MALIA</u> Address: <u>5225 BRAVENDER WILLIAMSTON - MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>DWNER</u> Employer <u>D'MALIA CONSTRUCTION</u> Business Address <u>101 E GRAND RIVER - WILLIAMSTON - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 300.00	\$ 300.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$ 3,300.00	✓

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>3-1-10</u> Name: <u>MILLER CANFIELD PAC</u> Address: <u>150 W. JEFFERSON - SUITE 2500</u> <u>DETRIT - MI DAVID HOIN, TREASURER</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>PAC</u> Employer <u>MILLER CANFIELD</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 4,000.00	\$ 4,000.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-11-10</u> Name: <u>GHAFFAN SAAB</u> Address: <u>3047 TORREY RD.</u> <u>FLINT - MI - 49507</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>SORENSEN GROSS</u> Business Address <u>3407 TORREY RD - FLINT - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 500.00	\$ 500.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-11-10</u> Name: <u>RICHARD SKY</u> Address: <u>5210 WARWICK WOODS</u> <u>GRAND BLAND - MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>CONTRACTOR</u> Employer <u>SORENSEN GROSS</u> Business Address <u>3407 TORREY - FLINT</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 500.00	\$ 500.00
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-23-10</u> Name: <u>WINFIELD COPPER</u> Address: <u>P.O. BOX 320500</u> <u>FLINT - MI - 48533</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>COPPER COMMERCIAL</u> Business Address <u>3487 S. LINDEN RD - FLINT - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$ 6,000.00	✓

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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 from committees regardless of amount.	8. 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>4-28-10</u> Name: DANIEL GUDGEL Address: 10130 ST. IVES WAY GRAND BLANC - MI 5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u> Employer <u>Rep. Waste Ser.</u> Business Address <u>8247 Vermeil - Morhous - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,100.00	\$ 1,100.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-7-10</u> Name: DEAN HOLMES Address: 8350 E. RICHFIELD RD DAVISON, MI - 48423 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>HOLMES EXCL</u> Business Address <u>8350 RICHFIELD RD - DAVISON</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 500.00	\$ 500.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4-13-10</u> Name: SUSAN YOUNG Address: 5131 OUFFIELD FLUSHING - MI 5. If over \$100.00 cumulative, please provide: Occupation <u>housewife</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 250.00	\$ 250.00
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-22-10</u> Name: EDWARD THARP Address: 15240 CLAYTON RD. BALWYN - MI 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>CTE</u> Business Address <u>3255 BEECHER RD - FLINT</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00

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

\$ 2,750.00 ✓

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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 from committees 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>3-25-10</u> Name: <u>MICHAEL WINEGARD</u> Address: <u>25108 BIG HORN WHEATON IL.</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>AE COM</u> Business Address <u>CHICAGO IL</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 500.00	\$ 500.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-24-10</u> Name: <u>CUNEY FEIZOULOF</u> Address: <u>4376 BEECHER RD. FLINT, MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>V-Proc</u> Employer <u>AE Cone</u> Business Address <u>4376 Beecher Rd - Chicago / Flint</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 500.00	\$ 500.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-30-10</u> Name: <u>PATRICK CLIFFORD</u> Address: <u>5751 N. KERBS CHICAGO-ILL.</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>AE Cone</u> Business Address <u>4376 Beecher Rd. - Flint</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>2-17-10</u> Name: <u>GEORGE HUBBELL</u> Address: <u>985 HILL HOLLOW MILFORD - MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>HRC</u> Business Address <u>555 HULET DR. - BLOOMFIELD HILLS - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$ 3,000.00	✓

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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 from committees 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>2-17-10</u> Name: <u>MICHAEL WARING</u> Address: <u>4570 FOREST EDGE WEST BLODMFIELD-MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ENG.</u> Employer <u>HRC</u> Business Address <u>555 HULEY - BLODMFIELD HILLS - MI.</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$1,000.00	\$1,000.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>2-10-10</u> Name: <u>THOMAS BIEHL</u> Address: <u>5823 RAVEN RD. BLODMFIELD HILLS - MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ENG.</u> Employer <u>HRC</u> Business Address <u>555 HULEY - BLODMFIELD HILLS</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$1,000.00	\$1,000.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>2-10-10</u> Name: <u>KEITH MCGORMACK</u> Address: <u>3772 SLEEPY FOX ROCHESTER HILLS - MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ENG.</u> Employer <u>HRC</u> Business Address <u>555 HULEY - BLODMFIELD HILLS - MI.</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$1,000.00	\$1,000.00
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-12-10</u> Name: <u>MICHAEL PETERS</u> Address: <u>7170 OLD LANTERN CALDONIA - MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>P.E. PRINCIPAL</u> Employer <u>ETC + H</u> Business Address <u>1515 ARBORETUM DR. - GRAND RAPIDS</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$1,000.00	\$1,000.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$4,000.00	✓

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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 from committees regardless of amount.	8. 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>4-17-10</u> Name: <u>DEAN ROCHELEAV</u> Address: <u>5893 INDEPENDENCE WEST BLDG FIELD-MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ACC'T</u> Employer <u>PLANTE MORAN</u> Business Address <u>27400 NORTHWESTERN - SOUTHFIELD-MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$100.00	\$100.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-19-10</u> Name: <u>JOSEPH HEFFERNAN</u> Address: <u>10475 STONEY PT. SOUTH LYON-MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ACC'T</u> Employer <u>PLANTE MORAN</u> Business Address <u>27400 NORTHWESTERN - SOUTHFIELD-MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$100.00	\$100.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-24-10</u> Name: <u>BETH BIALY</u> Address: <u>14178 KENNETH CARLETON-MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ACC'T</u> Employer <u>PLANTE MORAN</u> Business Address <u>27400 NORTHWESTERN - SOUTHFIELD-MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$100.00	\$100.00
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>2-9-10</u> Name: <u>J. WARREN GREEN</u> Address: <u>1104 LAUREL NAPERVILLE-IL</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>LOCKWOOD-ANDREWS + NEWMAN</u> Business Address <u>ONE OAKBROOK - OAKBROOK TERRACE IL</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$1,000.00	\$1,000.00

Page Subtotal
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(Complete on last page of Schedule)

\$1,300.00 ✓

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520

2. Committee Name JEFF WRIGHT 2000

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 from committees 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>3-26-10</u> Name: <u>SAMIR MATTA</u> Address: <u>810 BIRCHWOOD DEWITT-MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>WILCOX PROF. SER.</u> Business Address <u>3101 W. BRISTOL RD - FLINT - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-36-10</u> Name: <u>KEVIN KILBY</u> Address: <u>14101 TVSCOLA CLYD-MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>MCGRAW-HILL</u> Business Address <u>FLINT - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-25-10</u> Name: <u>MICHAEL D'AGOSTINI</u> Address: <u>5688 MUFFIELD DR. ROCHESTER HILLS - MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OFFICER</u> Employer <u>D4 ENTERPRISES</u> Business Address <u>4510 CADILLAC - DET - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-25-10</u> Name: <u>SCOTT SOLYERSON</u> Address: <u>339 VALLEY VIEW GRAFTON - MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>CTE</u> Business Address <u>4376 BEECHER RD - FLINT - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 500.00	\$ 500.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$ 3,500.00	✓

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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 from committees 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>3-25-10</u> Name: <u>CHRISTOPHER YAMAYA</u> Address: <u>1736 FIELDING GLENVIEW - IL</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ENGINEER</u> Employer <u>CTE</u> Business Address <u>4376 BEECHER RD - FLINT - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$500.00	\$500.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-24-10</u> Name: <u>BRUCE CAMPBELL</u> Address: <u>2318 W. FRANCIS MT MORRIS - MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>CTE</u> Business Address <u>4376 BEECHER RD - FLINT - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$500.00	\$500.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-23-10</u> Name: <u>SHERI WASHBAUGH</u> Address: <u>9909 BROOKS RIVER DIAMONDALE - MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>HOUSEWIFE</u> Employer <u>-</u> Business Address <u>9909 BROOKS RIVER - DIAMONDALE</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$1,000.00	\$1,200.00
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3-25-10</u> Name: <u>MIKE HOLZER</u> Address: <u>9179 E. BRISTOL RD. DAVISON - MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ELECTRICIAN</u> Employer <u>SELF</u> Business Address <u>9179 E. BRISTOL - DAVISON</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$1,000.00	\$1,000.00

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

\$3,000.00 ✓

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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 from committees 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>2-7-10</u> Name: <u>RAFAEL ORTEGA</u> Address: <u>P.O. BOX 90158</u> <u>HOUSTON, TEXAS</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>VICE PRESIDENT</u> Employer <u>LAN</u> Business Address <u>2925 BRIARPARK - HOUSTON TEXAS</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>2-5-10</u> Name: <u>DENNIS PETERSON</u> Address: <u>16522 CORNWALL</u> <u>HOUSTON - TEXAS</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>LAW</u> Business Address <u>2925 BRIARPARK - HOUSTON - TEXAS</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5-12-10</u> Name: <u>CHRISTIAN KINDSVATTER</u> Address: <u>460 DEER FIELD</u> <u>INDIAN RIVER - MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>PRINCIPAL</u> Employer <u>KINDSVATTER - ASSOC</u> Business Address <u>1666 W. ST. JOSEPH - LANSING - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 1,000.00	\$ 1,000.00
3. Contribution #4 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>2-23-10</u> Name: <u>TETRA TECH - LARY MARKSTRUM</u> Address: <u>710 AVIS DR.</u> <u>ANN ARBOR - MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>PAC</u> Employer <u>TETRA TECH</u> Business Address <u>710 AVIS - ANN ARBOR - MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 2,000.00	\$ 2,000.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$ 5,000.00	✓
	\$ 75,650.00	✓

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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>V B'S</u> Address <u>4165 Court St. Burton, MI 48509</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>turboprop for power</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>1/2/10</u>	<u>\$ 1031.84</u>
Expenditure #2 Name <u>Diabetes Resource</u> Address <u>1125 S. Linden Flint - mi</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>sponsor - snowmobile race</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>2/5/10</u>	<u>\$ 250.00</u>
Expenditure #3 Name <u>Gen Co. Habitat for Humanity</u> Address <u>5191 S. Sag. Flint, mi</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>sponsor</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>2/11/10</u>	<u>500.00</u>
Expenditure #4 Name <u>Big Brothers - Big Sisters</u> Address <u>411 E. Third St. Flint, mi</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>FR</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>2/18/10</u>	<u>\$ 250.00</u>
Expenditure #5 Name <u>Friends of Wayne Walling</u> Address <u>806 Kensington Flint - mi</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>ticket</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/9/10</u>	<u>\$ 100.00</u>

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

2131.84 ✓

Enter this total on line 6a of Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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>all safe storage</u> Address <u>1320 N. Balsey</u> <u>Burtz, MI 48509</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>rental</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>1/30/10</u>	\$ <u>56.00</u>
Expenditure #2 Name <u>Bullworks</u> Address <u>5302 Richfield Rd</u> <u>Flint, MI 48506</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>fundrais expense</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/10/10</u>	\$ <u>5,278.64</u>
Expenditure #3 Name <u>Oregon Knives Co.</u> Address <u>3810 10th St</u> <u>Menominee, MI</u> <u>49835</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>business</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/11/10</u>	\$ <u>9,332.56</u>
Expenditure #4 Name <u>Bass Pro Shop</u> Address <u>4500 Baldwin Rd.</u> <u>Auburn Hills, MI</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>door prize</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/20/10</u>	\$ <u>1,409.58</u>
Expenditure #5 Name <u>Friends of Jamie Curtis</u> Address <u>2230 Ridgemoor</u> <u>Burtz, MI 48509</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>FR</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/23/10</u>	\$ <u>700.00</u>
Subtotal this page Grand Total of all Schedules 1B (Complete on last page of Schedule)			<u>16,776.78</u> ✓

Enter this total on line 8a of Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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>Smokin's Castle</u> Address <u>1235 S. Center Rd</u> <u>Burton - mi 48509</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>fundraiser supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/25/10</u>	\$ <u>1,287.00</u>
Expenditure #2 Name <u>Sign Screen</u> Address <u>215 Averill</u> <u>Flint, Mo.</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>lots</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/25/10</u>	\$ <u>1,329.29</u>
Expenditure #3 Name <u>del safe storage</u> Address <u>1320 N. Belsay</u> <u>Burton, mi 48509</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>l-mo-rental</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/13/10</u>	\$ <u>280.00</u>
Expenditure #4 Name <u>Jane Dimichski</u> Address <u>3429 N. Bronson Rd.</u> <u>Burton, mi 48509</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Office Expense</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/15/10</u>	\$ <u>1,000.00</u>
Expenditure #5 Name <u>Fraternal O.P. #126</u> Address <u>P.O. Box 7738</u> <u>Flint, Mi 48507</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Sponsor - PR</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/12/10</u>	\$ <u>125.00</u>
Subtotal this page Grand Total of all Schedules 1B (Complete on last page of Schedule)			<u>4021.35</u>

Enter this total on line 8a of Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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>Re-Elect John Northrup</u> Address <u>2549 Thomas</u> <u>Flint, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>FR ticket</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/15/10</u>	<u>\$ 100.00</u>
Expenditure #2 Name <u>Norton Male Charms</u> Address <u>9121 Dodge Rd.</u> <u>Montrose - MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Sponsor - ad</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/2/10</u>	<u>\$ 500.00</u>
Expenditure #3 Name <u>Com. to Elect Gleason</u> Address <u>5215 N. State Rd.</u> <u>Davison - MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>FR ticket</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/3/10</u>	<u>\$ 100.00</u>
Expenditure #4 Name <u>Dr. Co. Cong. Dinnan</u> Address <u>1318 W. Ct.</u> <u>Flint, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Sponsor</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/5/10</u>	<u>\$ 650.00</u>
Expenditure #5 Name <u>St Francis Progen Center</u> Address <u>2391 E. Francis Carpenter</u> <u>Flint, MI 48506</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>FR ticket</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/23/10</u>	<u>\$ 330.00</u>

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

1680.00 !

Enter this total on line 06 of Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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>Com. to Elect Ted Henry</u> Address <u>Clayton Twp. - Flint</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>FR ticket</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/31/10</u>	<u>\$ 100.00</u>
Expenditure #2 Name <u>Com. to Elect Art Reyes</u> Address <u>5200 Spinning Wheel Grand Blanc, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>FR ticket</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/31/10</u>	<u>\$ 100.00</u>
Expenditure #3 Name <u>Gas Machine</u> Address <u>4303 S. Center Rd. Burton, MI 48529</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Sponsor</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/31/10</u>	<u>\$ 1000.00</u>
Expenditure #4 Name <u>Nantawan Club</u> Address <u>3386 Havens Rd. Dryden, MI</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>fundraiser expense</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/27/10</u>	<u>34,789.34</u>
Expenditure #5 Name <u>Fifth King</u> Address <u>09 W. 57th Ave. Flint, MI 48502</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Sponsor</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/8/10</u>	<u>829.00</u>

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

36818.34 ✓

Enter this total on line 8a of Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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>Special Olympics</u> Address <u>1493 W. Maple</u> <u>Flint, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>FR Sponsor</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/8/10</u>	<u>\$ 1300.00</u>
Expenditure #2 Name <u>Iron Works Local # 35</u> Address <u>3115 Joyce</u> <u>Burton MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Sponsor</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/8/10</u>	<u>\$ 500.00</u>
Expenditure #3 Name <u>Reg. Development Group</u> Address <u>Flint - MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Sponsor</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/22/10</u>	<u>\$ 360.00</u>
Expenditure #4 Name <u>Com. to Elect Snodgrass</u> Address <u>Burton, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>FR ticket</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/1/10</u>	<u>\$ 100.00</u>
Expenditure #5 Name <u>Charles Smiley for St. Rep.</u> Address <u>2253 Mc Lane</u> <u>Burton, MI 48529</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>FR ticket</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/8/10</u>	<u>\$ 100.00</u>

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

2260.00 ✓

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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>All Safe Storage</u> Address <u>1320 N. Belsay</u> <u>Burton, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>6 mo. rentals</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/3/10</u>	\$ <u>336.00</u>
Expenditure #2 Name <u>mcc Labor Museum</u> Address <u>1400 E. Court St.</u> <u>Flint, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Sponsor</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/25/10</u>	\$ <u>5000.00</u>
Expenditure #3 Name <u>D.C. Ag. Soc.</u> Address <u>731 E. Mt. Morris</u> <u>Mt. Morris, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>F.R.</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/29/10</u>	\$ <u>1,000.00</u>
Expenditure #4 Name <u>Buffalo Soldier Flint Chap.</u> <u>P.O. Box 320551</u> Address <u>Flint - MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Sponsor - scholarship</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/11/10</u>	\$ <u>200.00</u>
Expenditure #5 Name <u>Burton Kiwanis</u> Address <u>1270 S. Belsay</u> <u>Burton, MI 48506</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Sponsor</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/5/10</u>	\$ <u>100.00</u>

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

6636.00 ✓

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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>Assem. Greek Church</u> Address <u>3170 Beecher Rd</u> <u>Flint, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>fundraiser</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	9/15/10	\$450.00
Expenditure #2 Name <u>OCAMH</u> Address <u>204 W. 6th Ave.</u> <u>Flint, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Help sponsor</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	9/17/10	\$300.00
Expenditure #3 Name <u>Mid America Sports</u> Address <u>4282 Jimmy Carter</u> <u>Flint, MI 48506</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Bowling sponsor</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	9/24/10	\$265.00
Expenditure #4 Name <u>My Heart Goes Out to the Troops</u> <u>Flint Veteran Assn.</u> Address <u>1101 Beech St</u> <u>Flint, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>tickets</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	9/27/10	\$100.00
Expenditure #5 Name <u>Rainforest</u> Address <u>310 S. Arevill</u> <u>Flint, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>food for workers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	9/27/10	\$200.00
Subtotal this page Grand Total of all Schedules 1B (Complete on last page of Schedule)			1315.00 ✓

Enter this total on line 8a of Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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>Com. to Elect Oran Sims</u> Address <u>Flint, mi.</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>FR ticket</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/29/10</u>	\$ <u>100.00</u>
Expenditure #2 Name <u>Rich Hammel PAC</u> Address <u>P.O. Box 12073</u> <u>Jansing, MI 48901</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>sponsor</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/6/10</u>	\$ <u>1,000.00</u>
Expenditure #3 Name <u>Sawicki</u> Address <u>1521 West Lafayette</u> <u>Detroit, mi 48216</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>sign</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/2/10</u>	\$ <u>600.00</u>
Expenditure #4 Name <u>Gen. Ag. Soc.</u> <u>731 E. Mount Morris</u> Address <u>Mt. Morris, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>FR ticket</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/10/10</u>	\$ <u>50.00</u>
Expenditure #5 Name <u>Bernero for Michigan</u> Address <u>Jansing, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>pol. donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/8/10</u>	\$ <u>100.00</u>
Subtotal this page Grand Total of all Schedules 1B (Complete on last page of Schedule)			<u>1850.00</u> ✓

Enter this total on line 6a of Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 33520
2. Committee Name JEFF WRIGHT 2000

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>Leyton for attorney Gen.</u> Address <u>Flint, Mi.</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>pol. contributions</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/10/10</u>	\$ <u>100.00</u>
Expenditure #2 Name <u>NAACP</u> Address <u>3455 Lippinott</u> <u>Flint - mi.</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>membership</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/1/10</u>	\$ <u>900.00</u>
Expenditure #3 Name <u>W. Stanley Leadership Fund</u> Address <u>P.O. Box 441</u> <u>Flint, Mi 48501</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>sponsor</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/1/10</u>	\$ <u>500.00</u>
Expenditure #4 Name <u>J. M. A.</u> Address <u>6045 Davison Rd.</u> <u>Burton, mi 48509</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>sponsor</u> <u>thank you dinner</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/3/10</u>	\$ <u>2300.00</u>
Expenditure #5 Name <u>Brenda Clark Com. Fund Raiser</u> Address <u>3120 Hellen St.</u> <u>Flint, mi 48504</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Blankets for poor</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/8/10</u>	\$ <u>500.00</u>
Subtotal this page Grand Total of all Schedules 1B (Complete on last page of Schedule)			<u>4300.00</u> ✓

Enter this total on line 8a of Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number _____
2. Committee Name _____

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 <i>Davison Bacon + Sausage</i> Address <i>9090 Lapeer Rd. Davison, MI</i> <input type="checkbox"/> Fund Raiser	Purpose: <i>hans for pan</i> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<i>12/16/10</i>	<i>770.86</i>
Expenditure #2 Name <i>V B's</i> Address <i>4165 Court St. Burton, MI</i> <input type="checkbox"/> Fund Raiser	Purpose: <i>turkey for church</i> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<i>12/16/10</i>	<i>1,529.98</i>
Expenditure #3 Name <i>Christ Enrichment Center</i> Address <i>322 E. Hamletta Flint, MI 48503</i> <input type="checkbox"/> Fund Raiser	Purpose: <i>fundraising</i> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<i>12/16/10</i>	<i>\$ 250.00</i>
Expenditure #4 Name <i>City of Burton Christmas @ Courtland</i> Address <i>4303 S. Center Rd. Burton, MI 48519</i> <input type="checkbox"/> Fund Raiser	Purpose: <i>sponsor</i> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<i>12/16/10</i>	<i>\$ 200.00</i>
Expenditure #5 Name <i>COGIC</i> Address <i>4317 Lippinott Burton, MI 48519</i> <input type="checkbox"/> Fund Raiser	Purpose: <i>fund raising</i> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<i>12/17/10</i>	<i>\$ 200.00</i>

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

2956.85 ✓
80,140.16 ✓

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520
2. Committee Name JEFF WRIGHT 2000

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>3</u> / <u>26</u> / <u>70</u> Month Day Year	4. Number of Individuals Attending or Participating (whichever is greater) <u>115</u>	5. Type of Fund Raising Activity <u>SHOOT</u>	6. Address and Name (if any) of the place where the activity was held <u>HUNTSMAN CLUB</u> <u>3116 HAVENS RD</u> <input type="checkbox"/> Private Residence - <u>DRYDEN, MI</u>
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7. Total Contributions \$ 75,650.00

8. Other Receipts 0

9. Gross Receipts (Add lines 7 and 8) 75,650.00

10. Total Cost of Event 53,426.47
 (Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

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INSTRUCTIONS FOR SCHEDULE 1F, FUND RAISER