

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

· (48.)

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: #0 - 19 - 08 to // - 24 - 05 MO Day Year MO Day Year
1. Committee I.D. Number 33520 2. Committee Name Jeff Wright 2000	4. Candidate Las	
5. Committee's Mailing Address 3174 Syramore Button, mi 48509 Area Code and Phone 810-742-0546 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 filling official. 7. Treasurer's Business Address 3429 M. Jenesa Pd. Button, mi 48509	Area Code & Phon	ord keeper's Name and Mailing Address If the committee It as a
Burton, Mr. 48309 Area Code and Phone (810) 743-3983	Area Code and Ph	one ()
9. TYPE OF STATEMENT		9c. Annual Statement (Coverage Year)
9a. ☐ Pre-Election OR 9b. ☒ Post Pre-Election or Post-Election Statement relates to:	-Election	9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)
☐ Primary ☐ Gene	eral	9e. Dissolution of Candidate Committee
☐ Convention ☐ Scho	ool	Effective Date of Dissolution
☐ Special ☐ Cauc Date of Election, Convention or Caucus // D4 D8 Month Day Year	cus	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 a Schedules. Direct contributions, in-kind contributions, loans, et if any of the information listed in items 2, 4, 5, 6, 7, or 8 has chamendment to the Statement of Organization should accompain before the filing deadline of a required campaign statement.	Il required Campaigr xpenditures, and out anged since the info ny this Campaign Sta t, that campaign st	s Statements. The Campaign Statements must include all applicable standing debts count against the \$1,000 Reporting Waiver threshold. mation was shown on the committee's Statement of Organization, an attement. If a request for a Reporting Waiver is not received on or atement cannot be waived.
	<i>L</i>	n of this statement and attached schedules (if any) and to the best of
Current Treasurer or Designated Record keeper TANE NIMCHESK Type or Print Name	/ Again	11
Candidate <u>JEFF WRIGHT</u> Type or Print Name	/ Sanauu	Date 12 4 OF Mo Day Year
Authority granted under P.A. 388 of 1976	e	



MICHIGAN DEPARTMENT OF STATE Bureau of Elections

1. Committee I.D. Number 33530

2. Committee Name

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.) \$	
b. Uniternized (less than \$20.01 each - no Schedule)	(3b.) \$	
c. Subtotal of "Contributions"	(3c.) \$	(18.)\$ <u>358,750.01</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$
7. In-Kind Expenditures (Schedule 18-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures a. Itemized (Schedule 1B, Column 6) b. Itemized Get-Out-the-Vote (Schedule B-G) c. Unitemized (less than \$50.01 each - no Schedule)	(8a.) \$ <u>2830.84</u> (8b.) \$	22. 6. 4. 2.
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>2830.84</u> \square	(23.)\$ <u>330. 034,33</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements	(10a.) \$	
a, Itemized (Schedule 1C, Column 6)	· · · · · · · · · · · · · · · · · · ·	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	(24.) \$
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	(29.) \$
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.)\$ 14, 100, 00	
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.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(13.)\$ 63.204.76 / (14.)+ 0 /	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15)	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	

NOTE: Direct contributions, in-kind contributions, loans, expenditures and outstanding debts count against the \$1,000.00 Reporting Waiver threshold.

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MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Nu	33520	
2. Committee Name		7 2000

CANDIDATE COMMITTEE		- 224	
Name and address of person or vendor to whom paid	Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1			
Name Tracey Stephens agency	Purpose: Ad	11/01	\$ 2274.84
Address 3053 S. Center Rd.		1%	2274,84
Buton, mi 48519	Check box if this expenditure is payment of data or obligation reported on pravious statement		
Expenditure #2			
Name all sofe storage	Purpose: storage rental	10%	\$56.00
Address 1320 M. Belsay RJ. Burton Mi 48509		12/	56.00
Burton Mi 48509	Check box if this expenditure is payment of debt or obligation reported on previous statement.	168	
- Ma Ha			
Name 5 th Congressional District Address 1318 W. Court	Purpose: ford for election workers	10/	9500.00
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	15/ 08	
Expenditure #4			
Name	Purpose:		
Address	Chack box if this expenditure is payment of		
Fund Reiser	debt or obligation reported on previous statement		
Expenditure #5			
Spainting #3			
Name	Ригрове:		
Address			
Fund Relser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subtotal thi	s page	2830.84

Grand Total of all Schedules 18 (Complete on lest page of Schedule) 2830.84

Enter this total on line \$a of Summary Page

Page ____ of ____

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MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS

SCHEDULE 1E

1. Committée I.D. Number

Oeld Wright 2000 2. Committee Name

CANDIDATE COMMITTEE This Schedule Remizee:		0	····	
 Titlebits and obligations owed by or forgiven the analysis. 	committee OR b, I'D ack alther a or b, Use only for the p	obts and obligations owed to	or forgiven <u>by</u> the o	committee.
3. Name and Mailing Address of person, vendor or				
Intencial institution to whom debt is owed.	Type of Obligation (Indicate type and you may assign an expenditure code)	7. Date and amount of each payment	6. Cumulative payment to	9. Outstanding Balance at close
Check box to Indicate whether debt is owed to an noorporated businese. If debt is a bank loan, please	5. Indicate data data was		date on debt	of this period (Item 6 minus
provide information regarding the endorsers of	Incurred 6. Indicate original amount	<u>;</u>		item 8)
Juarantors, if any.	of debt	7		
Debt #1 Corp? Yes Owed to or by:	4. Type: 20 A N	8 261085 50 10.00		
JEFF WRIGHT	3. 1700.		i	ļ
	5. Date Debt Was Incarred:	9 128103 450000		
2174 SYCAMORE	2-33-60/8-3-00 6. Original Amount of Debt	// \$		
RURTON, MI. 48509	8. Original Amount of Debt.		\$ 94,000,00	\$ 14,100.00
	\$ 108.100.00			FORGIVEN
		//s		FORGIVER
bank loan, name of endorser or guarantor;	1	Amo	runt Endorsed: \$	
ebt #2 Corp? Yes	4. Type:			<u></u>
Ched to Gr by.	-, 139C:	- 		
	5. Date Debt Was Incurved:		1	
		,,,		
	6. Original Amount of Debt:		s	
•	\$		İ	
		115	<u></u> .	FORGIVEN
bank loan, name of endorser or quarentor.		Arms	unt Endorsed: \$	
ebt #3 Corp? Yes	4.7		T	
owen to drug.	4. Type:		1	
	f Then Date Was rain	_/_/ \$		·
	5. Date Deht Was Incorred:	· , , •	1	
	6. Original Amount of Debt:			
	\$			-
		,, ,		FORGIVEN
park loan, name of endorser or guarantor:	,	Amo	ust Fortenant &	
		Page Subtotal (Outstan	ding dubt) is	
				14,100.00
(Complete	te on last page of Schedule showin	Grand Total of all Sch amounts owed by or to the	odules 1E 5	4 100.00
				Enter this total
				on line 12a 'owed by''' or
ight or obligation must be shown on this Schedul B Compaign Statement or it was foreign during the	o II thare was an extension as	tourne council per là ce the cite		ine 12b 'owed
Gampeign Statement or it was forgiven during the	to period covered by this Campa	iourii ywey yn 11 si the 0109 Man Statement.	ing 9814 01	to" of the Summary Pege