

(31)
NCL

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: <u>11 - 27 - 12</u> to <u>12 - 31 - 2013</u> <small>Mo Day Year Mo Day Year</small>	
1. Committee I.D. Number <u>33520</u>	4. Candidate Last Name <u>Wright</u> First Name <u>Jeff</u> M.I. _____
2. Committee Name <u>Jeff Wright 2000</u>	4a. Office Sought Including District # or Community Served (If applicable) <u>Genesee County Drain Commissioner</u>
5. Committee's Mailing Address <u>2174 SYCAMORE ST</u> <u>BURTOW, MI 48509</u> Area Code and Phone <u>810 742-0246</u> <small>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.</small>	4b. County of Residence <u>Genesee</u>
7. Treasurer's Business Address <u>SAME AS #6</u>	6. Treasurer's Name & Residential Address <u>WARREN VYVYAN</u> <u>1455 LAURENTIUM PASS</u> <u>FLINT, MI 48532</u> Area Code & Phone <u>(810) 732 3593</u>
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. <input type="checkbox"/> Pre-Election OR <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> School <input type="checkbox"/> Special <input type="checkbox"/> Caucus Date of Election, Convention or Caucus _____ <small>Month Day Year</small>	9c. <input checked="" type="checkbox"/> Annual Statement (<u>2013</u> Coverage Year) 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete item 9a, 9b, 9c or 9e to indicate which Statement is being amended) 9e. <input type="checkbox"/> Dissolution of Candidate Committee Effective Date of Dissolution _____ <small>Month Day Year</small> 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 <u>WARREN VYVYAN</u> Signature <u>[Signature]</u> Date <u>1-28-2014</u> <small>Type or Print Name Signature Mo Day Year</small> Candidate <u>Jeff Wright</u> Signature <u>[Signature]</u> Date <u>1-28-2014</u> <small>Type or Print Name Signature Mo Day Year</small>
Authority granted under P.A. 388 of 1976	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**SUMMARY PAGE
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520

2. Committee Name Jeff Wright 2000

	Column I This Period	Column II Cumulative this election cycle
RECEIPTS		
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>84,125 -</u> ✓	(18.) \$ _____
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	(19.) \$ _____
c. Subtotal of "Contributions"	(3c.) \$ <u>84,125 -</u> ✓	(20.) \$ <u>85,960.25</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>1,835.25</u> ✓	
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>85,960.25</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>67,394.08</u> ✓	(23.) \$ <u>67,394.08</u>
b. Itemized Get-Out-the-Vote (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>67,394.08</u> ✓	
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ _____	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ _____	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ _____	(24.) \$ _____
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ _____	
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>1,120.46</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>85,960.25</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>87,080.71</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>67,394.08</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>19,686.63</u> ✓	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

33520
Jeff Wright 2000

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

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.

3. Contribution #	PAC Receipt?	YES	4. Date of Receipt	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name: <u>Kevin Kilby</u> Address: <u>14101 Tuscola Rd Clio, MI</u> 5. If over \$100.00 cumulative, please provide: Occupation: <u>ATTORNEY</u> Employer: <u>M'Graw-Morris PC</u> Business Address: <u>2075 W. Big Beaver Rd Troy, MI 48084</u> Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			<u>5-10-13</u>	<u>\$1,000-</u>	<u>\$1,000-</u>
Name: <u>WM Elena Brown</u> Address: <u>5565 N. Zimera Rd Williamston, MI 48895</u> 5. If over \$100.00 cumulative, please provide: Occupation: <u>Consulting Eng.</u> Employer: <u>O'Malia Consulting</u> Business Address: <u>2275 Beaverda Rd Williamston, MI 48895</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				<u>75-</u>	<u>75-</u>
Name: <u>Beverly O'Malia</u> Address: <u>2275 Beaverda Rd Williamston, MI 48895</u> 5. If over \$100.00 cumulative, please provide: Occupation: <u>owner/spouse</u> Employer: <u>O'Malia Consulting</u> Business Address: <u>see above</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			<u>5-13-13</u>	<u>100-</u>	<u>100-</u>
Name: <u>THOMAS YAROCK</u> Address: <u>3503 Van Dyke, Marlette, MI 48453</u> 5. If over \$100.00 cumulative, please provide: Occupation: <u>OWNER</u> Employer: <u>Maxlow Eng & Surveying</u> Business Address: <u>SAME</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			<u>2-10-13</u>	<u>500-</u>	<u>500-</u>
				<u>1,675-</u>	<u>✓</u>

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

33520
Jeff Wright 2000

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

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)
500-	500-
2000-	2,000-
1,000-	1,000-
4,000-	4,000-
7,500-	

3. Contribution #1 PAC Receipt? YES NO 4. Date of Receipt 4-15-13
 Name: Dominic Goyette
 Address: 689 Plantation, Grand Blanc, MI 48439
 5. If over \$100.00 cumulative, please provide:
 Occupation owner Employer Goyette Mechanical
 Business Address 3040 Gurey Ave Flint MI 48506
 Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES NO 4. Date of Receipt 3-22-13
 Name: David Tersigani
 Address: 8908 Swaffea Rd Vassar, MI 48768
 5. If over \$100.00 cumulative, please provide:
 Occupation Sales Rep. Employer Mensco DeWaters Inc
 Business Address 10162 E. Coldwater Rd Davison, MI 48403
 Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #3 PAC Receipt? YES NO 4. Date of Receipt 3-26-13
 Name: Anthony Bouchard
 Address: 2230 Thornwood Ave. Wilmette, IL 60091
 5. If over \$100.00 cumulative, please provide:
 Occupation Engineer Employer AECOM
 Business Address 303 E. Wacker Dr, Suite 1400 Chicago, IL 60601
 Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #4 PAC Receipt? YES NO 4. Date of Receipt 3-22-13
 Name: M. Hen Canfield PAC
 Address: 150 W. Jefferson, Suite 2500, Detroit, MI 48226
 5. If over \$100.00 cumulative, please provide:
 Occupation Board Counsel Employer Same
 Business Address Same
 Type of Contribution: Direct Loan from a person Fund Raiser

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

33520
Jeff Wright 2000

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

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.

3. Contribution #	PAC Receipt?	YES	4. Date of Receipt	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name: <u>John Matonich</u> Address: <u>540 S. Sag. St Flint, MI 48502</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>owner</u> Employer <u>Rowe Eng.</u> Business Address <u>SAME</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			<u>3-22-13</u>	<u>2500-</u>	<u>2,500-</u>
Name: <u>Richard Mark</u> Address: <u>PO Box 3748 Flint, MI 48502</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>Rowe Eng.</u> Business Address <u>see above</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			<u>3-22-13</u>	<u>2000-</u>	<u>2000-</u>
Name: <u>Kevin Cook</u> Address: <u>5359 Tenarivain Rd, Grand Blanc, MI 48431</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>owner/partner</u> Employer <u>CHMP</u> Business Address <u>SAME</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			<u>3-22-13</u>	<u>1,000-</u>	<u>1000-</u>
Name: <u>SAMIR MATTA</u> Address: <u>510 Birchwood Dewitt, MI 48820</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>self-employed</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			<u>3-22-13</u>	<u>500-</u>	<u>500-</u>
				<u>6000-</u>	<u>✓</u>

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

33520
Jeff Wright 2000

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3. Contribution # 1 Name: <u>JAN HANSEN</u> Address: <u>589 John R M. Road, MI 48381</u> Occupation: <u>Engineer</u> Employer: <u>URS Corp.</u> Business Address: <u>29977 Franklin Rd Suite 2000 Southfield, MI</u> Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser <u>48084</u> 5. If over \$100.00 cumulative, please provide:	500-	500-
3. Contribution #2 Name: <u>Michael Deneen</u> Address: <u>12174 Pine Row Ln. Grand Blanc, MI 48439</u> Occupation: <u>Sales Rep.</u> Employer: <u>MI Pipe & Valve</u> Business Address: <u>Same as above</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	2,000-	2,000-
3. Contribution # 3 Name: <u>Kyle Paalman</u> Address: <u>13106 100th St SE, Alto, NJ 49302</u> Occupation: <u>Technician</u> Employer: <u>Nu Wave</u> Business Address: <u>5266 Aero Ct. Kalamazoo, MI 49048</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	1,000-	1,000-
3. Contribution # 4 Name: <u>Daryl Little</u> Address: <u>10081 E. Mt. Morris Rd, Annison, MI 48423</u> Occupation: <u>Mechanic</u> Employer: <u>Waldorf</u> Business Address: <u>9118 N. Doat Hwy. Mt. Morris, MI 48458</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	2,000-	2,000-
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	5,500-	/

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

33520
Jeff Wright 2000

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

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 <input type="checkbox"/> NO	4. Date of Receipt	3-21-13	1,000-	1,000-
Name: <u>Thomas Washabough</u>					
Address: <u>233 Athlone Beach, Baycity, MI 48706</u>					
5. If over \$100.00 cumulative, please provide:					
Occupation <u>owner/sales rep</u> Employer					
Business Address <u>401 Keltun St Baycity, MI 48706</u>					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt	3-7-13	500-	500-
Name: <u>GARY MARKSTEIN</u>					
Address: <u>2497 Clyde Rd, Howell, MI 48855</u>					
5. If over \$100.00 cumulative, please provide:					
Occupation <u>Engineer</u> Employer <u>Tetra-Tech</u>					
Business Address <u>103 Brighton Lake Ra. Sate 303 Brighton, MI</u>					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser <u>48116</u>					
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt	3-22-13	1,000-	1,000-
Name: <u>THOMAS McERAW</u>					
Address: <u>7275 Parkhurst Bloomfield Hills, MI 48301</u>					
5. If over \$100.00 cumulative, please provide:					
Occupation <u>owner</u> Employer <u>McGraw-Hill P.C.</u>					
Business Address <u>2075 W. Big Beaver Rd. Troy, MI 48064</u>					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt	3-22-14	1,000-	1,000-
Name: <u>Michael D'Agostini</u>					
Address: <u>17565 August Dr. Macomb, MI 48043</u>					
5. If over \$100.00 cumulative, please provide:					
Occupation <u>Partner</u> Employer <u>D'Agostini</u>					
Business Address <u>15801 23 Mile Rd Macomb, MI 48042</u>					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
				3,500-	✓

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

33520
Jeff Wright 2000

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

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.

3. Contribution #	PAC Receipt?	YES	4. Date of Receipt	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>Name: <u>John Lawson</u></p> <p>Address: <u>216 crest Rd Glen Ellyn, IL 60137</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>AECOM</u></p> <p>Business Address <u>303 E Wacker Dr. Suite 400 Chicago IL 60601</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>					
3. Contribution #2	PAC Receipt?	<input type="checkbox"/> YES	4. Date of Receipt <u>3-6-13</u>	1000-	1,000-
<p>Name: <u>TIM MCKIM</u></p> <p>Address: <u>500 E Webb Dewitt, MI 48820</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Sales Rep.</u> Employer <u>ETNA</u></p> <p>Business Address <u>PO Box 897 Grand Rapids, MI 49548</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>					
3. Contribution #3	PAC Receipt?	<input type="checkbox"/> YES	4. Date of Receipt <u>3-22-13</u>	1000-	1,000-
<p>Name: <u>Michael Winegard</u></p> <p>Address: <u>2508 Big Horn, Wheaton, IL 60187</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>AECOM</u></p> <p>Business Address <u>see above</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>					
3. Contribution #4	PAC Receipt?	<input type="checkbox"/> YES	4. Date of Receipt <u>3-14-13</u>	1000-	1,000-
<p>Name: <u>Luis D'Agostini</u></p> <p>Address: <u>2281 Pond Volleeda, Oakland, MI 48363</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Partner</u> Employer <u>D'Agostini</u></p> <p>Business Address <u>15801 23 mile Rd Macomb, MI 48048</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>					
				4,000-	✓

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

33520
Jeff Wright 2000

1. Committee I.D. Number
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3. Contribution #1 Name: <u>Brian Busch</u> Address: <u>50762 Scaden Rd, Chestnutfield, MI 48047</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Mat. Rep.</u> Employer Business Address <u>PO Box 897 Grand Rapids MI 49548</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>3-17-13</u>	1000-	1,000-
3. Contribution #2 Name: <u>Anthony D'Agostini</u> Address: <u>41684 utica Rd. Staling Hgts, MI 48313</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Partner</u> Employer <u>D'Agostini</u> Business Address <u>15801 23 mile Rd. Macomb, MI 48040</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>3-21-13</u>	1000-	1,000-
3. Contribution #3 Name: <u>Antonio D'Agostini</u> Address: <u>11200 Walnut Ln, Staling Hgts, MI 48313</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Partner</u> Employer <u>D'Agostini</u> Business Address <u>See above</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>3-23-13</u>	1000-	1,000-
3. Contribution #4 Name: <u>J. Michael O'Brien</u> Address: <u>1305 Fairway View Ln, Hoover, AL 35044</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Sales Rep.</u> Employer <u>American Ductile Pipe</u> Business Address <u>PO Box 2927 Birmingham, AL 35208</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>3-12-13</u>	2000-	2,000-
Page Subtotal		5,000-	
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3. Contribution #	PAC Receipt?	YES	4. Date of Receipt	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name: <u>Orniel Potter</u> Address: <u>4468 Maple Leaf Dr. Grand Blanc, MI 48439</u> 5. If over \$100.00 cumulative, please provide: Occupation: <u>owner</u> Employer: <u>Potter Consulting</u> Business Address: _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			<u>3-22-13</u>	<u>1,000-</u>	<u>1,000-</u>
Name: <u>Caryn Feizola</u> Address: <u>2304 Ash Ln, Northbrook, IL 60062</u> 5. If over \$100.00 cumulative, please provide: Occupation: <u>Engineer</u> Employer: <u>AECUM</u> Business Address: <u>303 E. Wacker Drive Suite 1400 Chicago, IL</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			<u>3-22-13</u>	<u>500-</u>	<u>500-</u>
Name: <u>David Tersigni</u> Address: <u>16165 Rathburn Rd Birch Run, MI 48415</u> 5. If over \$100.00 cumulative, please provide: Occupation: <u>Sales Rep.</u> Employer: <u>Mersino Dewatering</u> Business Address: <u>10162 E. Coldwater Rd. Davison, MI 48403</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			<u>3-21-13</u>	<u>1,000-</u>	<u>3,000-</u> <u>(see p. 2)</u>
Name: <u>T N Burns</u> Address: <u>1662 Wingfield Dr, Birmingham, AL 35242</u> 5. If over \$100.00 cumulative, please provide: Occupation: <u>Sales Rep.</u> Employer: <u>American Ductile Pipe</u> Business Address: <u>PO Box 2707 Birmingham, AL 35202</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			<u>3-12-13</u>	<u>2,000-</u>	<u>2,000-</u>
Page Subtotal				<u>4,500-</u>	<u>✓</u>
Grand Total of All Schedules 1A					
(Complete on last page of Schedule)					

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

33520
Jeff Wright 2000

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

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.

3. Contribution #	PAC Receipt?	YES	4. Date of Receipt	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name: <u>GARY MAEKSTROM</u> Address: <u>2497 Clyde Rd Howell, MI 48855</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>Tetra Tech</u> Business Address <u>103 Brighton Lake Rd Suite 203 Brighton, MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser <u>48116</u>			<u>3-21-13</u>	<u>200-</u>	<u>700-</u> <u>(see pg. 5)</u>
Name: <u>Peter Danks</u> Address: <u>7275 Kompa De Belmont, MI 48306</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>Tetra Tech</u> Business Address <u>103 Brighton Lake Rd Suite 203 Brighton, MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser <u>48116</u>			<u>3-21-13</u>	<u>100-</u>	<u>100-</u>
Name: <u>Ronald Simons</u> Address: <u>45714 Morningside Dr, Canton, MI 48187</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>URS Corp</u> Business Address <u>27777 Franklin Rd Suite 200 Southfield, MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser <u>48334</u>			<u>3-22-13</u>	<u>250-</u>	<u>250-</u>
Name: <u>Terry Woodman</u> Address: <u>3396 Meaine Dr. Brighton, MI 48114</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>URS Corp</u> Business Address <u>see above</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			<u>3-19-13</u>	<u>250-</u>	<u>250-</u>
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)				<u>800-</u>	<u>✓</u>

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

33520
Jeff Wright 2000

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

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.

3. Contribution #	PAC Receipt?	YES	4. Date of Receipt	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name: <u>PATRICK C. HEND</u> Address: <u>6847 N. CHICAGO AVE, CHICAGO IL 60646</u> Occupation: <u>ENGINEER</u> Employer: <u>AECOM</u> Business Address: <u>303 E. WACKER DRIVE SUITE 1400 CHICAGO IL 60601</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			<u>3-22-13</u>	<u>500-</u>	<u>500-</u>
Name: <u>JOSEPH BOENGER</u> Address: <u>9084 WEBSKA RD.</u> Occupation: <u>MANAGEMENT</u> Employer: <u>WWS</u> Business Address: <u>4610 BEECHER RD FINT, MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			<u>3-22-13</u>	<u>300-</u>	<u>300-</u>
Name: <u>PROFESSIONAL SERVICE IND. INC (PSI)</u> Address: <u>2350 KAREN BLVD SUITE 250 SINGAPORE, CA 94901</u> Occupation: <u>SOILS TESTING</u> Employer: <u>SMC (PSI)</u> Business Address: <u>SMC</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			<u>3-6-13</u>	<u>450-</u>	<u>450-</u>
Name: <u>STEPHEN PENNINGTON</u> Address: <u>2101 ASHLAND AVE, OLIVES, MI 48864</u> Occupation: _____ Employer: _____ Business Address: _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			<u>3-19-13</u>	<u>100-</u>	<u>100-</u>
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)				<u>1350-</u>	<u>✓</u>

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

33520
Jeff Wright 2000

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

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.

3. Contribution #1 PAC Receipt? YES NO 4. Date of Receipt 3-8-13
Name: Daniel Christian
Address: 2736 Still Valley Dr. E. Lansing, MI 48923

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES NO 4. Date of Receipt 2-13-13
Name: Thomas Biehl
Address: 5822 Raven Rd Bloomfield Hills, MI 48301

5. If over \$100.00 cumulative, please provide:

Occupation Engineer Employer HRC
Business Address 555 Hulet Dr. PO Box 824 Bloomfield Hills, MI 48304
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #3 PAC Receipt? YES NO 4. Date of Receipt 2-25-13
Name: George Hubbell
Address: 985 Hill Hollow Ln. Mt. Pleasant, MI 48381

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer HRC
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #4 PAC Receipt? YES NO 4. Date of Receipt 2-20-13
Name: Keith McCormack
Address: 3770 Sleepy Fox Rochester Hills, MI 48309

5. If over \$100.00 cumulative, please provide:

Occupation engineer Employer HRC
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
100-	100-
1000-	1000-
1000-	1000-
1000-	1000-
1000-	1000-

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

3100-

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

33520
Jeff Wright 2000

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

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3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt			
Name: <u>Peter T. Roth</u>		<u>2-25-13</u>			
Address: <u>6370 Settlers Tal, Howell, MI 48855</u>					
5. If over \$100.00 cumulative, please provide:					
Occupation: <u>engineer/Partner</u>	Employer: <u>HRC</u>				
Business Address: <u>555 Hulet Dr PO Box 804 Bloomfield Hills, MI</u>					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<u>48300</u>			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt			
Name: <u>Barry Wolf</u>		<u>2-19-13</u>			
Address: <u>814 Kensington Flint, MI</u>					
5. If over \$100.00 cumulative, please provide:					
Occupation: <u>owner/Attorney</u>	Employer: <u>Self Employed</u>				
Business Address: <u>Same</u>					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt			
Name: <u>Patricia Penbody</u>		<u>2-20-13</u>			
Address: <u>12195 Foley Rd Fenton, MI 48430</u>					
5. If over \$100.00 cumulative, please provide:					
Occupation: <u>Spouse/owner</u>	Employer: <u>Penbody Insur. Agency</u>				
Business Address: <u>265 N Alloy suite 100 Fenton, MI 48430</u>					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt			
Name: <u>Linda Lucas</u>		<u>2-22-13</u>			
Address: <u>13096 MacIntosh Dr Fenton, MI 48430</u>					
5. If over \$100.00 cumulative, please provide:					
Occupation: <u>Spouse/owner</u>	Employer: <u>Brown & Brown</u>				
Business Address: <u>1190 Turrey Rd. Fenton, MI 48430</u>					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
Page Subtotal					
Grand Total of All Schedules 1A				<u>4,000-</u>	<input checked="" type="checkbox"/>
(Complete on last page of Schedule)					

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

33520
Jeff Wright 2000

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

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 <input type="checkbox"/> NO	4. Date of Receipt	2-18-13	1,000-	1,000-
Name: John Thompson					
Address: 4970 Conc 4 RR #2 Haarow, On Canada					
5. If over \$100.00 cumulative, please provide:					
Occupation: Mgt. Rep.	Employer: LiquidForce Services				
Business Address: 28529 Goddard Rd. Ste 106 Romulus, MI 48174					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt	2-8-13	1,000-	1,000-
Name: John Mac Donald					
Address: 18964 Van Rd. Livonia, MI					
5. If over \$100.00 cumulative, please provide:					
Occupation: Mgt. Rep.	Employer: Martin Contact Services				
Business Address: 23705 Freeway Park Dr Farmington Hills, MI					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt	2-12-13	1,000-	1,000-
Name: David Snyder					
Address: 10686 Bob White Beach Blvd. Whitnace Lake, MI 48185					
5. If over \$100.00 cumulative, please provide:					
Occupation: Sales Rep.	Employer: Jack Doherty Supplier				
Business Address: PO Box 609 Northville, MI 48167					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt	2-9-13	2,000-	2,000-
Name: Angela Schaefer					
Address: 5470 4 mile Rd, Bwy City MI 48106					
5. If over \$100.00 cumulative, please provide:					
Occupation: Engineer	Employer: Spica Group				
Business Address: 230 S. Washington Ave, Sargonia, MI 48609					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)				5,000-	✓



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

33520
Jeff Wright 2000

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

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 <input type="checkbox"/> NO	4. Date of Receipt			
Name: <u>Dominic Goyette</u>		<u>3-5-13</u>			
Address: <u>6089 Plantation Grand Blanc MI 48439</u>				<u>1,500-</u>	<u>2,000-</u>
5. If over \$100.00 cumulative, please provide:					<u>(see pg. 2)</u>
Occupation: <u>owner</u>	Employer:				
Business Address: <u>3240 Garey Ave Flint MI 48506</u>					
Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt			
Name: <u>Lawrence Fleis</u>		<u>2-28-13</u>			
Address: <u>9550 Conservation St NE Ada, MI 49301</u>				<u>2,000-</u>	<u>2,000-</u>
5. If over \$100.00 cumulative, please provide:					
Occupation: <u>owner</u>	Employer:				
Business Address: <u>2040 E Maple Ave Flint, MI 48507</u>					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #3	PAC Receipt? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt			
Name: <u>LAW - PAC</u>		<u>2-14-2013</u>			
Address: <u>see below</u>				<u>4,000-</u>	<u>4,000-</u>
5. If over \$100.00 cumulative, please provide:					
Occupation: <u>Eng. Firm</u>	Employer:				
Business Address: <u>2925 Briar Park Dr. Fowlers Floor Houston, TX</u>					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt			
Name: <u>Michael Coenen</u>		<u>3-14-13</u>			
Address: <u>710 N. Chipman St Uxosso, MI 48867</u>				<u>200-</u>	<u>200-</u>
5. If over \$100.00 cumulative, please provide:					
Occupation: <u>owner</u>	Employer:				
Business Address: <u>2680 E. Lansing Rd. E. Lansing MI</u>					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
Page Subtotal				<u>7,700-</u>	<u>7,700-</u>
Grand Total of All Schedules 1A					
(Complete on last page of Schedule)					

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

33520
Jeff Wright 2000

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

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		2000-	2,000-
Name: <u>DEANNA LIVINGSTON</u>		<u>3-15-13</u>			
Address: <u>39753 Marzuchet Dr Harrison Twp, MI 48045</u>					
5. If over \$100.00 cumulative, please provide:					
Occupation <u>owner</u>	Employer <u>Hesco</u>				
Business Address <u>28838 Van Dyke Ave Warren, MI 48093</u>					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person	<input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt		500-	500-
Name: <u>David Anthony</u>		<u>3-11-13</u>			
Address: <u>517 S. Melborn St Dearborn, MI 48124</u>					
5. If over \$100.00 cumulative, please provide:					
Occupation <u>Engineer</u>	Employer <u>Wade-Trim</u>				
Business Address <u>555 S. Saginaw St Flint, MI 48502</u>					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person	<input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt		500-	500-
Name: <u>Frank Tymowski</u>		<u>3-6-13</u>			
Address: <u>16798 Backline Blvd Northville, MI 48168</u>					
5. If over \$100.00 cumulative, please provide:					
Occupation <u>Engineer</u>	Employer <u>Wade-Trim</u>				
Business Address <u>see Above</u>					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person	<input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt		500-	500-
Name: <u>Andrew McCune</u>		<u>3-6-13</u>			
Address: <u>985 Colony Court Saline, MI 48176</u>					
5. If over \$100.00 cumulative, please provide:					
Occupation <u>Engineer</u>	Employer <u>Wade-Trim</u>				
Business Address <u>see Above</u>					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person	<input checked="" type="checkbox"/> Fund Raiser			
				3,500-	✓

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

33520
Jeff Wright 2000

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

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	2-19-13	250-	250-
Name: <u>Ralph Picano</u>					
Address: <u>30539 Hickory Lane Franklin, MI 48005</u>					
5. If over \$100.00 cumulative, please provide:					
Occupation <u>Engineer</u>	Employer <u>Wade Trim</u>				
Business Address					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person	<input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	2-18-13	500-	500-
Name: <u>Mark Coleman</u>					
Address: <u>22694 Beech St Dearborn, MI 48124</u>					
5. If over \$100.00 cumulative, please provide:					
Occupation <u>Partner</u>	Employer <u>Wade - Trim</u>				
Business Address					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person	<input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	2-20-13	250-	250-
Name: <u>James Kovas</u>					
Address: <u>9336 Gale Rd Grosse Pointe, MI 48138</u>					
5. If over \$100.00 cumulative, please provide:					
Occupation <u>Engineer</u>	Employer <u>Wade - Trim</u>				
Business Address					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person	<input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	2-22-13	250-	250-
Name: <u>Shawn Keough</u>					
Address: <u>8222 Webster Rd Dexter, MI 48130</u>					
5. If over \$100.00 cumulative, please provide:					
Occupation <u>Engineer</u>	Employer <u>Wade - Trim</u>				
Business Address					
Type of Contribution: <input type="checkbox"/> Direct	<input type="checkbox"/> Loan from a person	<input checked="" type="checkbox"/> Fund Raiser			
<p>Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)</p>				1,250-	✓



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

33520
Jeff Wright 2000

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3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt	2-21-13	500-	500-
Name: Nick Lomako					
Address: 20154 Edgewood Livonia, MI 48152					
5. If over \$100.00 cumulative, please provide:					
Occupation: Engineer	Employer: Wade Trim				
Business Address: See Above					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 2	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt	2-18-13	500-	500-
Name: Doug Watson					
Address: 12461 Woodlands Ct. Plymouth, MI 48170					
5. If over \$100.00 cumulative, please provide:					
Occupation: Engineer	Employer: Wade Trim				
Business Address: See Above					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt	3-12-13	500-	500-
Name: David Pipietto					
Address: 5968 Emerald Lakes Dr Medina, OH 44056					
5. If over \$100.00 cumulative, please provide:					
Occupation: Engineer	Employer: Wade Trim				
Business Address: See Above					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt	2-26-13	250-	250-
Name: Jason Kenyon					
Address: 10305 Jewell Rd. Grosse Pointe, MI 48436					
5. If over \$100.00 cumulative, please provide:					
Occupation: Manager/Engineer	Employer: Wade Trim				
Business Address: See Above					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
Grand Total of All Schedules 1A				1,750-	1,750-
(Complete on last page of Schedule)					

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

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

33520
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 <input type="checkbox"/> NO	4. Date of Receipt		500-	500-
Name: Fred Shalte		3-8-13			
Address: One Lighthouse Point, Fenton, MI 48430					
5. If over \$100.00 cumulative, please provide:					
Occupation: owner	Employer: Delta Engineering				
Business Address: 6060 Torrey Rd Suite A Flint, MI 48507					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt		1,500-	1,500-
Name: Geoffrey Stiefen		3-18-13			
Address: 510 Red Maple Dr. Tecumseh, MI 49086					
5. If over \$100.00 cumulative, please provide:					
Occupation: Sales Rep.	Employer: Hansen Pressure Pipe				
Business Address: Same					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt		2500-	2500-
Name: Ishwar Naik		3-14-13			
Address: 3815 Maple Dr. Ypsilanti, MI 48197					
5. If over \$100.00 cumulative, please provide:					
Occupation: owner	Employer: STANTEC				
Business Address: 3754 Rancho Dr Ann Arbor, MI 48108					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt		1,000-	1,000-
Name: Barbara Dames		3-18-13			
Address: 9860 E. Shipman Rd Coloma, MI 48817					
5. If over \$100.00 cumulative, please provide:					
Occupation: owner/sponse	Employer: Glaisen - Dames				
Business Address: 4130 Commerce Dr. Suite C Flushing, MI					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser 48433					
Page Subtotal				5,500-	5,500-
Grand Total of All Schedules 1A					
(Complete on last page of Schedule)					



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

33520
Jeff Wright 2000

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

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	3-13-13	2,000-	2,000-
Name: <u>JERRY MYERS</u> Address: <u>2520 4th ST Winthrop Harbor, IL 60096</u> 5. If over \$100.00 cumulative, please provide: Occupation: <u>owner Sales Rep.</u> Employer: <u>ON Tanks</u>					
Business Address: <u>4247 Grove Ave GARNES, IL 60081</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	3-13-13	500-	500-
Name: <u>George Davis</u> Address: <u>2624 Elmwood Dr SE Grand Rapids, MI 49503</u> 5. If over \$100.00 cumulative, please provide: Occupation: <u>owner</u> Employer: <u>Davis & Davis Land</u>					
Business Address: <u>same</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	3-8-13	1,000-	1,000-
Name: <u>Dean Holmes</u> Address: <u>8350 E Richfield Rd. Annison, MI</u> 5. If over \$100.00 cumulative, please provide: Occupation: <u>owner</u> Employer: <u>Dean Holmes Excavating</u>					
Business Address: <u>same as above</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	3-5-13	500-	500-
Name: <u>Joseph Hotz</u> Address: <u>4436 Fleetwood Ln Sylvania, OH 43560</u> 5. If over \$100.00 cumulative, please provide: Occupation: <u>Engineer</u> Employer: <u>Jones & Henry</u>					
Business Address: <u>see next page</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
				4,000-	4,000- ✓

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

Enter this total on line 3 of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

33520
Jeff Wright 2000

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

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 <input type="checkbox"/> NO	4. Date of Receipt			
Name: <u>Greg Simon</u>		<u>3-5-13</u>			
Address: <u>2407 U.S. 60 Swanton, OH 43588</u>					500-
5. If over \$100.00 cumulative, please provide:					
Occupation <u>Engineer</u>	Employer <u>Jones & Henry</u>				
Business Address <u>3103 Executive Parkway Suite 300 Toledo, OH</u>	Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt			
Name: <u>Judith Wordelman</u>		<u>3-5-13</u>			
Address: <u>14321 Cross Creek Bowling Green, OH 43402</u>					1,000-
5. If over \$100.00 cumulative, please provide:					
Occupation <u>Spouse/owner</u>	Employer <u>Jones & Henry</u>				
Business Address <u>See above</u>	Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt			
Name: <u>Michael Peters</u>		<u>3-9-13</u>			
Address: <u>7176 Old Linton Dr. SE Caledwin, MI 49316</u>					1,000-
5. If over \$100.00 cumulative, please provide:					
Occupation <u>Engineer</u>	Employer <u>FTC and H</u>				
Business Address <u>1515 Arboratum Dr. SE Grand Rapids, MI</u>	Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt			
Name: <u>GARY Hurand</u>		<u>3-6-13</u>			
Address: <u>PO Box 310285 Flint, MI 48531</u>					500-
5. If over \$100.00 cumulative, please provide:					
Occupation <u>owner</u>	Employer <u>Hurand & Hurand LLC</u>				
Business Address <u>same - see above</u>	Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				
Grand Total of All Schedules 1A				3,000-	✓

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



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 Name: <u>Winfield Cooper III</u> Address: <u>PO Box 300500 Flint, MI 48630</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>owner</u> Employer <u>Cooper Commercial</u> Business Address <u>SAME</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	1,000-	1,000-
3. Contribution # 2 Name: <u>Anthony Calarossi</u> Address: <u>11663 Hidden Spring Trail Newitt, MI 48820</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100-	100-
3. Contribution # 3 Name: <u>Bernard Ostrowski</u> Address: <u>7262 Roseark, Dublin, OH 43017</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100-	100-
3. Contribution # 4 Name: <u>Michael Baker</u> Address: <u>9790 S. Saiseth Rd Saffers Bay, NJ 49680</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100-	100-
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	1,300-	✓



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

33520
Jeff Wright 2000

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

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 Name: <u>David Chesebrough</u> Address: <u>81 Chateaux Du Lac Fenton, MI 48430</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100-	100-
3. Contribution #2 Name: <u>MAEK JACKSON</u> Address: <u>2003 Beechgrove Ct Cincinnati, OH 45233</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100-	100-
3. Contribution # 3 Name: <u>DENNIS GRAHAM</u> Address: <u>3 868 WYNYMORA DR Troy, MI 48063</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100-	100-
3. Contribution # 4 Name: <u>TERESA POLLOCK</u> Address: <u>257 CHESTERMONT CIRCLE Bloomfield Hills, MI 48304</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100-	100-
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	400-	✓



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

33520
Jeff Wright 2000

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

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 <input type="checkbox"/> NO	4. Date of Receipt		100-	100-
Name: <u>GERARD GAMBLETON</u>		<u>2-11-13</u>			
Address: <u>5600 Westwood Ln Bloomfield Twp, MI 48301</u>					
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____					
Business Address _____					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 2	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt		100-	100-
Name: <u>DAVID HARRINGTON</u>		<u>2-10-13</u>			
Address: <u>47385 American Way, Macomb, MI 48044</u>					
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____					
Business Address _____					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt		100-	100-
Name: <u>CINDI LESSER</u>		<u>2-13-13</u>			
Address: <u>13401 Hawk Da Shelby Twp, MI 48315</u>					
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____					
Business Address _____					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. Date of Receipt		1000-	1000-
Name: <u>JEFF LEWIS</u>		<u>3-1-13</u>			
Address: <u>3431 Flint River Rd. Columbusville, MI 48431</u>					
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT/CEO</u> Employer <u>N. Arrow Tech. Inc.</u>					
Business Address <u>14165 N. Fenton Rd Suite 204A Fenton, MI 48430</u>					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					
				1,300-	✓

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

33520
Jeff Wright 2000

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

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.

3. Contribution #	PAC Receipt?	YES	4. Date of Receipt	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name: <u>Abba Friedman</u> Address: <u>4751 SAWGRASS DR. E. ANN ARBOR MI 48108</u> 5. If over \$100.00 cumulative, please provide: Occupation: <u>Owner/Attorney</u> Employer: <u>Abba Friedman</u> Business Address: <u>350 S. MAIN ST. SUITE 300 ANN ARBOR, MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			<u>3-1-13</u>	<u>1000-</u>	<u>1000-</u>
Name: <u>Michael P. Fen</u> Address: <u>6438 Boulder Dr. FLUSHING MI 48433</u> 5. If over \$100.00 cumulative, please provide: Occupation: <u>President</u> Employer: <u>Kraft Engineering</u> Business Address: <u>409 W. Seventh ST FLINT, MI 48503</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			<u>3-7-13</u>	<u>500-</u>	<u>500-</u>
Name: <u>John Zito</u> Address: <u>8033 Fenton Rd 6R4nd Blanc</u> 5. If over \$100.00 cumulative, please provide: Occupation: <u>Owner</u> Employer: <u>Zito Construction</u> Business Address: <u>Same as Above</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			<u>3-1-13</u>	<u>1000-</u>	<u>1000-</u>
Name: _____ Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation: _____ Employer: _____ Business Address: _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser					
Page Subtotal				<u>2,500-</u>	
Grand Total of All Schedules 1A (Complete on last page of Schedule)				<u>84,125-</u>	



**ITEMIZED OTHER RECEIPTS
SCHEDULE 1A-1
CANDIDATE COMMITTEE**

1. Committee I.D. Number 33520
2. Committee Name Jeff Wright 2000

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name: <u>Jeff Wright</u> Address: <u>2194 Sycamore Burton, MI 48509</u>	Date of Receipt <u>12-8-12</u> <input type="checkbox"/> Fund Raiser	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input checked="" type="checkbox"/> Other (Specify) <u>Loan to Comm</u>	<u>1835.25</u>
Receipt #2 Name: _____ Address: <input type="checkbox"/> Fund Raiser	Date of Receipt _____ <input type="checkbox"/> Fund Raiser	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	
Receipt #3 Name: _____ Address: <input type="checkbox"/> Fund Raiser	Date of Receipt _____ <input type="checkbox"/> Fund Raiser	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	
Receipt #4 Name: _____ Address: <input type="checkbox"/> Fund Raiser	Date of Receipt _____ <input type="checkbox"/> Fund Raiser	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	
Receipt #5 Name: _____ Address: <input type="checkbox"/> Fund Raiser	Date of Receipt _____ <input type="checkbox"/> Fund Raiser	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	
Receipt #6 Name: _____ Address: <input type="checkbox"/> Fund Raiser	Date of Receipt _____ <input type="checkbox"/> Fund Raiser	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	
Receipt #7 Name: _____ Address: <input type="checkbox"/> Fund Raiser	Date of Receipt _____ <input type="checkbox"/> Fund Raiser	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	
Page Subtotal Grand Total of All Schedules 1A-1 (Complete on last page of Schedule)			<u>1835.25</u>

Enter this total on
line 4 of Summary
Page

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

33520

1. Committee I. D. Number

2. Committee Name Jeff Wright 2000

3. Name and address of person or vendor to whom paid

4. Purpose (Required information)

5. Date

6. Amount

Expenditure #1

Name IMA Brookwood
Address 6045 Davison Rd.
Barton, MI 48509

Date 10-6-10 \$ 1,835.25

Purpose: Appreciation Invoice

Click Here for Memo Itemization Type

Check box if this expenditure is payment of debt or obligation reported on previous statement

Fund Raiser

Expenditure #2

Name MI Democratic Party
Address 606 Townsend
Lansing, MI 48933

Date 1-30-13 \$ 40-

Purpose: election Expense

Click Here for Memo Itemization Type

Check box if this expenditure is payment of debt or obligation reported on previous statement

Fund Raiser

Expenditure #3

Name Flint Water Shed Coalition
Address 400 N. Saginaw Sate 233
Flint, MI 48502

Date 1-31-13 \$ 1,000-

Purpose: Election Expense

Click Here for Memo Itemization Type

Check box if this expenditure is payment of debt or obligation reported on previous statement

Fund Raiser

Expenditure #4

Name US POST office
Address Mott Park Station
Flint, MI 48504

Date 2-28-13 \$ 61.74

Purpose: Election Expense

Click Here for Memo Itemization Type

Check box if this expenditure is payment of debt or obligation reported on previous statement

Fund Raiser

Expenditure #5

Name Big Brothers - Big Sisters
Address 410 E. Second ST
Flint, MI 48501

Date 2-23-13 \$ 250-

Purpose: Donation

Click Here for Memo Itemization Type

Check box if this expenditure is payment of debt or obligation reported on previous statement

Fund Raiser

Subtotal this page

3,186.99

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

Enter this total
on line 8a of
Summary Page

**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 (Required Information)	5. Date	6. Amount
Expenditure #1	Name <u>Committee To Elect Dan Hill</u> Address <u>V# 2304 8-3-13⁰⁶ NEVER CASHED/CLEARED Bank</u>	Purpose: <u>Donation Voided</u> <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8-3-13</u> Date	<u>\$ 100</u> ←
Expenditure #2	Name <u>SWARTZ CREEK VFW</u> Address <u>3131 S. Elms Rd. Swartz Creek, MI</u>	Purpose: <u>Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>2-28-13</u> Date	<u>\$ 40</u>
Expenditure #3	Name <u>Friends of Ellen Ellomburg</u> Address <u>Also known as (more Forward w/ E. Ellomburg) 2228 Buder Burton, MI</u>	Purpose: <u>Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3-6-13</u> Date	<u>\$ 35</u>
Expenditure #4	Name <u>All Safe Storage</u> Address <u>1300 N. Belsny Rd. Burton, MI 48509</u>	Purpose: <u>Election Expense</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3-6-13</u> Date	<u>\$ 336</u>
Expenditure #5	Name <u>Bullocks</u> Address <u>6-5300 Richfield Rd Genesee, MI</u>	Purpose: <u>Fund Raiser Exp.</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3-7-13</u> Date	<u>\$ 3326.16</u>
			Subtotal this page	<u>3637.16</u>
			Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page



**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 (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Bullocks</u> Address <u>5302 Richfield Rd. Genesee, MI</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser Exp.</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	<u>3-15-13</u>	\$ <u>1066.91</u>
Expenditure #2 <input checked="" type="checkbox"/> Fund Raiser Name <u>Construction Fastness</u> Address <u>2120 Knowlton Ave Flint, MI 48506</u>	Purpose: <u>Fund Raiser Exp.</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	<u>3-22-13</u>	\$ <u>133.60</u>
Expenditure #3 <input checked="" type="checkbox"/> Fund Raiser Name <u>Garden Mountain</u> Address <u>5038 Miller Rd Flint, MI</u>	Purpose: <u>Fund Raiser Exp.</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	<u>3-21-13</u>	\$ <u>1138.20</u>
Expenditure #4 <input type="checkbox"/> Fund Raiser Name <u>ST. Frances Prayer Center</u> Address <u>6-2381 E. Crapenka Rd. Flint, MI 48505</u>	Purpose: <u>Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	<u>4-26-13</u>	\$ <u>300.-</u>
Expenditure #5 <input type="checkbox"/> Fund Raiser Name <u>Greater Flint African American Hall Home</u> Address <u>605 Josephine St Flint, MI 48503</u>	Purpose: <u>Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	<u>3-23-13</u>	\$ <u>350.-</u>

Subtotal this page

2989.21

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

Enter this total
on line 8a of
Summary Page

**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 (Required Information)		5. Date	6. Amount
Expenditure #1	<input type="checkbox"/> Fund Raiser Name <u>Jeff Wright</u> Address <u>2174 Sycamore St</u> <u>Burton, MI 48509</u>	<input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Purpose: <u>Loan - partial Repayment</u> Click Here for Memo Itemization Type	<u>3-25-13</u>	<u>3-25-13</u>	<u>\$ 2,500-</u>
Expenditure #2	<input type="checkbox"/> Fund Raiser Name <u>Oregon Knife</u> Address <u>2906 Cleve land Ave</u> <u>Marquette, WI 54143</u>	<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Purpose: <u>Fundraiser Exp.</u> Click Here for Memo Itemization Type	<u>3-25-13</u>	<u>3-25-13</u>	<u>\$ 4,179-</u>
Expenditure #3	<input checked="" type="checkbox"/> Fund Raiser Name <u>Handsmen Hand Club Inc.</u> Address <u>3166 Havens Rd.</u> <u>Dryden, MI 48428</u>	<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Purpose: <u>Fundraiser Exp.</u> Click Here for Memo Itemization Type	<u>4-7-13</u>	<u>4-7-13</u>	<u>\$ 31,939</u>
Expenditure #4	<input type="checkbox"/> Fund Raiser Name <u>ROG - YAW Retirees</u> Address <u>PO Box 7748</u> <u>Flint, MI 48507</u>	<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Purpose: <u>Donation</u> Click Here for Memo Itemization Type	<u>4-18-13</u>	<u>4-18-13</u>	<u>\$ 480-</u>
Expenditure #5	<input type="checkbox"/> Fund Raiser Name <u>Friends of Jim Ananich</u> Address <u>932 Maxine St</u> <u>Flint, MI</u>	<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Purpose: <u>Donation</u> Click Here for Memo Itemization Type	<u>4-22-13</u>	<u>4-22-13</u>	<u>\$ 100-</u>

Subtotal this page 38,652.99
Grand Total of all Schedules 1B (Complete on last page of Schedule)

Enter this total on line 8a of Summary Page

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

33520

1. Committee I. D. Number

2. Committee Name Jeff Wright 2000

3. Name and address of person or vendor to whom paid		4. Purpose (Required Information)		5. Date	6. Amount
Expenditure #1	Name <u>Big Brothers - Big Sisters</u> Address <u>401 E. Second ST Flint, MI 48501</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Sponsor/Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4-16-13</u> Date	<u>\$ 600</u>	
Expenditure #2	Name <u>Wally's East Restaurant</u> Address <u>1341 S. Seneca Rd Barton, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Mtg Rm Deposit-MACAC</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4-29-13</u> Date	<u>\$ 250</u>	
Expenditure #3	Name <u>Greener Flint AFL-CIO</u> Address <u>PO Box 245 Flint, MI 48501</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertisement Elect. Exp.</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5-6-13</u> Date	<u>\$ 250</u>	
Expenditure #4	Name <u>Faternal Order of Police #126</u> Address <u>PO Box 7738 Flint, MI 48501</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4-23-13</u> Date	<u>\$ 125</u>	
Expenditure #5	Name <u>Sam Duncan Scholarship-UAW</u> Address <u>1940 W. A Thorton Rd Flint, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-4-13</u> Date	<u>\$ 120</u>	
Subtotal this page				<u>1,345</u>	
Grand Total of all Schedules 1B (Complete on last page of Schedule)					

Enter this total
on line 8a of
Summary Page

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

33520

1. Committee I. D. Number

2. Committee Name Jeff Wright 2000

3. Name and address of person or vendor to whom paid		4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1	Name <u>Genesee Co. Ban Assoc.</u> Address <u>315 E. Court Flint, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	<u>6-17-13</u> Date	\$ <u>250</u>
Expenditure #2	Name <u>Atherton High School</u> Address <u>3354 S. Genesee Burton, MI 48519</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	<u>6-10-13</u> Date	\$ <u>110</u>
Expenditure #3	Name <u>Greenba Flint AFL-CIO</u> Address <u>PO Box 245 Flint, MI 48501</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Award Dinner Tickets</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	<u>5-16-13</u> Date	\$ <u>300</u>
Expenditure #4	Name <u>Area 13 Special Olympics</u> Address <u>2413 W. Maple Ave Flint, MI 48507</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	<u>7-23-13</u> Date	\$ <u>1300</u>
Expenditure #5	Name <u>Greenbriar Golf Course - UAW Sponsor</u> Address <u>PO Box 7948 Flint, MI 48507</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Sponsor/Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	<u>7-8-13</u> Date	\$ <u>700</u>

Subtotal this page

2,660

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

Enter this total
on line 8a of
Summary Page

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

33520

1. Committee I. D. Number

2. Committee Name Jeff Wright 2000

3. Name and address of person or vendor to whom paid		4. Purpose (Required Information)		5. Date	6. Amount
Expenditure #1	<p>Name <u>Argicou Harol Society - Fair Bend</u></p> <p>Address <u>2188 W. MT. Morris Rd.</u> <u>MT. Morris, MI 48858</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Donation</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p> <p>Click Here for Memo Itemization Type</p>	<u>8-19-13</u>	<u>1,000</u>	
Expenditure #2	<p>Name <u>Artism Support & Resource Center</u></p> <p>Address <u>4476 S. Dent Hwy</u> <u>Burton, MI 48529</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Donation</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p> <p>Click Here for Memo Itemization Type</p>	<u>8-28-13</u>	<u>200</u>	
Expenditure #3	<p>Name <u>Assumption Greek Orthodox Church</u></p> <p>Address <u>2245 E. Baldwin Rd.</u> <u>Grand Blanc, MI</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Donation</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p> <p>Click Here for Memo Itemization Type</p>	<u>9-2-13</u>	<u>900</u>	
Expenditure #4	<p>Name <u>Move Forward w Ellen Ellenhury</u></p> <p>Address <u>2228 Burden</u> <u>Burton, MI</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Donation</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p> <p>Click Here for Memo Itemization Type</p>	<u>9-19-13</u>	<u>100</u>	
Expenditure #5	<p>Name <u>All Safe Storage</u></p> <p>Address <u>1320 N. Bebay Rd.</u> <u>Burton, MI 48509</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>elect. Expense</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p> <p>Click Here for Memo Itemization Type</p>	<u>9-11-13</u>	<u>336</u>	

Subtotal this page

2,536

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

Enter this total on line 8a of Summary Page

**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 (Required Information)		5. Date	6. Amount
Expenditure #1	<input type="checkbox"/> Fund Raiser Name <u>SANILAC FFA</u> Address <u>175 E. Aiken Rd.</u> <u>PecK, MI 48466</u>	<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Purpose: <u>Donation - KWA</u> <u>Friend Benjamins</u> Click Here for Memo Itemization Type	Date <u>9-17-13</u> \$ <u>112.50</u>		
Expenditure #2	<input type="checkbox"/> Fund Raiser Name <u>GCDP Congressional Diacon Comm.</u> Address <u>6180 Gaultside Ct.</u> <u>Friend Blanc, MI 48439</u>	<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Purpose: <u>Donation</u> Click Here for Memo Itemization Type	Date <u>10-2-13</u> \$ <u>1,500</u>		
Expenditure #3	<input type="checkbox"/> Fund Raiser Name <u>Burton Kim Annis</u> Address <u>1061 Anapaho Dr.</u> <u>Burton, MI 48509</u>	<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Purpose: <u>Donation</u> Click Here for Memo Itemization Type	Date <u>10-3-13</u> \$ <u>100</u>		
Expenditure #4	<input type="checkbox"/> Fund Raiser Name <u>Jeff Wright</u> Address <u>2174 Sycamore St</u> <u>Burton, MI 48509</u>	<input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Purpose: <u>Loan Partial Re-payment</u> Click Here for Memo Itemization Type	Date <u>10-3-13</u> \$ <u>1500</u>		
Expenditure #5	<input type="checkbox"/> Fund Raiser Name <u>WFLT</u> Address <u>317 S. Averill</u> <u>Flint, MI</u>	<input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement Purpose: <u>Sponsor</u> Click Here for Memo Itemization Type	Date <u>10-19-13</u> \$ <u>100</u>		

Subtotal this page

3,312.50

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

Enter this total
on line 8a of
Summary Page

**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 (Required information)		5. Date	6. Amount
Expenditure #1	Name <u>Crystal Ashburn</u> Address <u>6625 Parkbuilt Dr. Flint, MI 48505</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Sponsor - Halloween Party</u> <u>TRICK or TREAT Program</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		<u>10-21-13</u> Date	<u>\$ 300-</u>
Expenditure #2	Name <u>YMCA Youth Campaign</u> Address <u>310 E. Third St. Flint, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		<u>10-31-13</u> Date	<u>\$ 250-</u>
Expenditure #3	Name <u>Catholic Charities - Project Hope</u> Address <u>901 Chippewa Flint, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		<u>10-5-13</u> Date	<u>\$ 500-</u>
Expenditure #4	Name <u>Jeff Wright</u> Address <u>2174 Sycamore St Barton, MI 48509</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Misc. Expenses</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		<u>11-4-13</u> Date	<u>\$ 2050-</u>
Expenditure #5	Name <u>Jeff Wright</u> Address <u>2174 Sycamore St Barton, MI 48509</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Misc. Expenses</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		<u>11-7-13</u> Date	<u>\$ 780-</u>
Subtotal this page					<u>3880-</u>
Grand Total of all Schedules 1B (Complete on last page of Schedule)					

Enter this total
on line 8a of
Summary Page

**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 (Required Information)		5. Date	6. Amount
Expenditure #1	Name <u>IMA</u> Address <u>6045 Davison Rd. Burtov, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Appreciation Invoice</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10-5-13</u> Date	<u>\$ 2,122.50</u> Amount	Click Here for Memo Itemization Type
Expenditure #2	Name <u>MI Taboa Missionary Baptist Church</u> Address <u>115 Welch Blvd. Flint, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10-22-13</u> Date	<u>\$ 250-</u> Amount	Click Here for Memo Itemization Type
Expenditure #3	Name <u>CPSA Courier</u> Address <u>109 Welch Blvd Flint, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10-22-13</u> Date	<u>\$ 325-</u> Amount	Click Here for Memo Itemization Type
Expenditure #4	Name <u>Jeff Wright</u> Address <u>2174 Sycamore ST Barton, MI 48509</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>loan Payoff (Final Payment)</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12-20-13</u> Date	<u>\$ 1,162.52</u> Amount	Click Here for Memo Itemization Type
Expenditure #5	Name <u>VE's Food Stores</u> Address <u>4165 E. Court Barton, MI 48509</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Donated Turkeys to Local Churches</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12-21-13</u> Date	<u>\$ 676.99</u> Amount	Click Here for Memo Itemization Type

Subtotal this page 4,537.01
Grand Total of all Schedules 1B
(Complete on last page of Schedule)

Enter this total on line 8a of Summary Page

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

33520

1. Committee I. D. Number

2. Committee Name Jeff Wright 2000

3. Name and address of person or vendor to whom paid

4. Purpose (Required information)

5. Date

6. Amount

Expenditure #1

Name Montrose Orchards
Address 12473 Seymore Rd.
Montrose, MI 48457

Purpose: Donation to local
Churches
Click Here for Memo Itemization Type
Date 10-21-13 \$ 657.22

Check box if this expenditure is payment of debt or obligation reported on previous statement

Fund Raiser

Expenditure #2

Name
Address

Purpose: _____ Date _____ \$ _____
Click Here for Memo Itemization Type

Fund Raiser

Expenditure #3

Name
Address

Purpose: _____ Date _____ \$ _____
Click Here for Memo Itemization Type

Check box if this expenditure is payment of debt or obligation reported on previous statement

Fund Raiser

Expenditure #4

Name
Address

Purpose: _____ Date _____ \$ _____
Click Here for Memo Itemization Type

Check box if this expenditure is payment of debt or obligation reported on previous statement

Fund Raiser

Expenditure #5

Name
Address

Purpose: _____ Date _____ \$ _____
Click Here for Memo Itemization Type

Check box if this expenditure is payment of debt or obligation reported on previous statement

Fund Raiser

Subtotal this page

657.22

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

67,394.08

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS

SCHEDULE 1E

CANDIDATE COMMITTEE

1. Committee I.D. Number 33520

2. Committee Name Jeff Wright 2000

This Schedule itemizes:

a. <input checked="" type="checkbox"/> Debts and obligations owed by or forgiven the committee		OR		b. <input type="checkbox"/> Debts and obligations owed to or forgiven by the committee.	
(Check either a or b. Use only for the purpose checked.)					
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Indicate type and you may assign an expenditure code) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)	
Debt #1 Owed to or by: <u>Jeff Wright</u> <u>2174 Sycamore ST</u> <u>Barton, MI 48509</u> If bank loan, name of endorser or guarantor: Debt #2 Owed to or by: <u>Jeff Wright</u> If bank loan, name of endorser or guarantor:	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>12-6-2012</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1,835.05</u>	<u>1/1</u> \$ <u>1/1</u> \$ <u>1/1</u> \$ <u>1/1</u> \$ <u>1/1</u> \$	<u>-0-</u> \$	<u>\$ 1,835.05</u> <input type="checkbox"/> FORGIVEN	Amount Endorsed: \$
Debt #3 Owed to or by: <u>Jeff Wright</u> If bank loan, name of endorser or guarantor:	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>Prior Report 11-26-12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 3,327.27</u>	<u>1/1</u> \$ <u>1/1</u> \$ <u>1/1</u> \$ <u>1/1</u> \$ <u>1/1</u> \$		<u>Total owed</u> <u>5,162.52</u> <input type="checkbox"/> FORGIVEN	Amount Endorsed: \$
Debt #3 Owed to or by: <u>Jeff Wright</u> If bank loan, name of endorser or guarantor:	4. Type: <u>LOANS</u> 5. <u>Date Debt Was Incurred:</u> <u>3/25/13 \$ 2,500-</u> <u>10/13/13 \$ 1,500-</u> <u>10/20/13 \$ 1162.52</u> 6. <u>Original Amount of Debt:</u> <u>\$</u>	<u>3/25/13</u> \$ <u>2,500-</u> <u>10/13/13</u> \$ <u>1,500-</u> <u>10/20/13</u> \$ <u>1162.52</u> <u>1/1</u> \$ <u>1/1</u> \$		<u>Paid Loans</u> <u>in Full</u> <u>-0-</u> <input type="checkbox"/> FORGIVEN	Amount Endorsed: \$

Page Subtotal (Outstanding debt)

Grand Total of all Schedules 1E

(Complete on last page of Schedule showing amounts owed by or to the committee)

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

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

**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 Month <u>3</u> - Day <u>22</u> - Year <u>2013</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>110</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 Haven Rd.</u> <input type="checkbox"/> Private Residence <u>Oraybor, MI</u>
---	---	--	---

7. Total Contributions 84,125
8. Other Receipts 0
9. Gross Receipts (Add lines 7 and 8) 84,125
10. Total Cost of Event 41,300
(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 (1-1K), 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.