

#### CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by		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 Statemer	nent covers From: 1-1-3014 to 7-30-3014  Mo Day Year Mo Day Year
1. Committee I.D. Number 3 3500	4. Candidate L	Last Name First Name M.I.
2. Committee Name	4a. Office Sough	ght Including District # or Community Served (If applicable)
2. Committee Name  Teff Wright 2000		enosee Gunty DRAIN COMMISSIONER
5. Committee's Mailing Address 3194 Sycamore 57	6. Treasurer's Na	
Burton, MI 4850	6	Name & Residential Address WARREN VYVYAN 1455 LAN RENTIAN PASS
Area Code and Phone 8/0 743-0346	ľ	
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.	Area Code & Pho	hone (80) 732-3593 Flint, MI 4853)
7. Treasurer's Business Address	8. Designated Red	Record keeper's Name and Mailing Address (If the committee has a cord keeper)
51me AS # 6	Designated Recor	cord Keeper)
Area Code and Phone ()	Area Code and Ph	Phone ( )
9. TYPE OF STATEMENT		9c. Annual Statement ( Coverage Year)
		= = = = = = = = = = = = = = = = = = = =
9a. Pre-Election OR 9b. Post-	Election	9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c
Pre-Election or Post-Election Statement relates to:		or 9e to indicate which Statement is being amended)
☐ Primary ☐ Gener	ral	9e. Dissolution of Candidate Committee
☐ Convention ☐ School	i	Effective Date of Dissolution
☐ Special ☐ Cauct	ıs	
Date of Election, Convention or Caucus	·	Month Day Year
January Solvention of State as		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
Month Day Year		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 Schedules. Direct contributions, in-kind contributions, loans, exp If any of the information listed in items 2, 4, 5, 6, 7, or 8 has chan	required Campaign enditures, and outst ged since the inforn	in Statements. The Campaign Statements must include all applicable standing debts count against the \$1,000 Reporting Waiver threshold. It is a statement of Organization, an attement. If a request for a Reporting Waiver is not received on or tagement cannot be waived.
before the filing deadline of a required campaign statement,	this Campaign Stat that campaign stat	atement. If a request for a Reporting Waiver is not received on or latement cannot be waived.
10. Verification: I/We certify that all reasonable diligence was use my/our knowledge and belief the contents are true, accurate and		on of this statement and attached schedules (if any) and to the best of
Current Treasurer or Designated Record keeper Walker Vyvyn	MA	When 49ge 9-31-2014
Teff Type or Print Name	Signature	Date Mo Day Year
Candidate Type or Print Name	Signal	Date Date
Authority granted under P.A. 388 of 1976		Mo Day Year



1. Committee I.D. Number

333<sub>0</sub>

2. Committee Name

Wright 2000

#### SUMMARY PAGE CANDIDATE COMMITTEE

RECEIPTS	Column	
3. Contributions	Column I This Period	Column II Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 91,550 -	
b. Uniternized (less than \$20.01 each - no Schedule)	(3b.) \$NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ 91, 550 -	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ 91, 550 -	(20.) \$ 91, 550
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	0 40	
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>57, 738, 47</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.) \$ 57, 738.47	(23.) \$ 57, 738.47
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		- -
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)		
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(10b.) \$	
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$	(24.) \$
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)		
	(12b.) \$ BALANCE STATEMENT	·
<ul><li>13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)</li><li>14. Amount received during reporting period</li></ul>	(13.) \$ 19,686.63 \/ (14.) + \$ 91,550.00 \/	/
(Line 5, Total Contributions & Other Receipts)	(15.) = \$ ///, J36.63	· /
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(16.)- \$ 57, 738.47	
(Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>53, 498.16</u> .	/



1. Committee I.D. Number

2. Committee Name\_

33520 Teff 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? YES 4. Date of Receipt 3-13-14  Name: Kevin Cook  Address: 53 59 Tean, tonin / R. Gand Blanc, M3 48436  5. If over \$100.00 cumulative, please provide:  Occupation Receipt Some  Type of Contribution: Direct Loan from a person Fund Raiser  3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3-14-14	1,000-	2,000
Name: LAWRence PRO 1451 ew ic 2  Address: 3 & 96 Banner Rd. ST. Johns. MI 4899  5. If over \$100.00 cumulative, please provide:  Occupation Owner Employer Spicer (Roup)  Business Address 230 S. Washington Aue, Saguran, MT 48609  Type of Contribution: Direct Loan from a person Fund Raiser	3,000-	2000-
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 2-10-14  Name: John MAC Denald  Address: 18 964 Van Rd Livenia, M7 48150  5. If over \$100.00 cumulative, please provide:  Occupation CARTMEN Employer Mark De Farmington Hills M7  Type of Contribution: Direct Loan from a person Fund Raiser 48335	1000-	2,000-
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt Y-21-14  Name: MARCUS LYUNS  Address: 12) E. Edgeword Da. Binning fan, AL 35205  5. If over \$100.00 cumulative, please provide:  Occupation Employer AMRICAN Pipel  Business Address 19 16 16 th 57. N Binning fan, AL 3520  Type of Contribution: Direct Loan from a person Fund Raiser  Page Subtotal  Grand Total of All Schedules 1A	200- 7 4,200-	200-
(Complete on last page of Schedule)		

Enter this total on line 3 of Summary Page.

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1. Committee I.D. Number

33520

Wright 2000 **CANDIDATE COMMITTEE** 2. Committee Name Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount 7. Cumulative for middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Election Cycle for Each Committee. (PAC) Report all contributions from committees regardless of amount. Contributor (Through date of receipt) PAC Receipt? YES 3. Contribution # 1 4. Date of Receipt Name: DANIEL Z.tu 8033 Fewtow Rd. Ganad Blone, MI 48439 1000 -5. If over \$100.00 cumulative, please provide: Zifo Constantion OWNER Occupation Employer SAMC Business Address \_\_\_\_ Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 2-14-14 Name: TOHN Zita Address: 8033 Forton Rd, GRAND Blone, MJ 48499 5. If over \$100.00 cumulative, please provide: Zito Constanction Occupation OWNER Employer SAME Business Address \_ Type of Contribution: Direct Loan from a person Fund Raiser PAC Receipt? YES 2-11-14 4. Date of Receipt Name: Beuraly O'Malia Address Jans Bravender Rd. Williamston MJ 48895 5. If over \$100.00 cumulative, please provide: Occupation wife OWNER Employer O'M Nin Construction SAME Business Address Type of Contribution: M Direct Loan from a person ☐ Fund Raiser PAC Receipt? YES 3. Contribution #4 4. Date of Receipt Name: WM. 619AR BROWN 5565 N. ZIMMER Rd. Willmastor, MJ 48895 5. If over \$100.00 cumulative, please provide: Engineer Employer O' Malin Const Ruction Occupation Business Address Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal Grand Total of All Schedules 1A 2,200 (Complete on last page of Schedule)

Enter this total on line 3 of Summary Page.

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Comments of D. Marris	33520
Committee I.D. Number	

1. Committee I.D. Number

2. Committee Name

Teff

WRight 2000

Inter last name, first name, free or an Independent

Telection Cycle for Each

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Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 3-13-14  Name: George Hubbell  Address: 985 Hill Hollow Lw. Method, M.]  5. If over \$100.00 cumulative, please provide:  Occupation Oward Employer HRC  Business Address 555 Hulet Dr. Pobor 834 Bloom field Helb, Mi  Type of Contribution: Direct Loan from a person Fund Raiser 48303	1,000-	2,000-
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Name: WATTLA Alix Address: 333 N. Elda W. Bloomfield, MT 48334  5. If over \$100.00 cumulative, please provide: Occupation Craver Employer HAC Business Address 555 Halet DR. PoBas 834 Bloom field Hills MT Type of Contribution: Direct Loan from a person Fund Raiser 48303	1000-	1,000
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt  Name: MAK JACOKS  Address: 602 Delawae Dr., Peary Shaaq, OH 43551  5. If over \$100.00 cumulative, please provide:  Occupation Owner Employer Daylayka Jacoks Eng.  Business Address 101 Research M. Toledo, OH 43614  Type of Contribution: Direct Loan from a person Fund Raiser	500-	500-
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 3-10-14  Name: Jeff 376/hans  Address: 13/5 50/ice C.acle, CKems M7 48864  5. If over \$100.00 cumulative, please provide:  Occupation Sales Man Employer Peecless - M. Javis Jac  Business Address 505 Apple face Dr. Jonia, MT 48846  Type of Contribution: Direct Loan from a person Fund Raiser	2,000-	2000-
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	4,500	

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	32511)
1. Committee I.D. Number	J3J&U

CANDIDATE COMMITTEE 2. Committee Name_	Jeft 4	right 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? YES 4. Date of Receipt 2-18-14  Name: STA=y HISSONG  Address: 3896 Branch Rd. ST. Johns MJ 48879  5. If over \$100.00 cumulative, please provide:  Occupation ATTURNEY Employer Fahey Schulls Rhodos PUC  Business Address 4105 OK Mas Ad OKemos MJ 48864  Type of Contribution: Direct Loan from a person Fund Raiser	1,000	1,000
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3-17-14  Name: TellRey Lewis  Address: 3 431 Flint River Rd. Columbiaville, MI 4843;  5. If over \$100.00 cumulative, please provide:  Occupation UMMPR Employer North Harow Tech. Jac.  Business Address 14165 N. Ferden Rd Suite 2048 Ferden, MJ 48436  Type of Contribution: Direct Loan from a person Fund Raiser	1,000-	2,000-
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 2-11-14  Name: Keith M' Can Mark  Address: 3 11 2 Steepy Fox Roches ha Hills, MT 48309  5. If over \$100.00 cumulative, please provide:  Occupation Cagineer Employer HRC  Business Address 555 Hulet DR. Po Box 834 Bloom field Hills MT  Type of Contribution: Direct Loan from a person Fund Raiser 48303	1,000-	2,000
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 2-13-14  Name: John Faget  Address: 4411 Anheast Rd.  5. If over \$100.00 cumulative, please provide:  Occupation Ongeneer Employer If RC  Business Address 55 Helet In Paley 834 Bloomfiel/ Hills M7  Type of Contribution: Direct Loan from a person Fund Raiser 48303  Page Subtotal	1,000-	1,000
Grand Total of All Schedules 1A (Complete on last page of Schedule)	4,000	

Enter this total on line 3 of Summary Page.

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#### ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

ANDIDATE COMMITTEE 2. Committee Name

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

CANDIDATE COMMITTEE		
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. Curnulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 2-21-14  Name: Lan - PAC		
Address: 2925 BRIAR PARK DR, 48 Flow Houston, TX 77042	4,000	0 11111
5. If over \$100.00 cumulative, please provide:	,	0,000
Occupation Employer AN		
Business Address ONE OAK BROOK TERRACE 51307 OAK BROOK TRANCE  Type of Contribution: Direct    Loan from a person		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3-7-14  Name: Brany Wolf		
Address: 814 Kensington Flint MT48503	1 22 60 -	طفير
5. If over \$100.00 cumulative, please provide:	1,000	2,500
Occupation OWNER Employer BARRY Wolf, A Thaney		<i>§</i>
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3-3-14  Name: Davie M Vay	ende co	
Address: 72 81 Robents Rd. Hilland, OH 43026	2,000	1000-
5. If over \$100.00 cumulative, please provide:		~, <i>000</i>
Occupation SNEMEN Employer DN TANKS  Business Address 3964 BROWN PARK DR'B" 11.1/And OH		
		·
Type of Contribution: Direct Loan from a person Fund Raiser 43036		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 3-10-19 Name: Michael P. fex		
Address: 6438 Boulder On. Flushing, MJ 48433	1000	1500-
5. If over \$100.00 cumulative, please provide:		1,500
Occupation Partner Employer Kraft Eng.		1
Business Address 409 W. Seventh ST Flint, MI 48503	Liginitation	
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	8,000	/



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

CANDIDATE COMMITTEE 2. Committee Name_	Jett 1	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? YES 4. Date of Receipt 3-20-14  Name: PAPRICIA Per bady		
Address: 12 195 Foley Rd Fewfon, MI 48430	1000-	A section of the section
5. If over \$100.00 cumulative, please provide:	1000	1,500
Occupation Co-OWER Employer Per body Insw. Agenty		
Business Address 611 N. Saginary ST Holly MT 48447	-	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3-10-14  Name: Leanne Panduren		
Address: 2277 Tomahawk Da. Lagera, MI 48446	2000-	
5. If over \$100.00 cumulative, please provide:	3,000	3000
Occupation Engineer Employer Rowe Eng.  Business Address 540 5. Saginary 57 ste 206 Flint, MI 48602		
Business Address 540 5. SAGINAN ST Ste 200 Flint, MI 48502		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3, PAC Receipt? YES 4. Date of Receipt 3-11-14  Name: Melissa Law Rence		
Address: 12 134 FAIRbinks Ab. Linder, MI 48451	10000	
5. If over \$100.00 cumulative, please provide:	1000	1,000
Occupation Ca - UN VER Employer LAWRENCE ENG.	•	
Business Address 1549 N. LeRoy Smile E Featon, MT 48430		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3-10-19  Name: Robert Cook		
Address: 7220 E. Bust Rd. Biach Run, MT 48415	1000 -	
5. If over \$100.00 cumulative, please provide:	700	1,000
Occupation owner Employer Cook Excavating Inc		
Business Address 7000 E. But AU Bitch Run, MT 48415  Type of Contribution: Direct Doan from a person Depth Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	6,000	1

Enter this total on line 3 of Summary Page.

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1. Committee I.D. Number

33520 Ff Wright 2000 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? YES 4. Date of Receipt 3-14-14  Name: Robin Deveen		
Address: 8439 Oxford LN GRAND Blane, MI	2000 -	2000
5. If over \$100.00 cumulative, please provide:		
Occupation Siles Ref. Employer MI Pipe & Valve		
Business Address 4040 Engles Nest Flushing MT 46433  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3-19-14 Name: プッショウト おってマ		
Address: 44 36 Fleetwood ha. Sylvania, OH 43566	, , , , ,	
5. If over \$100.00 cumulative, please provide:	1,000	1,300
Occupation Cagineen Employer Jones & Henry		
Business Address 3103 Executive Parkway Juledu ON 43606  Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3-18-14  Name: Cl. fford Gondon		
Address: 3651 Schneider Rd. Toledo, OH 48614	1,000-	1.000-
5. If over \$100.00 cumulative, please provide:		1,000
Occupation engineer Employer Tones & Henry	İ	
Business Address 3/03 6xecu five Pakway Toledo 011 43606  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 3-19-14 Name: Judith Wordelman		
Address: 14321 CRUSS CR. Bowling Green, OH 43402	1000-	7
5. If over \$100.00 cumulative, please provide:	1	a, 000
Occupation Spause OWNER Employer Jones & Henry		
Business Address 3103 6xecu five Parkway Toledo OH 43606 Type of Contribution: Direct  Loan from a person Fund Raiser		
Page Subtotal	\$	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	5,000	and the second s

Enter this total on line 3 of Summary Page.



1. Committee I.D. Number

33520 ff Wright 2000 2. Committee Name\_

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Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 3-25-14  Name: James Peabody		
Address: 1) 195 Foley Rd Fenton, MI 48430	1000-	
5. If over \$100.00 cumulative, please provide:		1,000
Occupation Owner Employer Perbody Insw. Agency		
Business Address 265 N. Alley Fewton, MT 48430  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3-34-14  Name: ARUN dhat: Naik		
Address: 3815 Maple DR. Ypsilanti, MI 48197	2000	1 (10)
5. If over \$100.00 cumulative, please provide:		2,000
Occupation Spouse James Employer STANTEC		
Business Address 3 159 Research fack IR. Awahabe, MT  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3-31-14  Name: Tee Goergen		
Address: 9084 N. Webster Rd. Clis, MI 48430		
5. If over \$100.00 cumulative, please provide:	250 -	550
Occupation Plant Managed Employer WWS		
Business Address \$810 Beechen Rd. Flint, MI		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 3-19-14  Name: Michael Petens		
Address: 7,70 Old LAW FRAN DR. CALEdonia, MT 49316	1000	
5. If over \$100.00 cumulative, please provide:	, , ,	2,000
Occupation engaged FAR here Employer Fish Lock Thumpson CARE Huben		
Business Address 1515 ARBORCHUM DR. GRAND Republic, MT 4854.  Type of Contribution: Direct Loan from a person Fund Raiser	,	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	4,250-	
	<b>6</b>	

Enter this total on fine 3 of Summary Page.

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Committee I.D. Number	3.	3520	
1. Oosanimee i.D. Number	10		
2. Committee Name	Jeff	WRight	2000

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Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 3-19-19  Name: Downld Schenzen  Address: 5470 4mile Rd Bay City, MJ 48706  5. If over \$100.00 cumulative, please provide:  Occupation Employer Spicen Flour	3,000-	2,000
Business Address 305. Washing for Ave Saginal M7 98607  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3-31-14  Name: John Thompson  Address: 4973 Conc 4 RN#3 Handow, Onlario Charda  5. If over \$100.00 cumulative, please provide:  Occupation Sales Ach. Employer Liquid fonce Services  Business Address 28539 Goddard Ste 106 Romalus M3  Type of Contribution: Direct Loan from a person Fund Raiser	1,000-	2,000
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3-36-14  Name: Milea Can field PAC  Address: 150 W. Joffenson Ste 2500 Nethon M3 48226  5. If over \$100.00 cumulative, please provide:  Occupation Employer M. Then Can field  Business Address Same  Type of Contribution: Direct Loan from a person Fund Raiser	4,000	8,000 -
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 4-/-/4 Name: Rec	500-	2,500
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	7,500-	

Enter this total on line 3 of Summary Page.

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#### **ITEMIZED CONTRIBUTIONS** SCHEDULE 1A

**CANDIDATE COMMITTEE** 

1. Committee I.D. Number	23	520	
2. Committee Name	Jeff	Wright	2000

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Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 4-1-14  Name: John Matonich  Address: 540 5. Sag ST Flat M 4853  5. If over \$100.00 cumulative, please provide:  Occupation Owner Employer Rowe Row. Sensices  Business Address Same  Type of Contribution: Direct Loan from a person Fund Raiser  3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 4-1-14  Name: Wasield Cooper III  Address: PO Bux 3 20500 Flint, MT 4853)	900-	3,400
5. If over \$100.00 cumulative, please provide:  Occupation		2000
3. Contribution #3 PAC Receipt? X YES 4. Date of Receipt 4-16-14  Name: UAW V-PAC  Address: 8000 C. Jefferson Defract, MJ  5. If over \$100.00 cumulative, please provide:  Occupation Employer UAW V-CAP  Business Address SAME  Type of Contribution: Direct Loan from a person Fund Raiser	5,000	5,000-
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 4-1-14  Name: Cuneyf Ferzoulof  Address: 5053 N. Long Ave. Chicker, Till 60636  5. If over \$100.00 cumulative, please provide:  Occupation Cuniver Employer A Ecom  Business Address 303 E Wacker Dr. Saik 600 Charge, IL  Type of Contribution: Direct Loan from a person Fund Raiser	500-	1,000
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	7,400	

Enter this total on line 3 of Summary Page.

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1. Committee I.D. Number		<b>Ź</b> Ś	20	10	
	10	11	[a]	Right	2000
Committee Name		1	الريائا	KAAN	$\alpha \cup \cup \cup$

CANDIDATE COMMITTEE		011171111111111111111111111111111111111
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? YES 4. Date of Receipt 4-7-14  Name: JN Bulns  Address: 1660 Wingfield DR. Burningham, AL 35342  5. If over \$100.00 cumulative, please provide:  Occupation Engineera Employer American Pipe  Business Address 091616457 N. Birangham, AL  Type of Contribution: Direct Loan from a person Fund Raiser	1,400	3,400
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 4-7-14  Name: J. Michael O'Bairo  Address: 1305 Fainway View ha, Hooved, Al 35344  5. If over \$100.00 cumulative, please provide:  Occupation Employer A McRicia Pipe  Business Address 3916 1645 ST N. Binnay ham, AL  Type of Contribution: Direct Loan from a person Fund Raiser	1,400	3,400-
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 4-1-14  Name: Kevin Kilby  Address: 1410   Tascola Rd Clio, MI 48436  5. If over \$100.00 cumulative, please provide:  Occupation A Tonney Employer McGan Modais  Business Address 2075 W Rig Between They, MI such 150  Type of Contribution: Direct Loan from a person Fund Raiser	1,000-	2,000
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3-25-14  Name: Paul Galdes  Address: Gaad Rapids, MI 49546  5. If over \$100.00 cumulative, please provide:  Occupation	2,000	2,000
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	5,800-	

Page 11 of 21



1. Comn

mittee I.D. Number		520	
mittee Name	Jeff	Wright	2000

CANDIDATE COMMITTEE 2. Committee Name	Jett (	URight 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? YES 4. Date of Receipt 3-33-14  Name: Rath Goragen  Address: 710 N. Chipman 57. Onussu, M1		
5. If over \$100.00 cumulative, please provide:  Occupation Co-oward Employer Menil Labs Inc  Business Address 3680 E. Lawsing Dr. E. Lawsing, MJ 45833  Type of Contribution: Direct Loan from a person Fund Raiser	250	250-
3. Contribution #2 PAC Receipt? X YES 4. Date of Receipt 2-26-14  Name: Pactessional Service Ind. Inc.  Address: 2350 Kerner Blvd. Saite 250, San Rafael, CA 94901  5. If over \$100.00 cumulative, please provide:  Occupation	450	900-
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3-24-14  Name: BARBARA DAWS  Address: 9 860 E. Shipman Rd Genant, MI  5. If over \$100.00 cumulative, please provide:  Occupation Space - and Employer Glaser Daws  Business Address 4130 Cum Meles Dr. Ste C Flashing MI  Type of Contribution: Direct Loan from a person Fund Raiser	3,000	3,000
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3-38-14  Name: Lawrence 4.35y  Address: 1706 Cedar Knoll (Aro, MI 48733  5. If over \$100.00 cumulative, please provide:  Occupation Sales Rep. Employer ETNA  Business Address 53 9 33 NO 57 5 E G. Kapils MI  Type of Contribution: Direct Loan from a person Fund Raiser	2,000	2,000
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	4,700	

Page 12 of 01



1. Committee I.D. Number \_\_\_

33520

2. Committee Name	Je	FF	WRight	2000
m. Countilities Latitle		2	20 MIGH.	

The state of the s		
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? YES 4. Date of Receipt 3-38-14  Name: Tenni M'Kim  Address: 500 E. Webb Den. II, MI 488%  5. If over \$100.00 cumulative, please provide:  Occupation 510450 5465 Rep. Employer ETNA  Business Address 539 31 ST 5E G. Repids MT  Type of Contribution: Direct Loan from a person Fund Raiser	1,000-	1,000
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3-36-14  Name: She May D'Agastin;  Address: 3) & fond Vallee DR. Onkland MI 48363  5. If over \$100.00 cumulative, please provide:  Occupation Spanse owen Employer D'Ngostin; 2 Sons  Business Address 1580 N, 33 Mile 11. Macan 6, MI  Type of Contribution: Direct Loan from a person Fund Raiser	3,000-	3,000-
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3-38-14  Name: Laigi Robert D'Agostin;  Address: J381 Pond Valler Da. Onkland, MI 48363  5. If over \$100.00 cumulative, please provide:  Occupation	2400-	3,400
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 3-18-14  Name: Time thy Marking  Address: 500 E. Wells Dew.T., MI 48836  5. If over \$100.00 cumulative, please provide:  Occupation Surfes Rep. Employer ETVI  Business Address 509 33 57 5 E. Repids MT  Type of Contribution: Direct Loan from a person Fund Raiser	1,000-	2,000
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	7,400	V

Enter this total on line 3 of Summary Page.

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#### ITEMIZED CONTRIBUTIONS **SCHEDULE 1A**

Committee I.D. Number		33	350			
	(SERENGEN PROPERTY )	1	. /	4	/ 3	 

Vett Wright 2000 2. Committee Name CANDIDATE COMMITTEE Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount 7. Cumulative for middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Election Cycle for Each Committee. (PAC) Report all contributions from committees regardless of amount. Contributor (Through date of receipt) 3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt\_ 3-11-14 Name: John Lannon Address: 216 (Rest Rd Glew Ellyn, IL 60137 5. If over \$100.00 cumulative, please provide: 3. Contribution #2 PAC Receipt? YES 3-28-14 4. Date of Receipt Name: Michael Winegand Address: 25108 Big Hoan Whenton, TL 60187 1,000 5. If over \$100.00 cumulative, please provide: Occupation Crances Employer A E COM

Business Address 303 6. Waska Na. 57e 600 Chicago IL
Type of Contribution: Direct Loan from a person Fund Raiser Loan from a person 3. Contribution #3 PAC Receipt? YES

Name: 5Tephen Walefski 3-27-14 4. Date of Receipt 1003 FRANCES CT NAPERO; Ile, IL 60563 5. If over \$100.00 cumulative, please provide: Occupation evgineed Employer AECOM Business Address 303 E. Wicken Dr. 510 600 Chicago Il Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt\_\_\_\_ 3-28-4 Name: PAlaick Cl. fford Address: 65 47 N. Chicada Ave Chicago, Tl 60646 1,000 5. If over \$100.00 cumulative, please provide: engineed Employer A E COM Occupation Business Address 303 E. Warker Type of Contribution: X Direct Loan from a person Page Subtotal 3,500 Grand Total of All Schedules 1A

(Complete on last page of Schedule)

Page II of



#### **ITEMIZED CONTRIBUTIONS** SCHEDULE 1A

1. Committee I.D. Number

2. Committee Name

33520 Jeff Wright 2000

CANDIDATE CONNINT I TEE	<u> </u>	
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? YES 4. Date of Receipt 3-17-14  Name: MARCAS Lyons  Address: 1) 1 E. Edge wood DR. BIRMINGham, AL 35209		
5. If over \$100.00 cumulative, please provide:  Occupation	1,000	1,200
Business Address 3916 16 57. N B. Amagha, AL  Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser	1700	(place for 141)
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3-38-14  Name: Blake Enventual		
Address: PO Box 550 ORtowville, MJ 48462		
5. If over \$100.00 cumulative, please provide:  Occupation 5 Rep Employer Mercino  Business Address 10160 E. Coldwarer Rd.   Moreson, Met	1,500	1,500
Type of Contribution: Direct Loan from a person Fund Raiser  3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3-28-14		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3-28-14  Name: Thomas Beau champ  Address: 6276 Lake Waldow Pa Clarks for MJ  5. If over \$100.00 cumulative, please provide:  Occupation Swles Ref. Employer Meacino	1,500	1,500
Business Address 1016 & Cold Walth Ad Morison M7  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3-28-14  Name: Daviel Potter		
Address: 4468 Maple Loaf DR. Grand Blane, MJ 48439  5. If over \$100.00 cumulative, please provide:  Occupation	1,000	2,000-
Page Subtotal  Grand Total of All Schedules 1A  (Complete on last page of Schedule)	5,000-	/
·		

Enter this total on line 3 of Summary Page.

Page 15 of 31



1. Committee I.D. Number	25	JUU	
2. Committee Name	Jeff	Wright	2000

E CONTRACTOR OF THE CONTRACTOR		
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? YES 4. Date of Receipt 3-38-14  Name: STACY Balls le  Address: 829 HAR COURT FROSSE Point M 48330  5. If over \$100.00 cumulative, please provide:  Occupation ATTORNY Employer M GARN - NOARIS  Business Address 2075 W Big Berman Tray MT Sack 750  Type of Contribution: Direct Loan from a person Fund Raiser  3. Contribution #2 PAC Receipt? YES 4 Date of Receipt 3-25-14	1,000	1,000-
Name: Jan Hausea  Address: 5 ) 9 John R M. Thand, MT 48 381  5. If over \$100.00 cumulative, please provide:  Occupation	1,000-	1,500 -
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3-37-14  Name: Richard Mank  Address: Po Box 3948 Flint MI 4850 1  5. If over \$100.00 cumulative, please provide:  Occupation Employer ROWC  Business Address 540 5. Sing Suite doo Flint MI  Type of Contribution: Direct Loan from a person Fund Raiser	600-	3, 100 - (see priva pg 9)
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 3-6-14  Name: Nicholas Lomako  Address: Julsy Edgewood Ave Livenia, MT 4815)  5. If over \$100.00 cumulative, please provide:  Occupation Engloyer Wade Tain  Business Address 540 5. Sag. 51e dou Fl.M., MT  Type of Contribution: Direct Loan from a person Fund Raiser	1,000	1,500
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	3,600-	/

Page 16 of d1



1. Committee i.D. Number

33520

Wright 2000 2. Committee Name CANDIDATE COMMITTEE Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount 7. Cumulative for middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Election Cycle for Each Committee. (PAC) Report all contributions from committees regardless of amount. Contributor (Through date of receipt) 3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt Name: David Anthony 517 S. Melboan ST Denahona, MJ 4124 5/00-5. If over \$100.00 cumulative, please provide: engineer\_\_\_\_Employer\_\_\_ Occupation 5. Sing 57. Business Address \_\_\_555 Type of Contribution: X Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 3-19-14 4. Date of Receipt Name: STEVEN KALINOWSKI Address: 2 1 617 Huran River Dr. New Boston, MJ 48164 5. If over \$100.00 cumulative, please provide: Occupation engloyer Employer 500 Abour Business Address \_\_\_\_ Type of Contribution: M Direct Loan from a person Fund Raiser 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt David Dioset Ru 5968 Emerald Lakes DR. Median OH 5. If over \$100.00 cumulative, please provide: \_\_\_Employer\_ Wade Thim Occupation \_\_\_\_\_\_ Business Address 5 Ahour Type of Contribution: Direct Loan from a person Fund Raiser PAC Receipt? YES 3. Contribution #4 4. Date of Receipt 3-6-14 Name: Farok Tymowski Address: 16798 Basoklame Blud. Noethille, MI 48168

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

Fund Raiser

Employer\_ Wade - Trim

MOGVE

Loan from a person

2,000-

500-

Page 17 of 21

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

500

Occupation ENGINEEL

Type of Contribution: Direct

**Business Address** 



1. Committee I.D. Number \_\_\_\_\_

33520

CANDIDATE COMMITTEE 2. Committee Name	0 ( ) 1 (	UKIGHI QUUU
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? YES 4. Date of Receipt 3-18-14  Name: Jack Doheny Address: PO Box GOG Northolle, MI 48167  5. If over \$100.00 cumulative, please provide:  Occupation Owner Employer Doheney Co.  Business Address 777 Poleny CJ. Northolle MI 48167  Type of Contribution: Direct Loan from a person Fund Raiser	1,000	1,000-
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 2-7-14  Name: BAAd 5_n ckeTl  Address: 78 52 Denns Hill Rd Bennier Ceden MT 49103  5. If over \$100.00 cumulative, please provide:  OccupationEmployer  Business Address  Type of Contribution: DirectLoan from a personFund Raiser	100-	100-
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 2-11-14  Name: CRAig Sheefs  Address: 6035 Washbara Rd Beakley, 04 43509  5. If over \$100.00 cumulative, please provide:  OccupationEmployer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	100-	100-
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 2-10-14  Name: Thraesa Pollach  Address: 251) Chestodat Ciacle Bloomfield Hills, MI 48304	100	100

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

Fund Raiser

1,300 -

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Business Address

Type of Contribution: X Direct

Loan from a person



1. Committee I.D. Number

33520 Jeff Wright 2000 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? YES 4. Date of Receipt 3-6-19  Name: And Rew McCane  Address: 985 Colony Cond Spline M3 48/11C  5. If over \$100.00 cumulative, please provide:  Occupation Employer Whade Jaim  Business Address 555 5. Sa 57. Sa 4 201 Flort M4  Type of Contribution: Direct Loan from a person Fund Raiser	1,000-	1,500-
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3-14-14  Name: MAK Coleman  Address: 3) 694 Beech ST Denabura, MI 48134  5. If over \$100.00 cumulative, please provide:  Occupation Employer Wake Jain  Business Address See Above  Type of Contribution: Direct Loan from a person Fund Raiser	1,000	1,500-
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 2-17-14  Name: Kevin Krause  Address: 11 17 53 5, New Spains Da. Dew. 11, MT 48836  5. If over \$100.00 cumulative, please provide:  Occupation	100-	100-
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 2-13-14  Name: Chaistophea M COY  Address: 9034 Wood Jule Suit ( Na Ply mouth, MT 48170)  5. If over \$100.00 cumulative, please provide:  OccupationEmployer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	100-	100-
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	2,200-	

Enter this total on line 3 of Summary Page.

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1. Committee I.D. Number	23	1520	
2. Committee Name	Jeff	Wright	2000

OFFICER F. Book Eng		
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? YES 4. Date of Receipt 3-17-14  Name: Kelly Shewlow  Address: 9033 The fields M. Dublin, OH 43617  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	100-	100-
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3 - 17 - 14  Name: Gail Stustea  Address: 59 33 Rulling Pines C7. Kala mazon M7  5. If over \$100.00 cumulative, please provide:  OccupationEmployer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	100-	100-
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3-11-14  Name: Roger Spurgeon  Address: 7 6 33 Bur I in Hills CT. Concount of 95344  5. If over \$100.00 cumulative, please provide:  Occupation	100-	100-
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt	100-	100
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	400 -	

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1. Committee I.D. Number	33	520	
		11 = 16	1000
2. Committee Name	Jett	WRight	0000

CANDIDATE COMMITTEE 2. COMMITTEE		UN1941. 0000
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? YES 4. Date of Receipt 3-34-14  Name: CAROLYN VIRKUS  Address: 6440 Healtha field Ol. E. Lassing, MJ  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	100-	100
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3-23-14  Name: FRed Shalt3  Address: 1 Lighthease Painte Fenton, MI 48436  5. If over \$100.00 cumulative, please provide:  Occupation Owner Employer Delta Land Survey & Grag.  Business Address 6060 To Ray Ru. STe A Flish Mt  Type of Contribution: Direct Loan from a person Fund Raiser	500-	1,000-
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3-38-14  Name: Thomas Washabaugh  Address: 233 Athlowe Beach Bay City, MT 48706  5. If over \$100.00 cumulative, please provide:  Occupation	2,000-	3,000 -
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt Name:  Address:  5. If over \$100.00 cumulative, please provide:  Occupation	J.600	

Enter this total on line 3 of Summary Page.

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# ITEMIZED EXPENDITURES SCHEDULE 1B

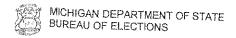
1. Committee I. D. Number 33500

CANDIDATE COMMITTEE	2. Committee Name <u>Jeff WR</u>	ight 2000
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date 6. Amount
Expenditure #1  Name Refuge Temple Church of Flint  Address 4400 W. Chapenka Rd.	Purpose: Downtion	1-31-14 \$ 500°
Flix, MT 48504  [Fund Raiser  Expenditure #2	Check box if this expenditure is payme debt or obligation reported on previous statement	Click Here for Memo Itemization Type nt of
Name Genesee Health System  Address 400 W. Fifth Ave.  Flint, MI 48503	Purpose: Down tion	Date \$ 1,000
Fund Raiser Expenditure #3	Check box if this expenditure is paymer debt or obligation reported on previous statement	
Name MI Pera ocardic Party Address 606 Town Send	Purpose: Membership	1-38-14 s 40 - Date
Fund Raiser Expenditure #4  Hame Flist River Wakeshed Coal, tion	Check box if this expenditure is payment debt or obligation reported on previous statement	of
ddress 400 N. Saginar Suite 333  Flint, MJ 48502	Purpose: Nontion	J-7-14 \$ 1,000
Fund Raiser	Clic Check box if this expenditure is payment debt or obligation reported on previous statement	k Here for Memo Itemization Type of
ame US Postoffica  Idress Flist Southwest  48532	Purpose: Office expense	2-17-14 s 98
Fund Raiser	Click Check box if this expenditure is payment of debt or obligation reported on previous statement	r Here for Memo Itemization Type f
		total this page 2, 638-
	Grand Total of al	Schedules 1B

(Complete on last page of Schedule)

Enter this total on line 8a of Summary Page

Page  $\int$  of 8



# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 33500

CYADIDATE COMMITTEE	2. Committee Name Jeff WR	ight 2000
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date 6. Amount
Expenditure #1		
Name Big Brothers - Big Sisters Address 40 E. Second ST	Purpose: DONAtion	<u>3-31-14</u> \$ <u>350</u>
Flind MI	Check box if this expenditure is payme debt or obligation reported on previous statement	Click Here for Memo Itemization Type
Name Committee to Elect Sheldow A Address 2305 Bogolo ST	······································	<del>2-37-14</del> \$ 100
Flint, MI 48504  Fund Raiser  Expenditure #3	Check box if this expenditure is paymen debt or obligation reported on previous statement	lick Here for Memo Itemization Type
ddress PO Box 130	Purpose: Downstan	3-7-14 s 185
Bry City, MI 48707  Fund Raiser  Spenditure #4	Check box if this expenditure is payment debt or obligation reported on previous statement	ck Here for Memo Itemization Type of
me All Safe Storage dress 1320 N. Belsay Rd. 134 Rton, MI 48509	Purpose: office 6 xpanse	3-7-14 s 336
Fund Raiser	Click Check box if this expenditure is payment of debt or obligation reported on previous statement	K Here for Memo Itemization Type
ress 408 5. Center Rd. Flint, MI 48506	Purpose: Fund Raison 6xp.	3-J1-14 \$ 926 46
Fint, MI 48506	Click Check box if this expenditure is payment of debt or obligation reported on previous statement	Here for Memo Itemization Type

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

1,797,40

Enter this total on line 8a of Summary Page

Page **J** of <u>8</u>



# SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 33520

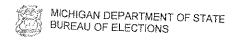
Toff 1/0:4+ 1000

3 View	2. Committee Name Jett WKI9117 JUC	10
Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. Date	6. Amount
Expenditure #1		
Name by Imprint Inc.	2-361-10	1 3 - 289
	Purpose: Fund Raiser Exp. Date	1 \$ <u>057 8"</u>
Address 101 Commerce 5T	Purpose:	
O sh Kosh, W I 54901	Click Here for Memo	Itemization Type
YFund Raiser	Check box if this expenditure is payment of	
Expenditure #2	debt or obligation reported on previous statement	
Grader Mountain	3-25/4	11/2084
Address 5038 Miller Rd	Purpose: Fund RaiseR Ext. Date	\$ <u>4,629</u> 89
	Pulpose. Tand Prinisms Off.	
Flint, MI	Click Here for Memo (	temization Type
	Check box if this expenditure is payment of	
Fund Raiser Expenditure #3	debt or obligation reported on previous statement	
Name Construction Fisteners	2.17.11	311.83
Address 2120 KANSAS	Purpose: Fand Roisen Exp Date	s 240 83
	Purpose: 1 WALD NOTSELL CRY	·
Flind, MI	Click Here for Memo Ite	emization Type
X Fund Raiser	L_ICheck box if this expenditure is payment of debt or obligation reported on previous	
Expenditure #4	statement	
Name Graden Mountain		
	3-31-14	s 500
Address 5308 Miller Rd.	Purpose: Fund Raisen Exp. 3-31-14	\$ 200
por 1 male	1 stp. 500 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Flint, MI	Click Here for Memo Itel	mization Type
Fund Raiser	Check box if this expenditure is payment of	1
	debt or obligation reported on previous statement	
Expenditure #5 Name 1		
Name Norton Male Chorus		
Address The Whiting	Purpose: <u>Sponson</u> Abuntion Date	\$ 700 T
Flint, MI		
1 some / help	Click Here for Memo Item Check box if this expenditure is payment of	ization Type
Fund Raiser	debt or obligation reported on previous	
	statement	
	Subtotal this page	1000

Page 3 of 8

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

6538.54

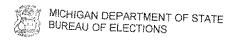


#### ITEMIZED EXPENDITURES SCHEDULE 1B

1. Committee I. D. Number 33500

CANDIDATE COMMITTEE	2. Committee Name Jeff WRI	ight 2000
Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date 6. Amount
Expenditure #1	Andrew June 1997	
Name O Regow Knife		// 1///
	- 10 - 1	4-44 \$684
Address 2906 Clove land Ave.	Purpose: Fund RAISER EXP.	Date
		lick Horn for Manny Hamile Live To
MARINOTE, WISH 143	- I property	lick Here for Memo Itemization Typ
Y Fund Raiser	Check box if this expenditure is paymen debt or obligation reported on previous	t of
xpenditure #2	statement	
· · · · · ·		
Name The Hundsman Hunt Club		4 10 111
		<u>4-10-14</u> \$ 33, 78
ddress 3166 Havens Rd.	Purpose: Fund Rusen Exp.	Date
Daydon, MI 48428		
W " Y MON, 1" 1 48438	Clic	ck Here for Memo Itemization Type
	Check box if this expenditure is payment	of
⊈ Fund Raiser	debt or obligation reported on previous statement	
openditure #3	7-314313	
me ST. FRANCES PRAYER CENTER		
		4-16-14 : 300
ress 1227 E. BRISTOLRd	Purpose: DANA Gan	
•	8000001111000	
Burton, MI	Click	Here for Memo Itemization Type
*	Check box if this expenditure is payment o	f
Fund Raiser	debt or obligation reported on previous statement	•
enditure #4		
· BANKU AMERICA		
	Service to e Purpose: Bounced Check	5-7-14 25-
ess POBox 15284	Pumose: Brunes of Charle	Date 5 22
1.11 1 15	Downwell Cuch	
Wilmington, DE, 19850	Click I	lere for Memo Itemization Type
	Check box if this expenditure is payment of	
und Raiser	dent of obligation reported on previous	•
diture #5	statement	
Boulk of America		
Bank of America  ss same as above	11:00	2 14.111
58 5 8 9 9 9 9	uffice Gx1. Purpose: <u>Ordered</u> Checks	3-20-14 \$ 23 -
JAME NE PROVE	ruipose: Okacks	Date
The second secon	Click H	ere for Memo Itemization Type
ă	Onoi())	or or mouse treating arioti TAbe
	Check box if this expenditure is payment of	
nd Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	

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



# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 33500

CANDIDATE COMMITTEE	2. Committee NameJeff WR	ight 2000
Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date 6. Amount
Expenditure #1		
Name Flint Inter-City JA. Folf Address	Purpose: Danation	<u>4-8-14</u> s <u>200</u>
		Click Here for Memo Itemization Ty
Fund Raiser Expenditure #2	Check box if this expenditure is payment debt or obligation reported on previous statement	
Name WFL T  ddress 317 5. Adexill	Purpose: Danafidi	<u>4-)5-14</u> \$ 100
Flist, MI		
	Cli	ick Here for Memo Itemization Typ
Fund Raiser	Check box if this expenditure is payment debt or obligation reported on previous statement	t of
ime Jamet Her wander		
dress 6147 SANCTUARY Pt. PA.	Purpose: office Exp.	4-35-14 s 250
GRAND Blanc, MJ48439		k Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment a debt or obligation reported on previous statement	of
ress 1940 Atherton Rd. Flont, MI	Purpose: Danation	5-19-14 s 540
Fund Raiser  nditure #5	Click Check box if this expenditure is payment of debt or obligation reported on previous statement	Here for Memo Itemization Type
June toonthe Youth Comm.	Dragation !	5-21-14 \$ 125
nd Raiser	Purpose: Click i Check box if this expenditure is payment of debt or obligation reported on previous statement	Date
	statement	tal this page   1 à 15 °

(Complete on last page of Schedule)

Enter this total on line 8a of Summary Page

Page <u>5</u> of 8



# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 33500

CAMDIDATE COMMITTEE	2. Committee Name Jeff WR	ight 2000
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date 6. Amount
Expenditure #1		
Name 5 TACY ERWIN OAKS for Sen Address PO Box 1584	rule Purpose: DONATION	6-6-14 s 100
SAGINAW, MI 48605	(	 Click Here for Memo Itemization Typ
- 48605	process	•
Fund Raiser Expenditure #2	Check box if this expenditure is payment debt or obligation reported on previous statement	nt of
Name Support of Omm Simms		6-7-14 s 100
Address PO Box 13400	Purpose: Down tim	* \$
Flint, Mt 48501	Ci	ck Here for Memo Itemization Typ
<del></del>	Check box if this expenditure is payment	of
Fund Raiser	debt or obligation reported on previous statement	. 01
expenditure #3		
ame John Northanp Elect. Committees 2549 Thomas ST	Purpose: DONA FION	6-7-14 \$ 100
	Pulpose:	Date
Floor MT 48504	Clic	k Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment	of
	debt or obligation reported on previous statement	
ne FRIENDS of Peggy Adams	0 /	6-7-14 s 100
1ress 6278 N. Oak Rd.	Purpose: DONA flow	Date \$ 100
DAVISON MI HOUS		Hann for Mr. 10
48403	grandeling	Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment or debt or obligation reported on previous	f
nditure #5	statement	
MIO-MI Sports worke 139 W. V. ening Rd	Purpose: Election Fundaison e	6-9-Kl \$ 150°
Clio, MI 48426	Click	/- Here for Memo Itemization Type
und Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	,, ,

Subtotal this page

550

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

Enter this total on line 8a of Summary Page

Page <u>6</u> of <u>8</u>



# SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 33500

CANDIDATE COMMITTEE	2. Committee Name Jeff WRi	aht 2)000
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date 6. Amount
Expenditure #1  Name FOP hodge #1dC  Address POBox 1738	Purpose: Donation	5-9-14 \$ 135 T
Flint, MI 48507  [ Fund Raiser  Expenditure #2	Check box if this expenditure is payment debt or obligation reported on previous statement	ck Here for Memo Itemization Type of
Name Genesee Co. Pen. Party  Address PO Box 957  Flint MI 48503	Purpose: Sponson - Golf  Clic  Check box if this expenditure is payment of debt or obligation reported on previous	6-11-14 \$ 1500 - A second of Second S
Expenditure #3  Name FRIENDS of hours Daiskell  Address Union fring  N. Sag ST  Fund Raiser Flint, MI	Purpose: Donation	6-13-14 s 150 - Date  Here for Memo Itemization Type
Expenditure #4 Name 5 Am Puncan Momorial Address Scholaship  1940 Atherton Rd.  Flint, MI  Fund Raiser	Purpose: Down from  Click F  Check box if this expenditure is payment of debt or obligation reported on previous statement	Date \$ 200
Name Friends of Bryand Nolden  Address 5190 Highwood Pr.  Flint, MI 48504  Fund Raiser	Purpose: Click H Check box if this expenditure is payment of debt or obligation reported on previous statement	G-17-14 \$ 100 -  Date  ere for Memo Itemization Type

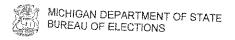
Subtotal this page

2075

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

Enter this total on line 8a of Summary Page

Page  $10^{-1}$  of  $8^{-1}$ 



# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

Teff WRIGHT 1000

C) N.I.	2. Committee Name JETT VX19	11 2000
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date 6. Amount
Expenditure #1		
Name Glew brien Golf Course - 48	w	6-24-14 \$ 1000
Address 4178 W Locke Rd.	Purpose: Dorn from	Date
PERRY, MI 48877	Click	Here for Memo Itemization Type
Fund Raiser Expenditure #2	Check box if this expenditure is payment of debt or obligation reported on previous statement	f
Name WFLT		
Address 317 5. Avenil/	Purpose: Donation	7-/-/4 \$ 100 =
Flint MI	Click	Here for Memo Itemization Type
Fund Raiser Expenditure #3	Check box if this expenditure is payment of debt or obligation reported on previous statement	
Name DONNA POPLAR - Community		
Address Education	Purpose: Down from	7-14-14 \$ 600
	Click H	ere for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous	
Expenditure #4	statement	
Address 4476 5. Port Huy.	D /	7-14-14 s 250 -
•	Purpose: VUNATION	Date
Burton, MJ 48529	Prometog	re for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	
xpenditure #5		
Name		
Address	Purpose:	Date \$
	Click Hen	e for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	,,,,
	Subtatali	this name is a second second

Subtotal this page

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

57,738.47

Enter this total on line 8a of Summary Page

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#### FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number 335dO

2. Committee Name Teff Waight 2000

	- USE A SEPARATE SH	EET FOR EACH EVENT	-
3. Date Event Was Held  3 - 28 - 2014  Month Day Year	4. Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held than to the place where the activity was held than to the place of the place o
7. Total Contributions	91,55	0	
8. Other Receipts		TP 4741 MAX	
9. Gross Receipts (Add lines 7	and 8) 91, 55	0	
10. Total Cost of Event (Total Cost includes In-Kind Coand All Expenditures Made Fo	ontributions or the Event)	31.47	
Co-Sponsor(s)	oint fund raiser and complete the Contribution S (%)		Expenditure Split (%)
***************************************			
		**************************************	<u></u>
	<del> </del>	***************************************	
		·····	
• The committee is require	red to file a separate Fund Raise	Schedule for each fund raisin	g event held during the
<ul> <li>period covered by the C</li> <li>Receipts and expenditu</li> <li>Schedule (1A), Itemized</li> <li>Summary Page.</li> </ul>	vampaign Statement. res listed on a Fund Raiser Sche I In-Kind Contributions Schedule	dule must also be reported on (1-IK), Itemized Expenditures	the Itemized Contributions Schedule (1B) and the
	rticipated in a joint fund raiser m	ust file a Fund Raiser Schedule	e for the event.
Page of			