



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

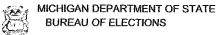
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and c	d signed by andidate.	3. This Statement covers Fron	n: 08/20/17		10/20/17	
1. Committee I.D. Number	***************************************	4. Candidate Last Name		rst Name		M.I.
379		Kincaid	Willian	n		S
2. Committee Name		4a. Office Sought Including Dis	strict# or Commur	nity Serve	d (If applicabl	
Committee to Elect Scott Kincaid	Mayor	4b. County of Residence GE	NESEE	[-]		kanal
5. Committee's Mailing Address 349 Bede St Flint MI 48507		6. Treasurer's Name & Reside Joshua M Freeman 8275 Faulkner Dr Davison MI 48423		Emercial Control of the Control of t		
Area Code and Phone (810) 742-4375 If the address in this box is different from the commailing address on the Statement of Organization, be sent to this address by the filing official.	iittee mail may	Area Code & Phone (810) 3	97-3797	999 50 50 507 507 500 500	for the city of th	v ·
7. Treasurer's Business Address 1101 Beach St Flint MI 48502		8. Designated Record keeper Designated Record keeper)	's Name and Maili	ng Addres	es (Pine com T 	nittee has a
Area Code and Phone (810) 762-7762		Area Code and Phone				
9. TYPE OF STATEMENT		Area code and Fibrie	9e. Dissolution	of Candi	date Commi	tiee
9a. Pre-Election OR 9b. Post-Election Pre-Election or Post-Election Statement relates to:	Required ON is not on the current year:		by the committee	to the ca d forgiver he comm	indidate or his n, and no long nittee has no d	any outstanding debt s or her spouse is here ger collectible from oustanding assets,
Primary			Owes no lates lee	SUI Has e	my oustanoin	g debt.
General Convention	October Q	warterly	Further, if the diss considered a requ	solution ca lest for the	annot be gran e Reporting V	ited, that this be Vaiver.
Special School	9c. Annua	al Statement () Coverage Year	Effectiv	e date of	dissolution	
Caucus	(Comp	dment to Campaign Statement plete Item 9a, 9b, 9c or 9e to te which Statement is being ded.)	Note: The dispos Schedule 1B and			must be reported on
Date of Election, Convention or Caucus	· -		dan province			
11/07/17						
10. Verification: I\We certify that all reasonable dilige my\our knowledge and belief the contents are true, a	ence was used	in the preparation of this stateme	ent and attached s	chedules	(if any) and to	the best of
Current Treasurer or Designated Record keeper Type or Print Name		i Muilf MM Signature	ml_	— Date	10/	23/17
Candidate William S Kincaid		Willen 2 4 -	wend	Date	101-	23/17
Type or Print Name	***************************************	Signature				/ / / / / / / / / / / / / / / / / / / /

1. Committee I.D. Number 379

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name COMMITTEE TO ELECT SCOTT KINCAID MAYOR

RECEIPTS	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	_(3a.) \$ 78,395.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$_\$78,395.00	(18.) \$ \$78,395.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$0.00	(19.)\$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$78,395.00	(20.) \$ \$78,395.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		REMARKAL A CASA
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$1,879.84	(21.) \$ \$1,879.84
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$0.00	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$9,863.61	MO. C.
b. Itemízed Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ \$0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$9,863.61	(23.) \$ \$9,863.61
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$ \$0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.)\$ \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ \$0.00	(24.) \$ \$0.00
DEBTS AND OBLIGATIONS	(11.)	(24.) 4
12. Debts and Obligations a. Owed by the Committee (Schedule 1E)	(12a.) \$ _\$3,750.00	
b. Owed to the Committee (Schedule 1E)	(12b.)\$ \$0.00	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ \$0.00	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$ \$78,395.00	
(Line 5, Total Contributions & Other Receipts)	(15.) = \$ \$78,395.00	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period		
(Add lines 9 and 11)	(16.) - \$ \$9,863.61	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$68,531.39	*

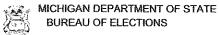


CANDIDATE COMMITTEE

1. Committee I.D. Number 379

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 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 09/27/17 Name & Address: Connie S Arnould 2152 White Eagle Pass Swartz Creek MI 48473	60.00°،	§ 60.00
5. If over \$100.00 cumulative, please provide:	3	
Occupation Employer	Click Here f	or Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address		
Heather Kale 520 Kensington AVe Flint MI 48503	_{\$} 30.00	§ 30.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address:		
Claudia S Mach 814 S Vernon Ave Flint MI 48503	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
OccupationEmployer		Banada Araba A
Business Address		12200
Type of Contribution: Direct Loan from a person 🗸 Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address		- Activity Comments
William J Metcalfe Jr 5500 Woodfield Ct Grand Blanc MI 48439	_{\$} 35.00	_{\$} 35.00
5. If over \$100.00 cumulative, please provide:	Cliak Hara for	Mana
Occupation Employer	Click here for	Memo Itemization ▼
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		**Contraction
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page of	\$175.00 Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number _

379	Ì

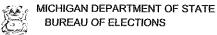
2. Committee Name

Committee to Elect Scott Kincaid Mayor

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 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 09/27/17 Name & Address: William J Kincaid 4507 Ogema Ave		
Flint MI 48507	_s 1000.00	_{\$} 1000.00
5. If over \$100.00 cumulative, please provide:		
Occupation retired Employer	Click Here to	or Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person 🐓 Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address		
David Leyton Committee	00.00	~~ ~~
PO Box 320349 Flint MI 48532	\$30.00	§ 30.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		I3
Business Address		i in
Type of Contribution: Direct Loan from a person Fund Raiser		en e
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address:		
We Grow Flint Mi		
11 Croxton Ave.	_{\$} 2000.00	_s 2000.00
Oakland CA 94611	08-1-11	
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		THE CONTRACT OF THE CONTRACT O
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
		androma recorded participation of the contraction o
Name & Address		
Matthew Norwood 503 S Saginaw St	400.00	
Flint MI 48502	<u>\$100.00</u>	<u>\$ 100.00</u>
5. If over \$100.00 cumulative, please provide:	Olimie i Inna fan	8.6
Occupation Attorney Employer Self	. Olick here for	Memo Itemization
Business Address Same		
Type of Contribution: Direct Loan from a person V Fund Raiser		
Page Subtot	al \$3,130.00	- The state of the
Grand Total of All Schedules 1/ (Complete on last page of Schedule		
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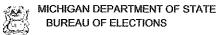
CANDIDATE COMMITTEE

1. Committee I.D. Number 379

2. Committee Name

Page.

Enter contributor's name and address. If contribution is from an indiv middle initial. Check box to indicate if contribution is from a Political Committee (PAC) Report all contributions regardless of amount.	ridual, o Commi	enter last name, first name, ttee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Name & Address: David Cox 1064 Royal Crest	Recei	ot 09/27/17		
Flint MI 48532			_{\$} 30.00	_{\$} 30.00
5. If over \$100.00 cumulative, please provide:			Clink Harn 6	
Occupation Employer			Click Here i	or Memo Itemization
Business Address	Forms			
Type of Contribution: Direct Loan from a person	V	Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Name & Address	Receip	ot 09/27/17	TO A SHARE THE PROPERTY OF T	A STATE OF THE STA
Christopher Zuwala 3510 Whittier Ave Flint MI 48506			_{\$} 35.00	_{\$} 35.00
5. If over \$100.00 cumulative, please provide:			Click Here fo	or Memo Itemization
OccupationEmployer				
Business Address				
Type of Contribution: Direct Loan from a person	6 /	Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of	Recei	^{pt} 09/27/17		
Name & Address: John West Jr				
3314 Dearborn St			_{\$} 35.00	_{\$} 35.00
Flint MI 48507				
5. If over \$100.00 cumulative, please provide:			Click Here for	Memo Itemization
Occupation Employer				PERMIT
Business Address				to Commence of the Commence of
Type of Contribution: Direct Loan from a person	6	Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Name & Address	f Recei	ipt 09/27/17		A. A
Michael Zuwala				O CONTRACTOR OF THE CONTRACTOR
3510 Whittier Ave Flint MI 48506			_{\$} 35.00	_{\$} _35.00
5. If over \$100.00 cumulative, please provide:			0	
Occupation Employer			Click Here for	Memo Itemization 🔻
Business Address				and the state of t
Type of Contribution: Direct Loan from a person	V	Fund Raiser		
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CANDIDATE COMMITTEE

1. Committee I.D. Number

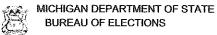
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Committee to Elect Scott Kincaid Mayor

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address: Terry Bankert 2012 E Court St Flint MI 48503	_ \$500.00	_s 500.00
	\$000.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation attorney Employer Self		Louis .
Business Address 1000 Beach St Flint MI 48502 Type of Contribution: Direct Loan from a person Fund Raiser		
Type of Contribution: Direct Loan from a person Fund Raiser Loan from a person Fund Raiser PAC Receipt? YES 4. Date of Receipt 09/27/17		
Name & Address		
Friends of Bryant Nolden 754 E Bundy Ave Flint MI 48505-2229	§30.00	ş 30.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization 🔻
Occupation Employer		!3
Business Address		
Type of Contribution: Direct Loan from a person 📝 Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address:		
Emily Doerr 23752 Grove St St Clair Shores MI 48080	§30.00	_{\$} 30.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
m. I		<u>€</u>
Occupation Employer Business Address		**************************************
Type of Contribution: Direct Loan from a person 📝 Fund Raiser		GO-CAPA PROPERTY.
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address	któruminn) di Camara Mariania de Armanda (planta de principa de principa de Sancia de	
Teresa A Knight 9508 Fenwin Dr Grand Blanc MI 48439	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here for	Memo Itemization
Business Address		renamentificien
Type of Contribution: Direct Loan from a person Fund Raiser		encia alayenna
Page Subtot	^{al} \$610.00	
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CANDIDATE COMMITTEE

1. Committee I.D. Number __379

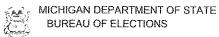
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Committee to Elect Scott Kincaid Mayor

Enter contributor's name and address. If contribution is from an individual, enter last name, indide initial. Check box to indicate if contribution is from a Political Committee or an Indeper Committee (PAC) Report all contributions regardless of amount.	irst name, 6. Amount 7. Cumulativ endent Election Cyc Contributor (date of recei	de for Each (Through
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address: Michael Griffin		
717 Blanchard Ave	25.00 25	$\cap \cap$
Flint MI 48503	_{\$} 35.00 _{\$} 35.	<u> </u>
5. If over \$100.00 cumulative, please provide:	Chat Have for Marie Have	e. []
Occupation Employer	Click Here for Memo Item	nization 🔪
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address		COMMERCIAL INCOMESSAGE AND ADDRESS OF THE SECOND PROPERTY OF THE SEC
Scott Pifer 8341 E Holly RD Holly MI 48439	_{\$} 200.00 _{\$} 200.	.00
5. If over \$100.00 cumulative, please provide:	Click Hara for Mama Itam	.i-nei [-]
Occupation attorney Employer self	Click Here for Memo Item	nzation[*]
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/27/17		
Name & Address: ———————————————————————————————————		
1302 Blanchard Ave Flint MI 48503-5366	_{\$} 35.00 _{\$} 35.0)0
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemi	zation
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Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YEC 4. Date of Newsigh 00/27/17 Name & Address		
Laura Kincaid		The state of the s
6375 S Elmo Rd	.250.00 .250	.00
Swartz Creek MI 48473	\$	
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemi:	zation 🕶
Occupation Business Owner Employer Kincaid Construction	Tokan oran Autoria Bankalaininga	أسمد
Business Address Same		r paragraphy and a second
Type of Contribution Fund Raiser	-	
P	ago Cuttotal \$520.00	REPORT AND A CONTRACT OF THE PARTY OF THE PA
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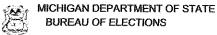


CANDIDATE COMMITTEE

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 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 09/27/17 Name & Address: Peter Bade		
503 S Saginaw St Flint MI 48502	_{\$} 30.00	_{\$} 30.00
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer	Click Here fo	or Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address	ur alla kaki kaki kaki angangan kakan sa katan sa katan kaki angan kaki katan kaki sa katan sa katan sa katan s	A TANAN CATA CITE TO THE TANAN AND THE PARTY AND
Bruce Leach 4025 E Hill Rd Grand Blanc MI 48439	_{\$} 2000.00	_{\$} 2000.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation attorney Employer self		
Business Address Same		out and writing con-
Type of Contribution: Direct Loan from a person Fund Raiser		n. eriniyyyyyy
Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address:		
Joe Massey 2272 Lake Ridge Dr Grand Blanc MI 48439	\$30.00	§ 30.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		T (F) volument
Business Address		A LANGE
Type of Contribution: Direct Loan from a person 🗸 Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address William Shedd		The state of the s
5121 Flushing Rd Flushing MI 48433	_{\$} 1000.00	_{\$} _1000.00
5. If over \$100.00 cumulative, please provide:	Olivia I kana da	
Occupation attorney Employer Self	Click Here for	Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser		
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Grand Total of All Schedules 1A (Complete on last page of Schedule)		
Page V of Al	Enter this total on line 3a of Summary Page.	



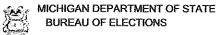
CANDIDATE COMMITTEE

1. Committee I.D. Number 37

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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 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 09/27/17 Name & Address: Sherry Hayden 813 Maxine St Flint MI 48503-5317	_{\$} 60.00	_{\$} 60.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here fo	or Memo Itemization *
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address		
Barry Wolf 8386 Old Plank Rd Grand Blanc Mi 48439	<u>\$150.00</u>	_{\$} 150.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation attorney Employer self		
Business Address 503 Saginaw St Flint MI 48502		
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address:		
Jack Minore 610 Commonwealth Ave Flint MI 48503	\$30.00	§ 30.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization 💌
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address		
William D Fuller 927 Kensington Ave Flint MI 48503	_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:	Cliatellana	
Occupation retired Employer	Click Here for	Memo Itemization ▼
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$740.00 Enter this total on line 3a of Summary	
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CANDIDATE COMMITTEE

1. Committee I.D. Number

379

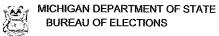
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2. Committee Name

Committee to Elect Scott Kincaid Mayor

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 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 09/27/17 Name & Address: Srinivas Mukkamala 1810 Overhill Dr	2000 00	2000.00
Flint Mi 48503	_{\$} 2000.00	_{\$} 2000.00
5. If over \$100.00 cumulative, please provide:	Click Horo fo	or Mama Itamization [-]
Occupation doctor Employer self	Click here it	or Memo Itemization
Business Address Same		
Type of Contribution: □ Direct □ Loan from a person ✔ Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address		
Paul Jordan 440 E Atherton Rd Flint MI 48507	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization 🔻
Occupation Employer		lineral
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ✔ Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/27/17		
Plumbers & Pipe Fitters Local Pac 5500 W Pierson Rd Flushing MI 48433	_{\$} 2500.00	_{\$} 2500.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization ▼
Occupation Employer		To a second seco
Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address		
Dayne Walling 806 Kensington Ave Flint Mi 48503	_{\$} 100.00	_{\$_} 100.00
5. If over \$100.00 cumulative, please provide:	OP at the f	
Occupation Employer	Click Here for	Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$4,700.00	
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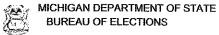


CANDIDATE COMMITTEE

1. Committee I.D. Number 3

2. Committee Name Committee to Elect Scott Kincaid Mayor

middle initial. Check	oox to indicate if con	contribution is from an indivict tribution is from a Political C regardless of amount.	dual, e ommi	enter last name, first name, itee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Dean Yeotis 611 W Court St	PAC Receipt? Ste 200	YES 4. Date of I	Receiț	ot 09/27/17		
Flint MI 48503					§30.00	_{\$} 30.00
5. If over \$100.00 cur	nulative, please pro	ovide:			Click Hors 5	
Occupation		Employer			Click Here to	or Memo Itemization
Business Address						
Type of Contribution:	Direct	Loan from a person	8/	Fund Raiser		
Contribution #2 Name & Address	PAC Receipt?	YES 4. Date of F	Receip	09/27/17		
Sherry Hayden 813 Maxine St Flint Mi 48503					\$440.00	_{\$} 500.00
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		_ Employer University	of N	fichigan Flint		
		St Flint Mi 48502				***
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Fenton MI 4843					Click Here for	Memo Itemization
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CANDIDATE COMMITTEE

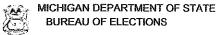
1. Committee I.D. Number __379

Committee to Elect Scott Kincaid Mayor

Enter contributor's name and address. If contribution is from an individual, enter last name, first nar middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	me, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address: David Hall		
7077 Gillette Rd	§30.00	_s 30.00
Flushing MI 48433-9341	\$ 30.00	\$ 00.00
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John A Tosto PLC	000.00	00000
503 S Saginaw St STE 1410 Flint MI 48502	<u>\$200.00</u>	<u>\$ 200.00</u>
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Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
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Eric Mccormick, PLC 503 S Saginaw St STE 1415 Flint Mi 48502	§ 30.00	_{\$} 30.00
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Occupation Employer	_	Province Action
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3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address		
Giamarco, Mullins & Horton PAC		
101 West Big Beaver 10th FL Troy Mi 48084-5280	_{\$} 500.00	_{\$} 500.00
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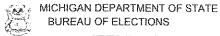
CANDIDATE COMMITTEE

1. Committee I.D. Number

379

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 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 09/27/17 Name & Address: Michigan Laborers' Political League PAC		
1118 Centennial Way STE 100		
Lansing MI 48917-9280	_s 1500.00	_s 1500.00
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Henry R Tannenbaum		
521 West Court St	_{\$} 500.00	، 500.00
Flint MI 48503-5020	Ψ	3
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization 🕶
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3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address:		
Genesee Landlords Association PAC		
2540 S Grand Traverse	_{\$} 60.00	§ 60.00
Flint MI 48503		Ψ <u> </u>
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Mark Yonan		
2040 Oxford Ln Flint MI 48503	_{\$} 1000.00	\$ 1000.00
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Occupation financial management Employer Merrill Lynch	Click Here for	Memo Itemization ▼
Business Address 8121 Trillium Circle Ave. Grand Blanc Mi 48439		
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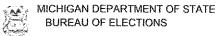


CANDIDATE COMMITTEE

1. Committee I.D. Number 379

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 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 09/27/17 Name & Address: Apparao Mukkamala		
4545 Warwick Circle Dr Grand Blanc Mi 48439	_s 2000.00	_s 2000.00
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Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address		
Troy Farah 503 S Saginaw St Ste 600 Flint Mi 48502	\$300.00	§ 300.00
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Occupation property management Employer WSSA Inc		
Business Address Same		
Type of Contribution: Direct Loan from a person Fund Raiser		
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Gisele Farah 503 S Saginaw St STE 600 Flint MI 48502	\$300.00	§ 300.00
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John Sabty 503 S Saginaw St STE 600 Flint MI 48502	§300.00	_{\$} 300.00
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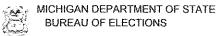


CANDIDATE COMMITTEE

1. Committee I.D. Number _379

2. Committee Name

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George Farah 503 S Saginaw Flint MI 48502	ST Ste 600				\$300.00	§ 300.00
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Val Washington 1505 Arrow Ln Flint Mi 48507					\$ 100.00	_{\$} 100.00
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Soroc Lb LLC 3020 Airpark Dr Flint MI 48507	S				_{\$} 1000.00	_{\$} 1000.00
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CANDIDATE COMMITTEE

1. Committee I.D. Number 37

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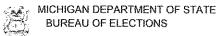
2. Committee Name

Committee to Elect Scott Kincaid Mayor

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 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 09/27/17 Name & Address: Roger Isaac 4438 Oakbridge Dr STE A Flint Mi 48532	_{\$} 100.00	_{\$} 100.00
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Occupation Employer	Click Here to	r Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/27/17 Name & Address		
Albert J Koegel 3400 West Bristol Rd Flint MI 48507	_{\$} 200.00	<u>\$ 200.00</u>
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Business Address		
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3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/06/17 Name & Address:		
Raymond Laclair 3365 Gernada Dr Clio Mi 48420-1912	_{\$} 1000.00	_{\$} _1000.00
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3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/28/17 Name & Address		en der den der der den der der den den den der den der den den der den den der den den der den
Teamsters 332 PAC 2741 Trumball Ave Detroit MI 48216	§ 10,000.00	_{\$_} 10,000.00
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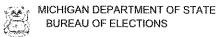
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CANDIDATE COMMITTEE

1. Committee I.D. Number 379

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 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 10/04/17 Name & Address:		
ROBERT MCDONALD 430 WESTCOMBE AVE		
FLINT MI 48503	_s 100.00	_{\$} 100.00
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JAYASHREE KOMMAREDDI	~~~ ~~	
8426 WARWICK GROVES CT	<u>\$200.00</u>	_{\$} 200.00
GRAND BLANC MI 48439		şg
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Business Address 3709 E COURT ST FLINT MI 48506		
Type of Contribution: Direct Loan from a person V Fund Raiser		
Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/04/17 Name & Address:		
ARCHIE BAILEY	100 00	400 00
1700 CEDARWOOD DR APT 226	<u>\$ 100.00</u>	_{\$} 100.00
FLUSHING MI 48433	Click Here for	Memo Itemization
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3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/04/17 Name & Address		Personal distribution and distribution a
GREGORY AVERYHARDT 3912 CHEYENNE AVE	400 00	400.00
FLINT MI 48507	<u>\$100.00</u>	<u> </u>
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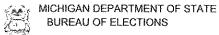


CANDIDATE COMMITTEE

1. Committee I.D. Number 379

2. Committee Name Commi

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3. Contribution # 1 Name & Address: BARRY WOLF 8386 OLD PLA		YES 4. Date of	Receip	10/04/17	200.00	250.00
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15247 CURTW					<u>\$200.00</u>	<u>\$200.00</u>
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Business Address 601 Type of Contribution:	Direct	Loan from a person		Fund Raiser		
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Name & Address				10/04/1/		
AARON PACHE 15540 JENNING					~~~	
FENTON MI 48					<u>\$200.00</u>	_{\$} 200.00
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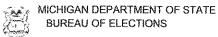


CANDIDATE COMMITTEE

379 1. Committee I.D. Number

2. Committee Name	Committee to Elect Scott Kincaid Mayor

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 regardless of amount.	e, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/04/17 Name & Address: ERWIN F MEIERS III		
1034 S GRAND TRAVERSE FLINT MI 48502	_s 100.00	ູ 100.00
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Name & Address		
HOWARD DOWNING JR	000 00	~~~
785 S VAN RD HOLLY MI 48442	<u>\$200.00</u>	<u>\$ 200.00</u>
		
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Business Address SAME		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/04/17		
Name & Address:		
1210 KENSINGTON AVE	_{\$} 100.00	ູ 100.00
FLINT MI 48507-5377	VIII TO TO THE TOTAL THE TOTAL TO THE TOTAL THE TOTAL TO	P
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Business Address		
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Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/04/17 Name & Address		
MARION ALLEN ROBB		Sorten de la Carte
2367 S LINDEN RD	°100.00	. 100.00
FLINT MI 48532	3	\$
5. If over \$190.00 cumulative, please provide:	Click Here for	Memo Itemization
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Business Address		
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CANDIDATE COMMITTEE

1. Committee I.D. Number 379

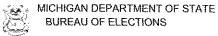
2. Committee Name

Committee to Elect Scott Kincaid Mayor

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/04/17 Name & Address: DR. MICHAEL J DANIC 2720 WESTWOOD PARKWAY FLINT MI 48503-4669	_s 100.00	_s 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here to	r Memo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
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RICHARD K RAMSDELL 1209 KENSINGTON AVE FLINT MI 48503	_{\$} 100.00	ş_100.00
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Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/04/17 Name & Address: TERRY BANKERT 2012 E COURT ST	_{\$} 250.00	_s 750.00
FLINT MI 48503-2869		*
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Occupation ATTORNEY Employer SELF		i in constitution de la constitu
Business Address 1000 BEACH ST FLINT MI 48502 Type of Contribution: Direct Loan from a person Fund Raiser		A Control of the Cont
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/04/17 Name & Address JAMES H PATTON		
3401 N DORT HWY APT 1 FLINT MI 48506	§300.00	_{\$} _300.00
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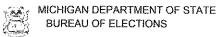


CANDIDATE COMMITTEE

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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 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 10/04/17 Name & Address: JAMES H PATTON 3401 N DORT HWY APT 1 FLINT MI 48506	_s 100.00	_{\$} 400.00
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R D BOIS PO BOX 420 FLUSHING MI 48433	_{\$} 500.00	_{\$} 500.00
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Business Address PO BOX 420 FLUSHING MI 48433		
Type of Contribution: Direct Loan from a person		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/04/17 Name & Address:		
JOHN A TOSTO, PLC 503 S SAGINAW ST FLINT MI 48502	§ 100.00	§ 300.00
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Occupation ATTORNEY Employer SELF		Month of the state
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3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/04/17 Name & Address		
ROBERT G WAUN JR 3051 KENRICK KEEGO HARBOR MI 48320	_{\$} 250.00	_{\$} _250.00
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Business Address SAME		
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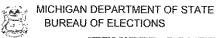


CANDIDATE COMMITTEE

1. Committee I.D. Number 379

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 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 10/04/17 Name & Address: PETER BADE 1730 OVERHILL DR FLINT MI 48503-4655	_s 100.00	_s 130.00
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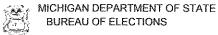
CANDIDATE COMMITTEE

1. Committee I.D. Number 379

2. Committee Name

COMMITTEE TO ELECT SCOTT KINCAID MAYOR

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CANDIDATE COMMITTEE

1. Committee I.D. Number _

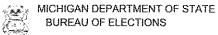
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2. Committee Name

COMMITTEE TO ELECT SCOTT KINCAID MAYOR

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3. Contribution #1 PAC Receipt? Name & Address: BRICKLAYERS LOCAL NO 21031 RYAN RD WARREN MI 48091-2741	Louis		pt 10/02/17	,200.00	200.00
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CANDIDATE COMMITTEE

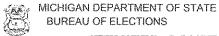
1. Committee I.D. Number 379

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2. Committee Name

COMMITTEE TO ELECT SCOTT KINCAID MAYOR

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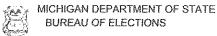
1. Committee I.D. Number 379

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COMMITTEE TO ELECT SCOTT KINCAID

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3. Contribution # 1 PAC Receipt? Name & Address: 2424 KANSAS LLC 300 SLEEPY HOLLOW ORTONVILLE MI 48462-89:	L	f Receip	10/20/17	_{\$} 2000.00	_{\$} 2000.00
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CANDIDATE COMMITTEE

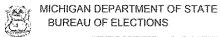
1. Committee I.D. Number 379

2. Committee Name

COMMITTEE TO ELECT SCOTT KINCAID

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 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 10/16/17 Name & Address: THOMAS SVITKOVICH 7230 SURFWOOD DR FENTON MI 48430-9353	\$ 100.00	_{\$} 100.00
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Occupation ATTORNEY Employer SELF		
Business Address 503 SAGINAW ST FLINT MI 48502		
Type of Contribution: Direct Loan from a person Fund Raiser	Noted in the latter of the lat	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/16/17 Name & Address ROBERT LEFF		
5332 DURWOOD DR SWARTZ CREEK MI 48473-1128	_{\$} 1000.00	_{\$1000.00}
5. If over \$100.00 cumulative, please provide:	Olista I Isaa Kaa	8.7
Occupation Employer	Click Here for	Memo Itemization 🕶
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Grand Total of All Schedules 1A	\$2,100.00	
(Complete on last page of Schedule)	Enter this total on	.i

line 3a of Summary Page.



CANDIDATE COMMITTEE

1. Committee I.D. Number ___379

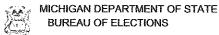
2. Committee Name

COMMITTEE TO ELECT SCOTT KINCAID

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 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 10/19/17 Name & Address: ROBERT KLATY 2700 PARKSIDE FLINT MI 48503	_s 100.00	_s 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here to	r Memo Itemization
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser	_	
Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/18/17 Name & Address		PROTECTION STATEMENT AND STATEMENT AND AND AN ARCHITECTURE AND AND AN ARCHITECTURE AND AND AN ARCHITECTURE AND AND ARCHITECTURE AND ARCHITECTU
JOHN A TOSTO, PLC 503 S SAGINAW ST FLINT MI 48502	\$ 100.00	ş 400.00
5. If over \$100.00 cumulative, please provide: Occupation ATTORNEY Employer SELF	Click Here for	r Memo Itemization
Business Address SAME		
Type of Contribution:	SSZEROWIE SZEROWOWY POWOWY POW	DE PRESIDENTE MANUELLE PROGRAMMENT DE L'ANCIONNE L'ANTIONNE L'ANCIONNE MANUELLE RESIDENT L'ANCIONNE MANUELLE R
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/19/17 Name & Address: PETER J PHILPOTT 6090 HEDGEROW CIRCLE GRAND BLANC MI 48439 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	\$ 100.00 Click Here for	§ 100.00 Memo Itemization ☑
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/19/17 Name & Address SHARKY'S LLC 4050 S CENTER RD BURTON MI 48519	_{\$} 1000.00	_{s_} 1000.00
5. If over \$100.00 cumulative, please provide:		- The state of the
Occupation Employer	Click Here for	Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$1,300.00 Enter this total on line 3a of Summary	

Page M of V

Page.



CANDIDATE COMMITTEE

1. Committee I.D. Number 3

379

line 3a of Summary

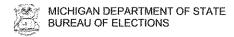
Page.

2. Committee Name

COMMITTEE TO ELECT SCOTT KINCAID

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 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 10/19/17 Name & Address: THE COMPASSION CHRONICLES LLC		
2527 REDWOOD DR FLUSHING MI 48433	_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization 🔻
Occupation Employer	Olion Field IO	i wemo nemzation
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
S. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/03/17 Name & Address		
GREAT LAKES FARMS LLC 1609 WEBSTER ST BIRMINGHAM MI 48009-6867	_{\$} 2000.00	_{\$} _2000.00
5. If over \$100.00 cumulative, please provide:	Click Here for	· Memo Itemization 💌
Occupation Employer		Economic
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	SECTION OF THE PROPERTY OF THE	
. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/19/17 Name & Address:		
ROBERT N LEACH 5520 BROADMOOR CT GRAND BLANC MI 48439	§ 2000.00	§ 2000.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation #Kolowy Employer Sulf		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		isattingilioope
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/19/17		
Isime & Address SINAN W DESILVA 1671-A CASS LAKE RD KEEGO HARBOR MI 48320	_{\$} 2000.00	^{2000.00}
5. If over \$100.00 cumulative, please provide:	-	Ф
Occupation TWNW Employer What Carden Supply	Click Here for	Memo Itemization
Business Address 340 9 Dort WY WIN WSDT Type of Contribution: Direct Loan from a person Fund Raiser		Alba
Page Subtotal	\$6,200.00	
Grand Total of All Schedules 1A	\$78,395.00	
(Complete on last page of Schedule)	Enter this total on	.1

Page 1 of 1



ITEMIZED EXPENDITURES SCHEDULE 1B **CANDIDATE COMMITTEE**

1. Committee I. D. Number

379

2. Committee Name COMMITTEE TO ELECT SCOTT KINCAID MAYOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name USPS		09/22/17	s 980.00
Address	Purpose: POSTAGE	Date	* 000.00
1601 W ATHERTON RD			
FLINT MI 48507-9998	· ·		Itemization Type
Fund Raiser	Check box if this expenditure is payment debt or obligation reported on previous statement	of	
Expenditure #2			
Name WFLT AM		09/22/17	. E00 00
	Purpose: RADIO	Date	\$ <u>500.00</u>
Address	Purpose:		
317 S AVERILL FLINT MI 48506	Clic	k Here for Memo	Itemization Type
LERGE WIN TOOOD	Check box if this expenditure is payment	n f	
Fund Raiser	debt or obligation reported on previous	Ji.	
Expenditure #3	statement		
Name COMMERCIAL GRAPHICS OF MICHIGAN INC			
COMMERCIAL GRAPHICS OF MICHIGAN INC		09/12/17	\$375.11
Address	Purpose: PRINTING	Date	Part A PART 100
1453 WALLI STRASSE DR	Clirk	Here for Memo	Itemization Type
BURTON MI 48509	Check box if this expenditure is payment		nemzatori rype
Fund Raiser	debt or obligation reported on previous statement	ונ	
Expenditure #4	Statement		
Name TODD COOK		00/00/45	
		09/29/17	\$ 3750.00
Address	Purpose: CONSULTING	Date	
530 W IONIA			.
LANSING MI 48933			Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	of	
Expenditure #5			
Name SHIRT TRAVELER		10/06/47	
Address	Purpose: SHIRTS	10/06/17 Date	§601.35
6005 MILLER RD	Purpose:	Date	
SWARTZ CREEK MI 48473	i hamani		Itemization Type
mananang.	Check box if this expenditure is payment of debt or obligation reported on previous	of	
Fund Raiser	statement		
	Sub	total this page	\$6,206.46
	Grand Total of a	ll Schedules 18	
	(Complete on last pa	ge of Schedule)	

Enter this total on line 8a of Summary Page



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

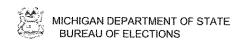
1. Committee I. D. Number

379

2. Committee Name COMMITTEE TO ELECT SCOTT KINCAID

Name and address of person or vendor to whom paid	1 4 5 (6	T		
3. Name and adoress of person of vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount	
Expenditure #1				
Name GENESEE COUNTY CLERK		09/22/17	s 194.00	
Address	Purpose: COPIES	Date	w.e	
900 S SAGINAW ST	OK 1.	., , ,,		
FLINT MI 48502	Click I	Here for Memo	Itemization Type	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement			
Expenditure #2			***************************************	
Name RIEGLEPRESS		10/12/17		
			\$ <u>465.34</u>	
Address	Purpose: PRINTING	Date		
PO BOX 207				
FLINT MI 48501	Click I	Here for Memo	Itemization Type	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement			
Expenditure #3		***************************************	***************************************	
Name DDC INIC				
Name PPC INC		10/02/17	\$ 2340.25	
Address	Purpose: DATA ENTRY	Date	V 20-10-20	
920 N WASHINGTON AVE	t dipuse.			
LANSING MI 48906	Click Here for Memo Itemization Type			
	Check box if this expenditure is payment of			
Fund Raiser	debt or obligation reported on previous			
<u>L </u>	statement			
Expenditure #4				
Name BROWN IMPACT MEDIA GROUP		10/20/17		
		Date	\$ <u>250.00</u>	
Address	Purpose: ADVERTISING			
FLINT MI				
	Click H	lere for Memo	Itemization Type	
	Check box if this expenditure is payment of			
Fund Raiser	debt or obligation reported on previous statement			
Expenditure #5				
Name TODD COOK				
TODD COOK		10/20/17	: 407 EC	
Address	Purpose: REIMBURSEMENT	Date	\$ <u>407.56</u>	
525 WESTMORELAND AVE				
LANSING MI 48915	Click Here for Memo Itemization Ty			
	Check box if this expenditure is payment of debt or obligation reported on previous			
Fund Raiser	statement			
	Subtol	tal this page	\$3,657.15	
	Cound Taket of -B C	Saha dul 45		
	Grand Total of all S (Complete on last page		\$9,863.61	

Enter this total on line 8a of Summary Page



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number

3	7	9
○	ĺ	J

2. Committee Name COMMITTEE TO ELECT SCOTT KINCAID MAYOR

CANDIDA I E COMMI I I EE				
This Schedule itemizes:		·····		
a Debts and obligations owed by or forgiven the com (Che	mittee OR b. Debt ck either a or b. Use only for the pu	s and obligations owed <u>to</u> or rpose checked.)	forgiven <u>by</u> the co	mmittee.
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 (Description) 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 Corp? Yes Owed to or by: WILLIAM S KINCAID	4. Type: LOAN	\$		
349 BEDE	5. Date Debt Was Incurred:	\$		or control of the con
FLINT MI 48507	09/29/17	\$		2.750.00
	6. Original Amount of Debt: \$ 3,750.00	\$	\$ 0.00	\$ 3,750.00 FORGIVEN
	ř Ψ	\$		I L. J. OKORVER
If bank loan, name of endorser or guarantor:		Amo	unt Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type:	\$		
	5. Date Debt Was Incurred:	\$		С. «С.С.» (С. с.
	6. Original Amount of Debt:	\$	\$	\$
	\$	<u> </u>		FORGIVEN
		\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type:	<u> </u>	,	
	5. Date Debt Was Incurred:	\$		
		\$		
	6. Original Amount of Debt:	#	\$	\$
	\$	\$		FORGIVEN
If bank loan, name of endorser or guarantor:			ount Endorsed: \$	and Area area and a supplementation
				\$3,750.00
		Page Subtotal (Outstanding debt)	
(Cc	omplete on last page of Schedule s	Grand Total o howing amounts owed by or	f all Schedules 1E to the committee)	3,750-00
A debt or obligation must be shown on this Schedu this Campaign Statement or it was forgiven during t	le if there was an outstanding an he period covered by this Camp	nount owed on it at the clo aign Statement.	sing date of	Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page
Page of				



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number 379

2. Committee Name Committee to Elect Scott Kincaid Mayor

	_ IICE A CEDADATE CU	EET FOR EACH EVENT	
3. Date Event Was Held	4. Number of Individuals Attending or Participating (whichever is	5. Type of Fund Raising Activity	6. Address and Name (If any) of place where the activity was held
09/27/17	greater) 75	pizza dinner	621 W Court St Flint MI 48503
7. Total Contributions	\$22,395.00		
8. Other Receipts			
9. Gross Receipts (Add lines 7	and 8) \$22,395.00		
10. Total Cost of Event (Total Cost includes In-Kind Co	\$400.00 ontributions and All Expenditures	s Made For the Event)	
11. Check if event was a jo	int fund raiser and complete the	e following:	
Co-Sponsor(s)	Contribution S (%)	Split	Expenditure Split (%)
		Protection and	

 period covered by the C Receipts and expenditu Schedule (1A), Itemized Summary Page. 	res listed on a Fund Raiser Sch In-Kind Contributions Schedul	nedule must also be reported or e (1-IK), Itemized Expenditures	n the Itemized Contributions s Schedule (1B) and the
 Each committee that pa 	irticipated in a joint fund raiser r	nust file a Fund Raiser Schedu	le for the event.



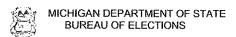
FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number

2. Committee Name Committee to Elect Scott Kincaid Mayor

	- USE A SEPARATE S	HEET FOR EACH EVENT	too .
3. Date Event Was Held	Number of Individuals Attending or Participating (whichever is greater)		6. Address and Name (If any) of the place where the activity was held. 1810 Overhill Dr
10/04/17	40	meet & greet	Flint MI 48503
7. Total Contributions	\$4,300.00		
8. Other Receipts			
9. Gross Receipts (Add lines 7	and 8) \$4,300.00	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
10. Total Cost of Event (Total Cost includes In-Kind Co	\$0.00 ntributions and All Expenditure	res Made For the Event)	
11. Check if event was a jo	int fund raiser and complete t	he following:	
Co-Sponsor(s)	Contribution (%)	n Split	Expenditure Split (%)
			
		·	
		****	When the same of t

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



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 379

CA	NO	DATE	COM	MITTEE

2. Committee Name COMMITTEE TO ELECT SCOTT KINCAID MAYOR

Page

WE KILL ONLY IN COUNTRY	FR. G. D. Change Vinesa		
Name and Address from whom received frontribution is from an individual, enter last name first. Check box to indicate if contribution	Type of In-Kind Contribution (Check applicable box) Date of Receipt	7. Amount or Fair Market	8. Cumulative for Election
is from a Political Committee or an Independent	6. Name & Address of Vendor from whom goods or services were	Value	Cycle (Through date in Item 5)
Committee (Both are commonly called PACs). Report all in-kind contributions.	purchased	ACREM ENGAGEM	,
Contribution # 1 PAC Receipt? Yes	Endorsement or Guarantee of Bank Loan		F
Name & Address: BETTY KINCAID	Goods Donated or Loaned Services Donated	988.00	,988.00
349 BEDE ST	Goods or Services Purchased by Candidate or Others		3
FLINT MI 48507	Goods or Services Purchased by Candidate or Others- LOAN		
If over \$100.00 cumulative, please provide: Occupation:	Description POSTAGE		
Employer Name & Business Address:	5. Date Of Receipt: 10/13/17		
ELF KHURAFEH SHRINE	6. Vendor Name & Address:		
4240W WILSON RD	Gi	ick Here for Memo II	temization
CLIO MI 48420			
Fund Raiser Contribution			
Contribution # 2 PAC Receipt? Yes Name & Address	4. Endorsement or Guarantee of Bank Loan		
WHITE HORSE TAVERN	Goods Donated or Loaned Services Donated	100.00	400 00
621 W COURT ST	Goods or Services Purchased by Candidate or Others	00.00	400.00
FLINT MI 48503	Goods or Services Purchased by Candidate or Others- LOAN		
If over \$100.00 cumulative, please provide:	Description FOOD		
Occupation:	5. Date Of Receipt:		
Employer Name & Address:	6. Vendor Name & Address:		
	Cii	ck Here for Memo It	amization
	Oil Oil	CATTERE TO MERIOR	emzauon
Fund Raiser Contribution			
Contribution #3 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan		
Name & Address:	Goods Donated or Loaned Services Donated \$45	91.84	491.84
DERRICK KINCAID 349 BEDE ST	Goods or Services Purchased by Candidate or Others		
FLINT MI 48507	Goods or Services Purchased by Candidate or Others- LOAN		
If over \$100.00 cumulative, please provide:	Description PRINTING		
Occupation:	5. Date Of Receipt: 09/28/17		
Employer Name & Address:	6. Vendor Name & Address:		
GENERAL MOTORS		ck Here for Memo It	emization
3100 VAN SLYKE RD	PO BOX 207		
FLINT MI 48507	FLINT MI 48501		
Fund Raiser Contribution			
	Page Subtotal	\$1,879.84	
	Grand Total of all Schedules 1-Ik (Complete on last page of Schedule)	13(12/42/22/1	
	(Somplete on last page of Scriedule)	Enter this total	
		on line 6 of Sumr	mary

Page 1 of 1