

## Corrected Copy

## CANDIDATE COMMITTEE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in Ink an the treasurer (or designated record keeper) and	id signed by candidate.	3. This Statement covers:	1 -8 of ocal of 6 - 94	-1030
1. Committee I.D. Number		4. Candidate Last Name First Name M.I.		
33520		Wright	Jeff	
2. Committee Name		4a. Office Sought Including D. Drain Commissioner	strict # or Community Served (if applicable	)
Jeff Wright 2000		4b. County of Residence GE	NESEE	
5. Committee's Mailing Address		6. Treasurer's Name & Residential Address		
2174 Sycamore St.		Warren Vyvyan		
Burton,MI 48509		1455 Laurentian Pass Flint, MI 48532		
Area Code and Phone (810) 742-0246 If the address in this box is different from the committee mailing address on the Statement of Organization, mall may be sent to this address by the filing official.		Area Code & Phone (810) 919 -9618		
7. Treasurer's Business Address		8. Designated Record Keeper's Name and Malling Address (if the caranities has a		
same as #6  Area Code and Phone		Designated Record Keeper)  Area Code and Phone	SEP IN P 2	
9. TYPE OF STATEMENT		7 4 6 4 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	9e. Dissolution of Candidate Committee	
9a. Pre-Election OR 9b. Post-Election  Pre-Election or Post-Election Statement relates to:	Required ONLY if candidate is not on the ballot for the current year:  July Quarterly		By checking this item I/We certify any by the committee to the candidate or his by discharged and forgiven and no longer the committee. The committee has no our owes no lates fees or has any outstanding	r her spouse is here collectible from tstanding assets,
	October Qu	uarteriv		
General			Further, if the dissolution cannot be grante	
			considered a request for the Reporting Wa	d, that this be liver.
Convention			considered a request for the Reporting Wa	d, that this be aiver.
Special	9c. Annual	Statement () Coverage Year	considered a request for the Reporting Wa	d, that this be niver.
Special School	9d Amend	Coverage Year iment to Campaign Statement	considered a request for the Reporting Wa	d, that this ba niver.
Special	9d. Amend	Coverage Year iment to Campaign Statement lete Item 9a, 9b, 9c or 9e to e which Statement is being	considered a request for the Reporting Wa	ilver.
Special School	9d. Amend (Complindicate	Coverage Year iment to Campaign Statement lete Item 9a, 9b, 9c or 9e to e which Statement is being	Effective date of dissolution  Note: The disposition of residual funds mu	ilver.
Special School Caucus  Date of Election, Convention or Caucus 8-4-2020  10. Verification: I/We certify that a!l reasonable dilige	9d. Amend (Compindicate amenda	Coverage Year iment to Campaign Statement lete Item 9a, 9b, 9c or 9e to e which Statement is being ed.)	Effective date of dissolution  ———————  Note: The disposition of residual funds mu Schedule 1B and the Summary Page.	ist be reported on
Special School Caucus  Date of Election, Convention or Caucus  8-4-2020  10. Verification: I'We certify that all reasonable dilige my/our knowledge and belief the contents are true, a Current Treasurer or Warren Vvvva	9d. Amend (Complindicate amenda amenda	Coverage Year iment to Campaign Statement lete Item 9a, 9b, 9c or 9e to e which Statement is being ed.)	Effective date of dissolution  Note: The disposition of residual funds mu Schedule 1B and the Summary Page.	ist be reported on
Special School Caucus  Date of Election, Convention or Caucus  8-4-2020  10. Verification: I/We certify that a!I reasonable dilige my/our knowledge and belief the contents are true, a	9d. Amend (Complindicate amenda amenda	Coverage Year iment to Campaign Statement lete Item 9a, 9b, 9c or 9e to e which Statement is being ed.)	Effective date of dissolution  Note: The disposition of residual funds mu Schedule 1B and the Summary Page.	ist be reported on
Special School Caucus  Date of Election, Convention or Caucus 8-4-2020  10. Verification: I/We certify that all reasonable dilige my/our knowledge and belief the contents are true, a Current Treasurer or Designated Record Keeper  Warren Vyvya	9d. Amend (Complindicate amenda amenda	Coverage Year iment to Campaign Statement lete item 9a, 9b, 9c or 9e to e which Statement is being ed.)  If the preparation of this statement in the preparation of the statement	Effective date of dissolution  Note: The disposition of residual funds mu Schedule 1B and the Summary Page.	ist be reported on
Special School Caucus  Date of Election, Convention or Caucus 8-4-2020  10. Verification: I/We certify that a!I reasonable dilige my/our knowledge and belief the contents are true, a Current Treasurer or Designated Record Keeper  Type or Print Name  Jeff Wright	9d. Amend (Complindicate amenda amenda	Coverage Year iment to Campaign Statement lete item 9a, 9b, 9c or 9e to e which Statement is being ed.)  If the preparation of this statement in the preparation of the statement	Effective date of dissolution  Note: The disposition of residual funds mu Schedule 1B and the Summary Page.	ist be reported on



**SUMMARY PAGE** CANDIDATE COMMITTEE 1. Committee LD. Number 33530

2. Committee Name Teff Wright 2000

CANDIDATE COMMITTEE		
RECEIPTS  3. Contributions	Column I This Period	Column II Cumulative this election cycle
a. Itamized (Schedule 1A - Column 8)	(a) \$ 2500,00	
		H
b. Unitemized (less than \$20.01 each -no Schedule)	(3b.) \$ NOT APPLICABLE (3c.) \$ 2500.00	(18) = 2 18,394.84
c. Subtatel of "Contributions"	E-01	(18.)\$ 113.19
4. Other Receipts (Schedule 1A -1, Column 6)	(4) \$	
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line-3c + Line 4)	(6.) \$ \$ (5)	cans 218,508.03
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-tK, Column 7)	(6.) \$	(21.)\$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures	1 C	
a. Itemized (Schedule 1B, Column 6)	(8a) \$ <u>28 083,17</u>	-
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c. Unitemized (less then \$50.01 each - no Schedule)	(8c.) \$	319 9/1 12
9. TOTAL EXPERIDITURES (Add Line 8s + Line 8b + Line 8c)	(a) \$ 28 083.17	ess: 219, 962,13
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. itemized (Schedule 1C, Column 6)	(10a.) \$ 500.00	
b. Uniternized (less than \$50.01 each - no Schedule)	(10b.) S	
11. TOTAL INCIDENTAL EXPENSE DISSURSEMENTS (Add Line 10a + Line 10b)	(11) \$ 500.00	24) \$ 2 <sup>17</sup> 203.89
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$	(24.) \$ 07 } 00 7 0 1
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
13. Ending Salance of last report filed	BALANCE STATEMENT (13) \$ 54 919,69	×
(Enter zero if no previous reports have been filed.)  14. Amount received during reporting period	(14)+\$ 2500,50	
(Line 5, Total Contributions & Other Receipts)	FRU-20 19	* Capperted
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(15)= \$ 377 AD 217	* Corrected  Per Co Clark
(Add lines 9 and 11) 17. ENDING BALANCE	10 077-01	X PER COCKET
(Subtract line 16 from line 15)	(17.) \$ 40, 61-4,00	