



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

REC'D JAN 31 2024

VR

**CANDIDATE COMMITTEE  
COVER PAGE**

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

3. This Statement covers: from 10-21-2023 to 12-31-2023

<p>1. Committee I.D. Number <b>33520</b></p> <p>2. Committee Name <b>Jeff Wright 2000</b></p>	<p>4. Candidate Last Name <b>Wright</b> First Name <b>Jeff</b> M.I.</p> <p>4a. Office Sought Including District # or Community Served (If applicable) <b>Drain Commissioner</b></p> <p>4b. County of Residence <b>GENESEE</b></p>
<p>5. Committee's Mailing Address <b>2174 Sycamore St. Burton, MI 48509</b></p> <p>Area Code and Phone (810) <u>742-0246</u> 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.</p>	<p>6. Treasurer's Name &amp; Residential Address <b>Warren Vyvyan 1455 Laurentian Pass Flint, MI 48532</b></p> <p>Area Code &amp; Phone (810) <u>919-9618</u></p>
<p>7. Treasurer's Business Address <b>same as #6</b></p> <p>Area Code and Phone _____</p>	<p>8. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper)</p> <p>Area Code and Phone _____</p>

<p><b>9. TYPE OF STATEMENT</b></p> <p>9a. <input type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus</p> <p>Date of Election, Convention or Caucus _____</p>	<p>Required ONLY if candidate is not on the ballot for the current year:</p> <p><input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly</p> <p>9c. <input checked="" type="checkbox"/> Annual Statement (<u>2023</u>) Coverage Year</p> <p>9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)</p>	<p><b>9e. Dissolution of Candidate Committee</b></p> <p><input type="checkbox"/> By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt.</p> <p>Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.</p> <p>Effective date of dissolution _____</p> <p>Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.</p>
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10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

<p>Current Treasurer or Designated Record Keeper <b>Warren Vyvyan</b> Type or Print Name</p>	<p><i>Warren Vyvyan</i> Signature</p>	<p><u>1-16-2024</u> Date</p>
<p>Candidate <b>Jeff Wright</b> Type or Print Name</p>	<p><i>Jeff Wright</i> Signature</p>	<p><u>1-17-2024</u> Date</p>



1. Committee I.D. Number 33520

2. Committee Name Jeff Wright 2000

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>5400<sup>-</sup></u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>5400<sup>-</sup></u>	(18.) \$ <u>279,806<sup>-</sup></u>
<b>4. Other Receipts (Schedule 1A -1, Column 6)</b>	(4.) \$ <u>3.53</u>	(19.) \$ <u>6421.83</u>
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$ <u>5403.53</u>	(20.) \$ <u>286,221.83</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
<b>6. In-Kind Contributions (Schedule 1-IK, Column 7)</b>	(6.) \$ _____	(21.) \$ _____
<b>7. In-Kind Expenditures (Schedule 1B-IK, Column 6)</b>	(7.) \$ _____	(22.) \$ _____
<b>EXPENDITURES</b>		
<b>8. Expenditures</b>		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>38895.53</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ _____	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ _____	
<b>9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)</b>	(9.) \$ <u>38895.53</u>	(23.) \$ <u>157,334.45</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)		
<b>10. Disbursements</b>		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>1385<sup>-</sup></u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ _____	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$ <u>1385<sup>-</sup></u>	(24.) \$ <u>41114.09</u>
<b>DEBTS AND OBLIGATIONS</b>		
<b>12. Debts and Obligations</b>		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ _____	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _____	
<b>BALANCE STATEMENT</b>		
<b>13. Ending Balance of last report filed</b> (Enter zero if no previous reports have been filed.)	(13.) \$ <u>167428.25</u> ✓	
<b>14. Amount received during reporting period</b> (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>5403.53</u> ✓	
<b>15. SUBTOTAL Add lines 13 and 14</b>	(15.) = \$ <u>172,831.78</u> ✓	
<b>16. Amount expended during reporting period</b> (Add lines 9 and 11)	(16.) - \$ <u>40280.53</u> ✓	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ <u>132,551.25</u> ✓	



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

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

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address: <u>Huntington Bank</u> <u>PO Box 1558 GAW 37</u> <u>Columbus, OH 43216</u>	Date of Receipt <u>Monthly</u>	<input type="checkbox"/> Loan from a Lending Institution <input checked="" type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	\$ <u>3.53</u> Click for Memo Itemization Type
Receipt #2 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	\$ _____ Click for Memo Itemization Type
Receipt #3 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	\$ _____ Click for Memo Itemization Type
Receipt #4 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	\$ _____ Click for Memo Itemization Type
Receipt #5 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	\$ _____ Click for Memo Itemization Type
Receipt #6 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	\$ _____ Click for Memo Itemization Type
Receipt #7 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	\$ _____ Click for Memo Itemization Type

Page Subtotal 3.53

Grand Total of All Schedules 1A-1  
(Complete on last page of Schedule) 3.53

Enter this total on  
line 4 of Summary  
Page



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

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

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>11-1-2023</u> Name & Address: <u>AFCOM PAC</u> <u>2000 K Street Suite 800</u> <u>Washington, DC 20006</u>	\$ <u>2000-</u>	\$ <u>6000-</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>Same</u>	<a href="#">Click Here for Memo Itemization</a>	
Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11-1-2023</u> Name & Address: <u>THOMAS MCGRAW</u> <u>7275 PARKHURST</u> <u>Bloomfield Hills, MI 48301</u>	\$ <u>2400-</u>	\$ <u>7200-</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>MCGRAW - MORRIS</u>	<a href="#">Click Here for Memo Itemization</a>	
Business Address <u>2075 W Big Beaver Rd #750 Troy, MI 48064</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>12-28-23</u> Name & Address: <u>A. T. MARDAMBELK</u> <u>4839 E. Kelly Dr.</u> <u>Gilbert, AZ 85234</u>	\$ <u>1000-</u>	\$ <u>1000-</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SR V.P.</u> Employer <u>AFCOM</u>	<a href="#">Click Here for Memo Itemization</a>	
Business Address <u>7720 N. 16th St. Suite 100 Phoenix, AZ 85020</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address _____	\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____	<a href="#">Click Here for Memo Itemization</a>	
Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		

Page Subtotal 5400-

Grand Total of All Schedules 1A  
(Complete on last page of Schedule) 5400-

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**INCIDENTAL OFFICE EXPENSE  
DISBURSEMENTS  
SCHEDULE 1C  
CANDIDATE COMMITTEE**  
(For use by officeholders only)

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

3. Name and address of person to whom disbursement was made	4. Description of Disbursement (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address: <u>Holy ROSARY</u> <u>5191 Richfield Rd.</u> <u>Flint, MI 48506</u>	Purpose <u>SPONSOR Term Uniforms</u>	<u>11-1-03</u> Date	<u>\$ 450<sup>-</sup></u>
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>60</u> <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Disbursement # 2 Name & Address: <u>Genesee Co. Arg. Society</u> <u>2188 W. MT. MORRIS</u> <u>MT. MORRIS, MI 48458</u>	Purpose <u>SPONSOR / Membership</u>	<u>10-25-03</u> Date	<u>\$ 185<sup>-</sup></u>
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>60</u> <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Disbursement # 3 Name & Address: <u>Old News boys</u> <u>6255 Taylor DR.</u> <u>Flint, MI 48507</u>	Purpose <u>SPONSOR</u>	<u>12-1-03</u> Date	<u>\$ 500<sup>-</sup></u>
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>60</u> <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Disbursement # 4 Name & Address: <u>Holy ROSARY</u> <u>5191 Richfield Rd.</u> <u>Flint, MI 48506</u>	Purpose <u>SPONSOR</u>	<u>12-19-03</u> Date	<u>\$ 250<sup>-</sup></u>
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>60</u> <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	

Subtotal this page 1385<sup>-</sup>  
 Grand Total of all Schedules 1C  
 (Complete on last page of Schedule) 1385<sup>-</sup>

Enter this total on line 10a of Summary Page

\*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES  
 Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY



ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE

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

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Huntington Bank</u> Address <u>PO Box 1558 GAW37</u> <u>Columbus, OH 43216</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>office exp.</u> <u>(Monthly Service Fee)</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>Monthly</u> Date	\$ <u>14</u> <sup>-</sup>
Expenditure #2 Name <u>Huntsman Hunt Club.</u> Address <u>4166 Havens Rd.</u> <u>Dryden, MI 48428</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser Exp.</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10-27-23</u> Date	\$ <u>37,981</u> <sup>65</sup>
Expenditure #3 Name <u>New Lume</u> Address <u>608 Luce Ave</u> <u>Flushing, MI</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser Exp.</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11-1-23</u> Date	\$ <u>300</u> <sup>-</sup>
Expenditure #4 Name <u>Wall Street Journal</u> Address <u>200 Burnett Rd.</u> <u>Chicopee, MA 01020</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>office exp.</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12-12-23</u> Date	\$ <u>599</u> <sup>88</sup>
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page 38,895<sup>53</sup>  
 Grand Total of all Schedules 1B  
 (Complete on last page of Schedule) 38,895<sup>53</sup>  
 Enter this total on line 8a of Summary Page



**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

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

**- USE A SEPARATE SHEET FOR EACH EVENT -**

3. Date Event Was Held <u>10-6-2003</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>121</u>	5. Type of Fund Raising Activity <u>outdoor Event</u>	6. Address and Name (if any) of the place where the activity was held. <u>Huntsman Hunt Club</u> <u>4166 HAVENS Rd.</u> <u>Dryden, MI 48428</u> <input type="checkbox"/> Private Residence
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7. Total Contributions 93,800 -  
8. Other Receipts - 0 -  
9. Gross Receipts (Add lines 7 and 8) 93,800 -  
10. Total Cost of Event 53,514.71  
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

(Final Results)

11.  Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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

