

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

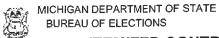
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by	3. This Sta	atement co		m 7-21-25 to 10-20-2025
	andidate.	4 Candi	date Last N	froi lame	First Name M.I.
1. Committee I.D. Number		Wright	date Edut /		Jeff
33520		4a. Office Sought Including District # or Community Served (If applicable)			trict # or Community Served (If applicable)
2. Committee Name		Drain C	ommiss	ioner	
Jeff Wright 2000			of Resider		
5. Committee's Mailing Address		6. Treasu	rer's Name	& Reside	ntial Address
2174 Sycamore St.		Warren Vyvyan			
Burton,MI 48509			1455 Laurentian Pass		
		Flint, IV	11 48532	2	
(940) 742 0346					
Area Code and Phone (810) 742-0246 If the address in this box is different from the commit	ttee				
mailing address on the Statement of Organization, r be sent to this address by the filing official.	nail may	Area Code	& Phone	(810)	
7. Treasurer's Business Address		8. Design	ated Recored I	d Keeper'	s Name and Mailing Address (If the committee has a
same as #6		Designate	ea Record i	zeehei)	
Area Code and Phone		Area Cod	e and Phor	e	9e. Dissolution of Candidate Committee
9. TYPE OF STATEMENT	Required ON	II Y if candid	date		
9a. Pre-Election OR 9b. Post-Election	is not on the	ballot for the	9		By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is her
Pre-Election or Post-Election Statement relates to:					by discharged and forgiven and no longer collectible from the committee. The committee has no outstanding assets.
Primary	July Quart	erty.			owes no lates fees or has any outstanding debt.
General	October Q	uarterly			Further, if the dissolution cannot be granted, that this be
Convention					considered a request for the Reporting Waiver.
	9c. —		,	,	
Special	LJ Annua	il Statement	: (Coverage `	_) Year	Effective date of dissolution
School	9d. Amen	dment to Ca	ampaign St	atement	
Caucus	(Comi	olete Item 9 te which Sta	a, 9b, 9c or	9e to	Note: The disposition of residual funds must be reported on
	amend			Ü	Schedule 1B and the Summary Page.
Date of Election, Convention or Caucus					
			1		
A CONTRACTOR OF THE PROPERTY O					
					Company to the best of
10. Verification: I/We certify that all reasonable dilige my/our knowledge and belief the contents are true, it	ence was used accurate and co	in the preparation	eration of th	is stateme	ent and attached schedules (if any) and to the best of
		1	1/1/2011	à. /	Jan Date 10-22-2025
Designated Record Keeper	2[]	1 V	1404	My C	Date 10 30 CCC
Type or Print Name		216	gnature \	111	1774 100
Candidate Jeff Wright		1	1//	Mik	Date (V. LA . LOLA
Type or Print Name		Si	gnature Y	1	

SUMMARY PAGE

1. Committee I.D. Number 33500

2. Committee Name Teff Wright 2000

CANDIDATE COMMITTEE	and the little of the little o	
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions	13) 000	
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 1dd, 450	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	1111 075
c. Subtotal of "Contributions"	(3c.) \$ 1dd, 950	(18.) \$ 124,075
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ 3.02	(19.) \$ 10.87
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ 122, 953.02	(20.) \$ 124,085.8
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$62311,59	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	(2 (7) 17)
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) s 6 1 3 11 .5 9	(23.) \$ 63 554.72
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$3525	
b. Unitemized (less than \$50.01 each - no Schedule)	(IGh.) ¢	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(10b.) \$	(24.) \$ 22,179.43
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.)	(4-7,7)
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
(i.e. a. hely)- wep-ullips - 28 anniands a statistics schools as hardere a angleure authors was included a behind the british the schools and a schools as included as a statistic and a schools are a schools as a schools are a schools as a schools are a schools as a school as a scho	BALANCE STATEMENT	e e e e e e e e e e e e e e e e e e e
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15)	(13.) \$ 105 , 16.05 (14.) + \$ 100 , 953.00 (15.) = \$ 000 , 000 (16.) - \$ 000 , 000 (17.) \$ 000 , 000 , 000	

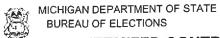


CANDIDATE COMMITTEE

1. Committee I.D. Number

33520 Jeff Wright 2000

CANDIDATE COMMITTEE 2. Committee Name	Jett (NRIGHT QUU
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 8-27-25 Name & Address: LEANNE PANDUREN 10395 CIARK Rd. DAVISON, MT 48423	\$ 5600	<u>\$ 5,600</u>
5. If over \$100.00 cumulative please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address 540 5. SAGINAW ST Suite 200 Flint Type of Contribution: Direct Loan from a person X Fund Raiser	MI 48508	2
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8-27-35		
Name & Address John Willemin 1142 Foxchase LN	<u>\$ 2150</u>	\$ 2150
5. If over \$100.00 cumulative, please provide: Employer Fish heck	Click Here fo	r Memo Itemization
Occupation Employer 134Weth	1. AAT	
Business Address 1515 ARboretum DR. SF GRAND Rapia	15, 14 495	46
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8-17-05 Name & Address: Winfield Cooper III PO Box 320506 Flint, MT 4 8530	\$ 750 Click Here for	\$ 750 Memo Itemization
5. If over \$100.00 cumulative, please provide: Owner Connect Owner Owner Owner Owner Owner Owner Owner Owner Owner Owner Owner Owner Owner Owner Owner Owner Owner Owner Owner Owner Owner	1	_
Occupation OWNER Employer Cooper COMMERCIAL Business Address PO Box 330500 Flint MI 48536		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 8-27-35 Name & Address		
DAN Zito 8033 Fenton Rd. GRAND BLANC, MI 494139	\$ 14/00	\$ 1400-
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation OWNEL Employer Zi70 Zons7.		
Business Address 8033 Fen fam Rd GRAND Blanc, M	I 49439	
Type of Contribution: Direct Loan from a person Fund Raiser Page Subtota	96117-	
Grand Total of All Schedules 1A (Complete on last page of Schedule	1100	-
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1. Committee I.D. Number

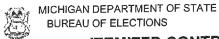
eff Wright 2000

CANDIDATE COMMITTEE	2. Committee Name	Jett u	1Right 2000
Enter contributor's name and address. If contribution is from an individual, emiddle initial. Check box to indicate if contribution is from a Political Committee (PAC) Report all contributions regardless of amount.	nter last name, first name, tee 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 Receipt YES 5. Date of Receipt YES 4. Date of Receipt YES 5. Date	t 8-28-25		
8033 Fenton Rd		\$ 1400	\$ 1400-
5. If over \$100.00 cumulative, please provide:	/ /	Click Here for	Memo Itemization
Occupation OWNER Employer Life	Const.		
Business Address 8033 Factor Rd GRAM		18439	
Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address	t 8-27-25		
MANOJ Sethi		2 Ann	\$ 2 6 00
6154 GRAE BEAR TRL,		\$ ago	\$ 0000
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation OWNER Employer DE	UT Inc.		
Business Address 1425 Key Stone Ave LA	maina MI 480	911	
Type of Contribution: Direct Loan from a person	Fund Raiser		
	2 10 10		
Name & Address:	9-11-85		
Scott HOAC		\$ 1400-	s 1400 -
4026 Somens Dl.			\$ 1700
Bull bu, MJ 48529 5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Employer Self-	Employed		
OccupationBusiness Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt?	pt 9-11-25		
Name & Address	(6 °		
Dean Smith 2397 Tuylby Rd.		s 100	s 100-
LARKSAUR, CO 80118 5. If over \$100.00 cumulative, please provide:		5	5
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		
	Page Subtotal	5900-	

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

Enter this total on line 3a of Summary Page.

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CANDIDATE COMMITTEE

1. Committee I.D. Number

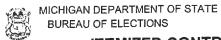
33520

2. Committee Name

ff 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 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 9-17-35 Name & Address: Todd McClain 1 990 Avan Cit. 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser		\$
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9-17-35 Name & Address Michael Johnson 3.51 BRYNNI Ave 61en Ellyn JL 60/377 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address	\$	\$
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 9-17-35 Name & Address; Revier Benson 2 o 436 Wood bend la. North wille, MI 48167 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address	\$ 100°	\$ Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 9-17-35 Name & Address MATT Political Way Hawthory Woods, FL 60647 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser		\$ Memo Itemization
Type of Contribution: Direct Loan from a person Page Subtot Grand Total of All Schedules 1. (Complete on last page of Schedule	A	-

Page 3 of 19



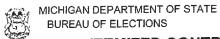
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1. Committee I.D. Number 33520

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 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 9-17-35 Name & Address: NATHAM BUCKAISKI 6806 Northstae Cra Castle Rock CO 80108 5. If over \$100.00 cumulative, please provide: Doccupation Employer Business Address Type of Contribution: Direct Loan from a person Y Fund Raiser	\$
A. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9-17-35 Jame & Address DAN Foode 7167 5. Fallest LN. Centennial, Co 8013 6. If over \$100.00 cumulative, please provide: DecupationEmployer	\$\$
Type of Contribution: Direct Loan from a person Fund Raiser Contribution #3 PAC Receipt? YES 4. Date of Receipt 9-17-35 Dang Hocker had cht 3 2 03 2 Robin hood De. Beverly Hills M1 48025 If over \$100.00 cumulative, please provide: Decupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	\$\$\$Click Here for Memo Itemization
Contribution #4 PAC Receipt? YES 4. Date of Receipt 9-17-25 Idented & Address The State of Receipt 9-17-25 Idented & Address The State of Receipt 9-17-25 Idented & Address The State of Receipt 9-17-25 Idented & Address Idented & Address Occupation	\$ 3000
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary

Page _____ of _____ 19

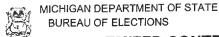


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1. Committee I.D. Number 33 5 2 0

2. Committee Name Teff Wright 2000

CANDIDATE COMINITTEE 2. Continue value	0 - 1 -	-11.7
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 9-17-35 Name & Address:		
Melissa Lawrence		e e e e e e e e e e e e e e e e e e e
18134 FAIRBALKS RI.	s 1400°	s 1400 ⁻
5. If over \$100,00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation OWNER Employer LAWRENCE Eng Inc.		
Business Address 4344 Sifver Lake Ad. Linday, MI	48451	
Type of Contribution: Direct Loan from a person Fund Raiser	_	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt		
Name & Address Bryon Briday stine		P.S. L.
2115 RAY Rd.	\$ 1400°	\$ 1400
Fenton MT 48430		
= 15	Click Here for	Memo Itemization
Occupation Engineer Employer LawRonce Eng Truc.	~ 11	
Business Address 4344 Silver like Rd Lindar MI 49	8451	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 9-17-35		
Row Hansen	2 0 40 20	1000
7301 S. RAucholt Rd.	\$ 01800	\$ 2800
ST. Charles MI 48655	Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please provide: Source Sou		Liam.
Occupation	II 4860D	
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	7 -{060}	
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 9-17-35		
Name & Address A stall Hauser		
Angela Hanson D3015. Raucholt Rd.	. 2800	· 2800-
ST. Charles, MJ 48655	\$ 000	\$
and an analysis of the control of th	Click Here for	Memo Itemization
Occupation Course Employer Spicer Orloup.		_
Occupation Employer Spicen Group. Business Address 330 5 - Washington Are Saginaw MI	48607	
Type of Contribution: Direct Loan from a person Y Fund Raiser		
Page Subtotal	8400-	-
Grand Total of All Schedules 1A (Complete on last page of Schedule)		J
(Somplete on last page of contents)	Enter this total on line 3a of Summary	
Page 5 of 11	Page.	



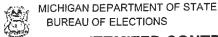
1. Committee I.D. Number 33520

2000 CANDIDATE COMMITTEE 2. Committee Name 7. Cumulative for Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount Election Cycle for Each middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Contributor (Through Committee (PAC) Report all contributions regardless of amount. date of receipt) 4. Date of Receipt 3. Contribution # 1 PAC Receipt? Name & Address: JASAN 695CX 2800 s 2800 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Employer. Occupation **Business Address** Type of Contribution: Loan from a person 4. Date of Receipt YES 3. Contribution #2 PAC Receipt? Name & Address T. Thom/son \$ 5600 - \$ 5600 -12191 JONNINGS Rd. Lindan, MI 48451 Click Here for Memo Itemization ▼ 5. If over \$100.00 cumulative, please provide: Blue-Water Sulations OWNOR Occupation _ Awhynn Hills, MI 48326 **Business Address** Fund Raiser Direct Loan from a person Type of Contribution: PAC Receipt? 4. Date of Receipt YES 3. Contribution #3 Name & Address: AARON DAVER ROAT 13401 LDR. N 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization ENTINEER Employer_ Occupation Business Address Loan from a person Type of Contribution: 3. Contribution # 4 PAC Receipt? 4. Date of Receipt Name & Address 5670 POMA \$ 6350 s 6350 Hovell, MI 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Edh Const OWNEL Airmont Dr. S. 5040 Business Address Fund Raiser Loan from a person Type of Contribution: Direct Page Subtotal

Page 6 of 19

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

7550



3. Contribution # 1 Name & Address:

Occupation

Business Address

3. Contribution #2

Name & Address

Type of Contribution:

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

48 8 36

Loan from a person

Employer

YES

Committee (PAC) Report all contributions regardless of amount.

Clinton MI

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

OWNER

PAC Receipt?

Steven Madrini 37532 Hidden Halley CT.

PAC Receipt?

18890 SAN Questin Pe.

Michael Mc Novald

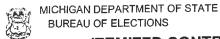
1. Committee I.D. Number 2000 2. Committee Name 7. Cumulative for Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Election Cycle for Each Contributor (Through date of receipt) 4. Date of Receipt 3550 Click Here for Memo Itemization RICKMAN CONST Fund Raiser 4. Date of Receipt s 1400 - s 1400

A A A A A A A A A A A A A A A A A A A	
LATHAGA V.II. MT 460 76 i. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
14/1/	
Occupation Engineer Employer	11 47 46202
Business Address 555 Hulet Wa. Bloomfield Hy	ls, MI 48307
Type of Contribution: Direct Loan from a person Fund Raiser	
. Contribution #3 PAC Receipt? YES 4. Date of Receipt 9-3-25	
lame & Address:	
Tuho Frank	1400- 1400-
Juhn Fraght 4411 Am horst	s 1400 s 1400
ROYAL OAK, MI 48673	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:	Click Here for Werne Remization
Francisco - HRC	
3 coupanon	G 26 3
Business Address	8 30 K
Type of Contribution: Direct Loan from a person Fund Raiser	
. Contribution #4 PAC Receipt? YES 4. Date of Receipt 9-3-25	
lame & Address	
Daniel Mitchell	
4725 Seb Ring DR.	s 1400 s 1400
White Lake, MI 48383	\$ 7,000
to the second contesting whose provides	Click Here for Memo Itemization
Occupation Englaced Employer	
	T 116 2.1
Business Address 555 Halet DR. Bloomfield Hills, M.	1 45708
Type of Contribution: Direct Loan from a person Fund Raiser	
Page Subtotal	1750
Grand Total of All Schedules 1A	

(Complete on last page of Schedule)

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CANDIDATE COMMITTEE

1. Committee I.D. Number 3353

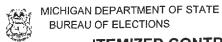
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2. Committee Name

Teff Wright 2000

OARDIDATE OF 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 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 93-25 Name & Address: Thomas Maxwell 1850 N. Livinnis Rl. Rochesta Hills MJ 48866 5. If over \$100.00 cumulative, please provide: Occupation Employer HRC Business Address 555 Hulet Dr. Blamfield Atls MJ Type of Contribution: Direct Loan from a person Fund Raiser	\$ <u>1400</u> Click Here fo	\$ <u>1400</u> or Memo Itemization ▼
A. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9-24-25 Name & Address Michael Digostinii 17565 Augusta. M. Whomb MI 48042 5. If over \$100.00 cumulative, please provide: Occupation Owner Employer Business Address 15801 33 Mile Macomb MI 480 Which MI 480	Click Here fo	\$ 5000 Tright Strate of the strategy of the s
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 9-34-35 Name & Address: Replace Pand Valley Dr. Ork Ind, MT 48363 5. If over \$100.00 cumulative, please provide: Occupation Care Employer Dr. Business Address 1580 33 Mile Macanh MT 481 Type of Contribution: Direct Loan from a person Y Fund Raiser	\$ <u>5000</u> Click Here for	\$ <u>\$000</u>
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 9-24-25 Name & Address Shassaw Shab 14025 Swanee Beach PR. Fewfor MI 48430 5. If over \$100.00 cumulative, please provide: Occupation Ownor Employer Sorensew Gross Constitution: Business Address III E Count ST Suite IA Flint Mileston Stopped Contribution: Direct Loan from a person Fund Raiser	6	\$ <u>J800</u> • Memo Itemization ▼
Page Subtotal	14200-	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	J

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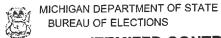


1. Committee I.D. Number

33520 -AI WRIGHT 2000

CANDIDATE COMMITTEE	2. Committee Name	Jett	WRIGHT 20
Enter contributor's name and address. If contribution is from an individual middle initial. Check box to indicate if contribution is from a Political Committee (PAC) Report all contributions regardless of amount.	, enter last name, first name, nittee or an Independent	6. Amount	7. Cumulative for Election Cycle for E Contributor (Throug date of receipt)

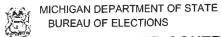
middle initial. Check box to indicate if contribution is from a Political Committee or an independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 9-34-35 Name & Address:	
Robert Cook 7220 E. Bunt Rd.	s 1400 - s 1400 -
Birch Ran, MJ 48415	
Occupation OWNER Employer COCK EXCAUATING I	The click field for Monte Assumation
Business Address 4344 Sitven lake Rd. Linder MI L	18451
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9-34-35	
Name & Address WARREN GREEN	
1104 LAURO / LN.	s 750° s 750°
Napraville, IL 60540	
	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation	and Jac
Business Address 3681 Orkanos Kd Suite 600 Orkenas MI	48846
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10-1-35 Name & Address:	
AECOM PAC	\$ 2000 - \$ 2000
2000 K. Street Suite 800 WAShirty AC 20006	and a
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer 51 me	
Business Address SAM e	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 16-1-35	
Name & Address The Address Man Kham	
Shannon Mankham (22) Rising Sun PA. EROVE City OH 43123 5. If over \$100.00 cumulative, please provide:	s_2000 s_2000 -
EROVE City, OH 43123	
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation engineed Employer HLCON	
Occupation <u>engineer</u> Employer <u>AECOM</u> Business Address 303 E. Wacker Saite 600 (hichgo IL	60601
Type of Contribution: Direct Loan from a person Fund Raiser	
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Grand Total of All Schedules 1A (Complete on last page of Schedule	



1. Committee I.D. Number

CANDIDATE COMMITTEE 2. Committee Name	Jeff h	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 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 10-1-35 Name & Address: BRIN PAGE 418 hough Point PA. Avon Lake, OH 44013 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address 303 F. WA-ckel Suite 660 Chicago, IL 6 Type of Contribution: Direct Loan from a person Fund Raiser	Click Here for	\$ <u>J350</u> Memo Itemization ▼
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address Clair Penhody 1190 Turkey Rd. Fenton, MT 48430 5. If over \$100.00 cumulative, please provide: Occupation Owner Employer Ballaghar Insu Business Address 1190 Turkey Rd Fonton, MT48430 Type of Contribution: Direct Loan from a person Fund Raiser	\$ <u>/000</u> Click Here for	\$ <u>∫000</u> Memo Itemization
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10-1-35 Name & Address: DAVID hucks 12096 Mac Intsh M. Fentur MI 48430 5. If over \$100.00 cumulative, please provide: Occupation Magal Employer & Maghet Task Business Address 1190 Turkey Rd Fontor MI 48430 Type of Contribution: Direct Loan from a person Fund Raiser	\$ 1000 Click Here for I	\$Memo Itemization
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10-1-25 Name & Address Daviel Chaistain 2736 Still Valley IR. Enabling MT 4823 5. If over \$100.00 cumulative, please provide: Occupation Enables Employer Tetra Tach Business Address Type of Contribution: Direct Loan from a person Fund Raiser	<i>(-</i>	\$\$Memo Itemization
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Grand Total of All Schedules 1A (Complete on last page of Schedule)



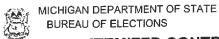
CANDIDATE COMMITTEE

1. Committee I.D. Number 33520

mmittee I.D. Number			
mmittee Name	Jeff	WRIGHT	2000
mmittee Name	Jeff	WRIGHT	1

CANDIDATE COMMITTEE 2. COMMITTEE TRANS		
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 10-1-35 Name & Address: Scott Kulhawk PO Box 183	. 1400	s 1400
New LothRop, MI 48460	\$ 100	\$ 7100
E If avor \$100 00 cumulative please provide:	Click Here fo	or Memo Itemization
Occupation Man Employer Metalt Elect.		ـــــــ
Business Address 4500 Monpish Rd Swind & Check	MJ 48473	
Type of Contribution: Direct Loan from a person V Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt // 1- 35		
Name & Address BRINN BUSCH \$6760 SEADON PR, Chestenfield MT 48047 5. If over \$100.00 cumulative, please provide: Occupation	\$1400 Click Here fo	\$\$ r Memo Itemization ▼
Occupation	MT NEON	
	48098	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10-1-35	-	
FRED TACKSON	\$ 150	\$ 150
1477 S. OAK KJ.		
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
5. If over \$100.00 cumulative, pléase provide: Occupation	48458	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? XYES 4. Date of Receipt 10-8-35 Name & Address		
Name & Address Miller (Antield PAC 150 W Jefferson, 5 Te 2500 Petroit, MI 48226	s 2400	s 2400
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer	Gillolk Florid	
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		·
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CANDIDATE COMMITTEE

1. Committee I.D. Number 33

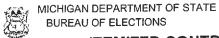
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2. Committee Name

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 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 10-8-05 Name & Address:		
John Gesielski 9754 Pine WALK PASS Linden, MI 48451	s /000°	\$ /000
5. If over \$100.00 cumulative, please provide: Occupation Comparison Compar		or Memo Itemization
Occupation Engloyer Employer WIVE First MI 59 Business Address 555 5. Saginaw ST F/Int MI 59	id=001 485	00
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10-8-35 Name & Address		
TIM ColeMAN 2433 Beakshire Ave	s1000	* 1000 T
Avon, 0H 44011	0" 1 11 5	
5. If over \$100.00 cumulative, please provide:	Click Here to	r Memo Itemization
Occupation CNGINCEN Employer		
Business Address		
Type of Contribution: Direct Loan from a person Tund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10-8-35 Name & Address: Rebecch Smith J 980 Willwood M. Holly, MI 4844 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	\$	\$ / 000 ▼
Type of Continuous State Continuous Continuo		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 10-8-23 Name & Address MA)T STACEY 1359 Hendrie Canton MT 48187	\$ 500	- s_500-
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	1 2	
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CANDIDATE COMMITTEE

1. Committee I.D. Number

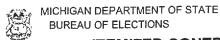
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2. Committee Name

I 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 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 10-8-35 Name & Address: JASON M BRIDE Il Woodland VL, PHS hall h PA 1533 & 5. If over \$100.00 cumulative, please provide: Occupation PA 1835 S. SAGINIM ST FINIMI Type of Contribution: Direct Loan from a person X Fund Raiser	\$ 1000 Click Here for 485W 5Te.	\$ 000 The state of the state
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address DAVID DIPIET RO 5 968 EMPLAND LAKES PR. Medium OH 15 278 5. If over \$100.00 cumulative, please provide: Occupation	\$/000 Click Here for	\$
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt /0-8-35 Name & Address: PREV 0 166 Pl Anderson Paul	\$ 500 Click Here for	\$_500 Memo Itemization
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10-8-35 Name & Address 714 Ordunke 235 F. 8359. NY, NY 16065 5. If over \$100.00 cumulative, please provide: Occupation Proposed Employer Same Same Type of Contribution: Direct Loan from a person Fund Raiser	\$ 450 Click Here for	\$\$ Memo Itemization
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1. Committee I.D. Number 33 5 2 0

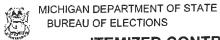
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CANDIDATE COMMITTEE 2. Committee Name	0 017	11911.
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent 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 18-8-15 Name & Address: Thomas Brzeziński 11945 Whydswath M. Thomas Fl. 33666 5. If over \$100.00 cumulative, please provide: Occupation Cugineen Employer Business Address 555 5. Saginaw 51 Flint M.T. 51 Type of Contribution: Direct Loan from a person Fund Raiser	_	\$
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10-8-35 Name & Address PATIAL PARAMETERS AND	\$ 500 Click Here for	\$ 500 ¯
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10-8-35 Name & Address: T. AQVA I SALVE, MT 48176 5. If over \$100.00 cumulative, please provide: Occupation Ch 1 Neek Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	\$/000 Click Here for	\$/
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 10-8-35 Name & Address Audress Audress Audress Aun Mhod, MI 48105 5. If over \$100.00 cumulative, please provide: Occupation engineer Business Address SMC	\$ /000 Click Here for	\$/000 Memo Itemization ☑
Type of Contribution: Loan from a person X ruliu Raise. Page Subtotal	3500-	
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Grand Total of All Schedules 1A (Complete on last page of Schedule)

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CANDIDATE COMMITTEE

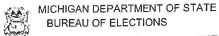
1. Committee I.D. Number

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 10-8-35 Name & Address:		
JASON Kenyon 10305 Jewell Rd. GAINDS, MT 48436 5. If over \$100.00 cumulative, please provide:	s 1000	s / 000 -
5. If over \$100.00 cumulative, please provide: Occupation English Employer	Click Here for	Memo Itemization
Occupation engineer Employer VOIROE TRIP	1502 Ste 201	
Business Address	1500 SIE VOI	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10-8-35 Name & Address		
Sharn Krongh		10.
8222 WebsEN DR.	\$ 1000	\$ 1000
Dextex, MI 48130	Oliali Hana fan	Mama Itamization
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Engineer Employer Whole TRING		
Business Address Sumc		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10-8-35		
Name & Address:	160-	1/
	s_ 250 ⁻	s 250-
Name & Address: Howther Choslek 3176 Pickford DR SE Ada, MI 49301		
Heather Choslek 3176 Pickford DR SE Ada, MI 49301		\$\$
Name & Address: Heather Choslek 3176 Pickford DR SE Ada MI 49301 5. If over \$100.00 cumulative, please provide: Occupation Engineer Employer Black of Verch	Click Here for	
Name & Address: Heather Choslek 3176 Pickford DR SE Ada, MI 49301 5. If over \$100.00 cumulative, please provide: Occupation	Click Here for	
Name & Address: Heather Choslek 3176 Pickford DR SE Add, MT 49301 5. If over \$100.00 cumulative, please provide: Occupation	Click Here for	
Name & Address: Heather Chaslek 3176 Pickford DR SE Ada, MT 4530) 5. If over \$100.00 cumulative, please provide: Occupation Englineer Employer Birch Business Address 3556 Sheen ount Ann Pahor Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10-8-35	Click Here for	
Name & Address: Heather Choslek 3176 Pickford OR SE Ada MI 4930/ 5. If over \$100.00 cumulative, please provide: Occupation Engineer Employer Back of Verch Business Address 3556 Scen Count Ann Arhor Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10 8-25 Name & Address Schwaw Vreke [459 Lark-side OR.]	Click Here for	
Name & Address: Heather Choslek 3176 Pickford OR SE Ada MI 4930/ 5. If over \$100.00 cumulative, please provide: Occupation Engineer Employer Bick of Verch Business Address 3556 Scen Count Ann Arhor Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 108-25 Name & Address Schwaw Vreke 1459 Larkside OR. Employer Bick of Verch Fund Raiser	Click Here for	
Name & Address: Heather Choslek 3176 Pickford OR SE Ada MI 4930/ 5. If over \$100.00 cumulative, please provide: Occupation Engineer Employer Bick of Verch Business Address 3556 Scen Count Ann Arhor Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 108-25 Name & Address Schwaw Vreke 1459 Larkside OR. Employer Bick of Verch Fund Raiser	Click Here for MT 48105	
Name & Address: Heather Chaslek 3176 Pickford Or SE Ada MI 49301 5. If over \$100.00 cumulative, please provide: Occupation Engineer Employer Birch Ount Awn Prhore Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 Name & Address Schwaw Vreke 1459 Lakeside Or. E. hausing, MI	Click Here for MT 48105 \$ 350^- Click Here for	Memo Itemization s
Name & Address: Heather Choslek 3176 Pirkford DR SE Add, MI 4930/ 5. If over \$100.00 cumulative, please provide: Occupation	Click Here for MT 48105 \$ 350^- Click Here for	Memo Itemization s
Name & Address: How the & Choslek 3176 Pick fold DR SE Add, MI 49300 5. If over \$100.00 cumulative, please provide: Occupation	Click Here for MT 48105 \$ 350^- Click Here for	Memo Itemization s

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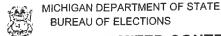
Grand Total of All Schedules 1A (Complete on last page of Schedule)



1. Committee I.D. Number 33 5 2 0

CANDIDATE COMMITTEE 2. Committee Name	Jett WRIGHT QUO
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 10-8-35 Name & Address: Waste Marke next EBEF + MT PAC	
48797 Alpha. DR. 51= 100 Wixon, MI 48393	s 750° s 750°
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Business Address ———————————————————————————————————	
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt /0875	
Name & Address SAMIR MAHA 810 Binch wood Dewitt, MT48820	\$ 750 \s 750 \
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Business Address	48846
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10-8-35 Name & Address: Thomas Washahaugh 233 Athlore Beach Day City MT 4806 5. If over \$100.00 cumulative, please provide:	\$ 2150 \$ 150 Click Here for Memo Itemization Solution ■
5. If over \$100.00 cumulative, please provide: Occupation OWNPA Employer Occupation Business Address 9909 Blocks Riven Rd. Dimondiale, MT Type of Contribution: Direct Loan from a person Fund Raiser	488)
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 10-8-35 Name & Address Cuntis BRZYSKi 4387 Bonny Mede 57. JACKSon, MJ 49361 5. If over \$100.00 cumulative, please provide:	\$\(\alpha\) \(800^\) \(\sigma\) \(
Occupation	
Page Subtotal	6450-

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



1. Committee I.D. Number 33520

2000 **CANDIDATE COMMITTEE** 2. Committee Name 7. Cumulative for Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount Election Cycle for Each middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Contributor (Through Committee (PAC) Report all contributions regardless of amount. date of receipt) PAC Receipt? 4. Date of Receipt 3. Contribution # 1 Name & Address: s 250 s 250 Brack Field, WII 53005

5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization 3550 GREEN COURT CNGINEER ANN FABUR MI48105 **Business Address** Type of Contribution: Loan from a person 10-8-25 4. Date of Receipt PAC Receipt? YES 3. Contribution #2 Name & Address DUNALD DAWES s 2800 - 2800 -9860 E. 5 hip MAN CORUNNA, MT 48817 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization ___ Employer___ GIASSER - DANGS OWNER Occupation _ 4130 Commerce DR. Suit C Business Address Loan from a person Fund Raiser Type of Contribution: Direct PAC Receipt? YES 4. Date of Receipt 3. Contribution # 3 Joseph Manuskin Jr. 750 . 750 637 NAIRN CIRcle Highland, MI 48357 Click Here for Memo Itemization ▼ 5. If over \$100.00 cumulative, please provide: OWNER Employer Occupation 1155 **Business Address** Loan from a person Type of Contribution: Direct PAC Receipt? 4. Date of Receipt 3. Contribution # 4 Name & Address DAVID LUCAS · 800 · 800 -12096 MACINDOSH DR. Fer low, MJ 48430 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Perhody Insu Occupation. Business Address Fund Raiser Loan from a person Type of Contribution: | Direct Page Subtotal 4600

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

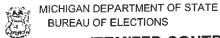
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Page 17 of 19

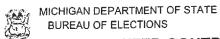


1. Committee I.D. Number 33 5 2 0

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CANDIC	ATE COMMITTE	EE	2. Committee Name		E) T	UKIGHT QUOU
Enter contributor's name and add middle initial. Check box to indic Committee (PAC) Report all contributions and add add and add add and add add and add ad	ate if contribution is from	a Political Comm	enter last name, first nam ittee or an Independent	ne, 6	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address:	Receipt? YES	4. Date of Rece	pt 10-8-25	<u></u>		
THOJ BEND	ere Pd.			\$	3550	s 3550
5. If over \$100.00 cumulative, p		Fleis -	- Vander best	+	Click Here fo	r Memo Itemization
Occupation Engineer Business Address 947	- 1 1 11 0 1	Suite de	1 GRAND BI	nc, N	I 48439	
Type of Contribution: Direct	Loan from	a person	Fund Raiser			
3. Contribution #2 PAC R	eceipt? YES	4. Date of Recei	pt 10-15-25			
Jahn Nich	kels ney LN SW			\$	1400-	· \$ 1400-
BRYON CO	enter MI	49315		2	0	
-		ETNI	Suppli		Click Here for	r Memo Itemization
Occupation Property 100		SF 6	RAND RAPID	5 M	I 49508	
Business Address /0 9 6 Type of Contribution: Direct	Loan from a	1	Fund Raiser	7		
	eceipt? YES	4. Date of Rece	ipt 10-20-25			
Jame & Address:			10 00 0)			
BARRY Wolf	LE1			\$	500	\$ 500
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GRAND BIANC, 5. If over \$100.00 cumulative, pl	ease provide:	0 1	111/1/		Click Here for	Memo Itemization
Occupation A TORN		13. h	1.17 Alfor	ncy		
Business Address	51me					
Type of Contribution: Direct	Loan from	a person				
	Receipt? YES	4. Date of Rece	eipt 10-30-35	5		
Vame & Address	JARRett					_
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BIRMINGHA	m, /tL 3524	٦	_			
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Occupation 804	Wood Po	PPY CI	T. Hoover	AL	35244	
Dusiliess Address			Fund Raiser	1	11011	
Type of Contribution: Direc	L LOAN NOM	a poison	Page Sul	btotal	8250	
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Grand Total of All Schedules 1A (Complete on last page of Schedule)



1. Committee I.D. Number 33520

2. Committee Name Jeff WRight 2000

CANDIDATE COMMITTEE 2. Committee Name	0 - 1 - 1	VIII
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 10-20-25 Name & Address: John HagelsKand 1 COI Royal Mile Binming ham, AL 3524 5. If over \$100.00 cumulative, please provide: Occupation Employer American Ductile Pipe Business Address 804 Wood Poppy CT Houven, AL Type of Contribution: Direct Loan from a person X Fund Raiser		s∂800 or Memo Itemization ▼
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10-30-35 Name & Address Jekemy Cook 8409 Apple Blussum Ln. Flushing, MI 48433 5. If over \$100.00 cumulative, please provide: Occupation Owner Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser		s
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10-20-25 Name & Address: Kevin Kilby 278 Kings Brock Dr. Franken muth, MI 48 1734 5. If over \$100.00 cumulative, please provide: Occupation Atorney Employer M Frank Morris Atorne Business Address 2075 W Big Berven Suite 750 Truy,	Click Here for	\$ J800 → Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	\$Click Here for	\$ Memo Itemization ▼
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ITEMIZED OTHER RECEIPTS SCHEDULE 1A-1

CANDIDATE COMMITTEE

1. Committee I.D. Number 33520

	2. Comm	ittee Name	Jett	WRIG	hI	2000
3. Name & Address From Whom Received 4. I	Date of Receipt	5. Type of	Receipt			mount
Receipt #1 Date Name & Address:	of Receipt	Loan from a Le	nding Institu	ıtion	_	
Hunting ton Browk	1.20	Interest			\$ <u>3</u>	,02
PUBOX 1558 GHW	<i>из</i> и	Refund \Rebate	€	Click for Memo) Itemiza	tion Type
Hunfing ton Bank PUBOX 1558 GAN Columbus, OH Fur	4 3 3 1 6 nd Raiser	Other (Specify)				
Receipt #2 Date of Name & Address:	of Receipt	Loan from a Le	nding Institu	rtion		
Traine di Address.		Interest		:	B	
		Refund \Rebate		Click for Mem	o Itemiza	ation Type
Fun	nd Raiser	Other (Specify)				
Receipt #3 Date of F Name & Address:	Receipt	Loan from a Len	ding Institut	tion		
		Interest		\$		
		Refund \Rebate		Click for Memo) Itemiza	tion Type
☐ Fun	nd Raiser	Other (Specify)		_		
Receipt #4 Date of F Name & Address:	Receipt	7	P 3 - 11 - 12			
Name & Address:		」Loan from a Len □	aing institut	ion	;	
	<u>L</u>	Interest				
	<u></u>	Refund \Rebate		Click for Memo	Itemizat	tion Type
Ammuni	d Raiser	Other (Specify)				
Receipt #5 Date of Ro Name & Address:	eceipt	Loan from a Lend	ding Institution	on		
		Interest		;	.	
		Refund \Rebate		Click for Memo	Itemizat	tion Type
Fund	d Raiser	Other (Specify)				
Receipt #6 Date of Rec Name & Address:	ceipt	Loan from a Len	ding Instituti	ion		
		Interest			\$	
		Refund \Rebate	(Click for Memo	Itemizati	ion Type
Fund	d Raiser	Other (Specify));		
Receipt #7 Date of Rec Name & Address:	elpt	Loan from a Len	ding Institut		•	
		Interest			\$	
		Refund \Rebate	C	Click for Memo	Itemizatio	on Type
Func	d Raiser	Other (Specify)				
			Р	age Subtotal	3	.02
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SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 33520

2. Committee Name Jeff Wright 2000

		E Data	6. Amount
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	o, Amount
Expenditure #1			601
· ·		8-6-25	9260
Name USPS	1 1-	Date	4 13
Address 2500 S. Linden Rd.	Purpose: <u>Election</u> exp.	Date	
Address 2000 5. All Paris 1.0.		f Mama k	tomization Type
FITAT MI 48532	Click He	ere for Memo i	temization Type
1 1101 112 18370	Check box if this expenditure is payment of		
·	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2		6.102	04
Name Copen Tio	1	8-21-8	\$1/85
Name Open Tip Address 337 Reser Voir 57 +3	Purpose: Election Exp.	Date	
Address 337 Reser Voik 31 +3	Purpose: CICCIION END.		
71001035 33 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Cliab Ma	vo for Momo II	emization Type
Needham Heights, MA	Click ne	ste lot Memo n	leifilzation Type
02494	Check box if this expenditure is payment of		
00111	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
		11.1	
Name Hunting for Brook		Mouthly	s 2)
A FAMIST	2 h na 111.	Date	
Address Pu Box 1558 6AW37	Purpose: DWK 101/1/14	20.10	
1 1 dH 12716	FOR Click Ho	re for Memo It	emization Type
Columbus, OH 43216	Purpose: Bwk Monthly Fee Click He	ile ioi Memo it	emization Type
·	Check box if this expenditure is payment of		
	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name N// C/ ST.		9-11-15	2/11-
Name All SAFO STURAGE	^^	7-16-65 Date	\$ > 60
	/ In //	Date	
Address 1320 N. Belsay Rd.	Purpose: UTTICE CY/		
DI ME WALL	Click He	re for Memo It	emization Type
Burkn, MI 48509	Chick Fic	NO 101 MONIO 1	ار الما
, , , , , , , , , , , , , , , , , , , ,	Check box if this expenditure is payment of		
	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
TI (a 1 D + au		6 21/2	\$ 365 10
Name The OROAT PUT-ON	111	7-24-25	\$ 365
2216 0 / 442	Purpose: Election exp.	Date	
Address 3240 POSA down 1708			
Name The GROAT Put-on Address 3240 PASADONA AVE Flint, MI 48504	Click He	ere for Memo I	temization Type
1-11M 11 48504	Check box if this expenditure is payment of		
	debt or obligation reported on previous		
Fund Raiser	statement		
	Subtota	al this page	1625.34
			7
	Grand Total of all S		
	(Complete on last page	or scriednie) [E to able total

Enter this total on line 8a of Summary Page

Page ____ of ___



SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

33520

2.	Committee	Name	_

Jeff Wright 2000

CANDIDATE COMMENT TEE 2. C	ommittee Name	
Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date 6. Amount
Expenditure #1 Name KAY DREW PRINTING Address 1035 Ann Arbon 5T. Flint, MI 48503	Purpose: Election Exp Click F Check box if this expenditure is payment of debt or obligation reported on previous statement	93435 \$ 179.36 Date Here for Memo Itemization Type ■
Expenditure #2		16
Name Williams Gan Site Address 7389 Lapeer Rd.	Purpose: FundRAisen GAD.	Date \$ 10,9163
Davison, MI 48423	Check box if this expenditure is payment of debt or obligation reported on previous statement	lete to we no normalization Type
Expenditure #3		
Name WARREN VYUYAN 1455 LAURENTIAN MISS Address Flint MI 48532	Check box if this expenditure is payment of	Date Sere for Memo Itemization Type
Fund Raiser	debt or obligation reported on previous statement	
Expenditure #4 Name Colony Market Address 311 E. Grand Blanc Rd. Grand Blanc, MI 48439 Fund Raiser	Purpose: Fundanses Click F Click F Check box if this expenditure is payment of debt or obligation reported on previous statement	9-J-J5 \$ 18 76 Date \$ IR 76 Here for Memo Itemization Type
	Statement	
Name Huns Man Hunt Club Address 3166 Havens Rd. DRyden, MI 48428 Fund Raiser	Click H Check box if this expenditure is payment of debt or obligation reported on previous statement	Date \$40,986 3
	Subto	otal this page 50 736,08
	Grand Total of all	

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



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

33520

1. Committee I. D. Number

2. Committee Name Jeff Wright 2000

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. Date	6. Amount
Expenditure #1 Name DLT TRAding Address 2900 Cleveland Ave MARINEH, WI 54143	Purpose: Fund Raisel Exp. Date Click Here for Memo Item Check box if this expenditure is payment of debt or obligation reported on previous statement	
Expenditure #2		
Name Address	Purpose:Click Here for Memo Iter	s mization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	
Expenditure #3		
Name Address	Purpose: Date Click Here for Memo Iter	\$mization Type ▼
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	_
Expenditure #4		
Address	Purpose: Click Here for Memo Iter Check box if this expenditure is payment of debt or obligation reported on previous	\$
Fund Raiser	statement	
Expenditure #5 Name		\$
Address Fund Raiser	Purpose: Date Click Here for Memo Iter Check box if this expenditure is payment of debt or obligation reported on previous statement	
		7950.17
	Grand Total of all Schedules 1B (Complete on last page of Schedule)	7950.17 62,311.59



INCIDENTAL OFFICE EXPENSE DISBURSEMENTS **SCHEDULE 1C** CANDIDATE COMMITTEE

(For use by officeholders only)

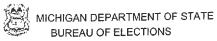
1. Committee I. D. Number 33520

Name and address of person to whom disbursement was made	Description of Disbursement (Be specific & you may assign a disbursement code*)	5. Date 6. Amount of Disbursement
Disbursement # 1	Purpose	
Name & Address:	the state of the s	7-25-25 \$ 100
Genesee Co FAIR	Memorial Jim Jakes	Date \$ 100
2188 W MUNIT MARRIS Rd.		Click for Memo Itemization Type
MT. MURRIS, MI 48458	Disbursement Code 60	
Check box if this disbursement is payment of debt or obligation	Fund Raiser	
reported on previous statement		
Disbursement # 2 Name & Address:	Purpose	7-20-20-600
Vehicle City Sports 519 S. Saginaw ST. suit	Sponsor	7-30-35 \$_600 Date
519 S. SAGINAW ST. Suit	200	Click for Memo Itemization Type
Flint, MI 48502	(=h	
Check box if this disbursement is payment of debt or obligation	Disbursement CodeFund Raiser	
reported on previous statement		
Disbursement # 3 Name & Address:	Purpose Spansur	7-77-35 \$ 1200
Genesee Co Frin		Date
2188 W MT. Marris Rd.		Click for Memo Itemization Type
MT. Monnis, MT 48458	EA	
r-1	Disbursement Code	
Check box if this disbursement is payment of debt or obligation reported on previous statement	Fund Raiser	
Disbursement # 4	Purpose	D
Name & Address:	Tickets	8-20-15 \$15
Genesee Co Democratic PARTY	JICKEYS	Date
3518 Robert T Longway B	Jud.	Click for Memo Itemization Type
Flint MI 48506		
	Did was south Code 60	
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement CodeFund Raiser	
		Subtotal this page 1975
	Grand Total	of all Schedules 1C
	(Complete on las	st page of Schedule)

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



INCIDENTAL OFFICE EXPENSE DISBURSEMENTS SCHEDULE 1C

1.	Committee	1.	D.	Numbe

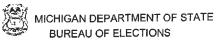
33520

CANDIDATE COMMITTEE (For use by officeholders only) 2. Committee	ommittee NameJeff Wright 20	000	
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: GTEO Itas Kins 3437 5. Belsay Rd	Purpose Ficket	8-JU-35 Date Click for Memo Iter	
Burton, MI 48519	Disbursement Code	CHCK TOT WIGHTO HE	
Disbursement # 2 Name & Address: The David Leylow Comm.	Purpose Ticket	8-17-15 Date	5 <u>\$ 100</u>
POBOX 320349 Flint, MI 48532		Click for Memo Iten	nization Type
	Disbursement CodeFund Raiser		
Disbursement # 3 Name & Address: A & O C	Purpose Spanson	9-3-3 Date	S \$ 1000
2245 E. Balduin Rd.	200	Click for Memo Item	ization Type
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code		
Disbursement # 4 Name & Address: Genesee Co ARg. Society 2188 W. MT. Morris Rd MT. Morris, MI 48458	Menhership	9-17-3 Date	
MT. MonRis, MI 48458 Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code		
		Subtotal this page	1225
	Grand Tota (Complete on la	I of all Schedules 1C st page of Schedule)	

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



INCIDENTAL OFFICE EXPENSE DISBURSEMENTS SCHEDULE 1C CANDIDATE COMMITTEE

(For use by officeholders only)

22520 1. Com

mittee I. D. Number	33520

Jeff Wright 2000 2. Committee Name

(1 of doe by emechanical emy)	4. Description of Disbursement	5. Date	6. Amount of
3. Name and address of person to whom disbursement was made	(Be specific & you may assign a	5. Date	Disbursement
	disbursement code*)		
Disbursement # 1	Purpose		
Name & Address:	DONATION	9-25-35	s 225
FOP 126		Date	
FOP 126 POBOX 7738		Click for Memo Iter	mization Type
PU POR 1110		Click for Memoriter	inzadon Type
Ft.nt, MI 48507			
J 11W1 , 1 12 1000.	Disbursement Code		
a visit is the second to a sympost of debt or obligation	Disbursement code		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Fund Raiser		
Disbursement # 2	Purpose / / /		
	Fundamised Ticket		\$ 100 T
Move forward u/ Ellew Ellewharg	FUNDAMINAL SCENET	Date	3 7 7 7
prove joke man		Date	
2228 E Buder		Click for Memo Iten	nization Type
		Ollow for Monto Mon	
Burton, MI 48529	En		
	Disbursement Code		
Check box if this disbursement is payment of debt or obligation	Fund Raiser		
reported on previous statement			
Disbursement # 3	Purpose		
Name & Address:			\$
		Date	
		Click for Memo Item	nization Type
Check box if this disbursement is payment of debt or obligation	Disbursement Code		
reported on previous statement	Fund Raiser		
	Division		
Disbursement # 4 Name & Address:	Purpose		
Name & Address.			\$
		Date	
		Click for Memo Item	nization Type
<u> </u>			
Check box if this disbursement is payment of debt or obligation	Disbursement Code		
reported on previous statement	Fund Raiser		
		Subtotal this page	215-
			3525
	Grand Total o	f all Schedules 1C page of Schedule)	3525
	(Complete on last	F-30 0. 00.1000.0)	

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



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number 33520

Teld Wright 2000

CANDIDATE COMMIT	EE 2. Con	nmittee Name	Jett	WRIGHT 2000	
- USE A SEPARATE SHEET FOR EACH EVENT -					
	er of Individuals Attending pating (whichever is	5. Type of Fund	Raising Activity OOR EVENT	6. Address and Name (If any) of place where the activity was held Huns Min Hun 3166 Hueus Rd Private Residence	
7. Total Contributions	122,0	750-			
8. Other Receipts		<i>,</i> —)		
9. Gross Receipts (Add lines 7 and 8)	199 6	150			
10. Total Cost of Event Total Cost includes In-Kind Contribution 11. Check if event was a joint fund re	·		Ēvent)		
Co-Sponsor(s)	Contribution S (%)	_		Expenditure Split (%)	
	***************************************	marana di marana			
- 	an come eu na eu mei m	11000 E 2		***************************************	
The committee is required to file a period covered by the Campaign Receipts and expenditures listed Schedule (1A), Itemized In-Kind (1B)	Statement. on a Fund Raiser Sche	edule must also	be reported on t	he Itemized Contributions	
Summary Page. Each committee that participated	in a joint fund raiser m	ust file a Fund f	Raiser Schedule	for the event.	