

# CANDIDATE COMMITTEE COVER PAGE

#### FOR OFFICIAL USE ONLY

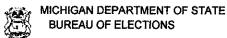
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and or	d signed by candidate.	3. This Statement covers Fron	n: 11/25/14 to	07/20/15
1. Committee I.D. Number		4. Candidate Last Name	First Name	M.I.
138271		Smith, Jr.	Robert	W.
		4a. Office Sought Including Dis		
2. Committee Name		Macomb County Com		
Committee to Elect Bob	Smith	4b. County of Residence MA	COMB	
5. Committee's Mailing Address		6. Treasurer's Name & Reside	ential Address	
39324 Eliot St.		Stella A. Smith		
Clinton Township, MI 48036		39324 Eliot St.		
		Clinton Township, M	II 48036	
Area Code and Phone (586) 465-4100 If the address in this box is different from the commmailing address on the Statement of Organization, be sent to this address by the filing official.  7. Treasurer's Business Address Same as #6	ilttee mail may	Area Code & Phone (586) 46  8. Designated Record keeper Designated Record keeper) N/A		IN CARD IN THE PHENT OF THE PHE
				COLERK
Area Code and Phone	<del></del>	Area Code and Phone		
9. TYPE OF STATEMENT		11.54.75	9e. Dissolution of Candid	ate Committee
9a. Pre-Election OR 9b. Post-Election  Pre-Election or Post-Election Statement relates to:	is not on the current year:		by the committee to the can by discharged and forgiven.	We certify any outstanding debt didate or his or her spouse is here and no longer collectible from
<b>X</b> Primary	July Quart	erly	the committee. The commit owes no lates fees or has an	tee has no oustanding assets,
General	October Q	uarterly	Further, if the dissolution car	anot he arented that this he
Convention			considered a request for the	Reporting Waiver.
Special	9c			
	Annua	l Statement () Coverage Year	Effective date of d	issolution
⊠School —	Amon	•		
Caucus	(Comp	dment to Campaign Statement blete Item 9a, 9b, 9c or 9e to te which Statement is being fed.)	Note: The disposition of resi Schedule 1B and the Summ	dual funds must be reported on ary Page.
Date of Election, Convention or Caucus				
11/04/14				
1110-111-1				
10. Verification: I\We certify that all reasonable diligenty and belief the contents are true, a	ence was used i accurate and co	in the preparation of this statement	ent and attached schedules (if	fany) and to the best of
Current Treasurer or Designated Record keeper  Stella A, Smit	h	, Stellall.	Smith Date	7/24/15
Type or Print Name		Signature	)	The state of the s
Candidate Robert W. Smith, Jr.		, Kew Inst	Date Date	7/24/15
Type or Print Name		Sionature		

1. Committee	I.D.	Number	138271

### SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Committee To Elect Bob Smith

RECEIPTS		Column I	
		This Period	Column II Cumulative this election cycle
3. Contributions			,
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	2,000.00	
b. Unitemized (less than \$20.01 each - no Schedule)		NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$	\$2,000.00	(18.) \$ \$2,000.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$		(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	\$2,000.00	(20.) \$ \$2,000.00
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	\$1,500.00	(21.) \$ \$1,500.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$		(22.) \$
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	\$9,170.96	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$		·
c. Uniternized (less than \$50.01 each - no Schedule)			
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	\$9,170.96	(23.) \$ \$9,170.96
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$		
b. Uniternized (less than \$50.01 each - no Schedule)	(40L) A		
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)		***************************************	<u>.</u>
DEBTS AND OBLIGATIONS 12. Debts and Obligations			(24.) \$
a. Owed by the Committee (Schedule 1E)	(12a.) \$	\$17,385.81	
b. Owed to the Committee (Schedule 1E)	(12b.) \$		
		ANCE STATEMENT	<u> </u>
13. Ending Balance of last report filed	(12)	\$7,896.54	
(Enter zero if no previous reports have been filed.)	(/,/		
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)		\$ \$2,000.00	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	\$9,896.54	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - 3	\$9,170.96	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.)	\$758.58 <b>*</b>	



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

#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_

138271

Enter contributor's na middle initial. Check Committee (PAC) Re	box to indicate if cor	ıtribı	ribution is from an individua ttion is from a Political Com ardless of amount.	ıl, er mitte	nter last name, first name, ee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt?	<b>V</b>	YES 4. Date of Rec	eipt	12/03/14		
Name & Address:		-	•				
Friends of Mac 39856 Baylor (							
Clinton Twp., N						<sub>s</sub> 500.00	<sub>s</sub> 500.00
5. If over \$100.00 cu		ovid	e:			<del></del>	
Occupation						Click Here fo	r Memo Itemization
Business Address							
Type of Contribution:	Direct		Loan from a person		Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	V	YES 4. Date of Rec	eipt	04/23/15	·	
Macomb Crime	efighters					4500.00	4500.00
18033 Gaylord						<sub>\$</sub> 1500.00	<sub>\$</sub> 1500.00
Clinton Twp., N	/II 48035						
5. If over \$100.00 cu	mulative, please pro	ovid	<b>)</b> :			Click Here for	Memo Itemization
Occupation		_ Er	nployer				
Business Address					· · · · · · · · · · · · · · · · · · ·		
Type of Contribution:	✓Direct		Loan from a person		Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?		YES 4. Date of Rec	ceipt			
						\$	_
						Ψ	\$
5. If over \$100.00 cu	mulative nlease nr	vid	<b>.</b> .			Click Here for	Memo Itemization
	-						
		_ t	mployer	<del></del>			
Business Address Type of Contribution:	Direct		Loan from a person	7	Cund Daines		
···	L	닏		<u> </u>	Fund Raiser		
Contribution # 4  Name & Address	PAC Receipt?	<u></u>	YES 4. Date of Re	ceip			
						\$	
						Ψ	<b>a</b>
5. If over \$100.00 cu	mulative, please pro	ovide	<b>9:</b>			Click Here for	Memo Itemization
Occupation			Employer	<del></del> ,			
Business Address							
Type of Contribution	Direct	Γ	Loan from a person	7	Fund Raiser		
		-	-			\$2,000.00	
						L ,	İ

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



### ITEMIZED IN-KIND CONTRIBUTIONS

138271

MITTEE 2. Committee Name Committee To El	act Rob Smith
	ect Dob Stiller
4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value 8. Cumulative for Election Cycle (Through date in Item 5)
Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description mileage  5. Date Of Receipt: 11/25/14 − 7/30/15  6. Vendor Name & Address:	156.00 <sub>\$</sub> 156.00
Goods or Services Purchased by Candidate or Others-LOAN  Description food/meetings  5. Date Of Receipt: 12/01/14  6. Vendor Name & Address:	4.00 \$ 44.00
Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN  Description phone  5. Date Of Receipt: 11/25/14 - 7/30//5  6. Vendor Name & Address:	00.00 \$ 1100.00
	5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased  4.

Page Subtotal \$1,300.00

\$1,300.00

Grand Total of all Schedules 1-IK

(Complete on last page of Schedule)



### ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 138271

CANDIDATE COMM	AITTEE 2. Committee Name Committee To	Elect Bob Smith
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Reportall in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services we purchased	7. Amount or Fair Market Value 8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address:	Endorsement or Guarantee of Bank Loan     Goods Donated or Loaned    Services Donated	
Stella Smith 39324 Eliot St. Clinton Twp., MI 48036	Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOA	\$ 200.00 \$ 200.00
If over \$100.00 cumulative, please provide:  Occupation: retired	Description Independent Services	-
Employer Name & Business Address:	5. Date Of Receipt: 11/25/14 - 7/26/15 6. Vendor Name & Address:	
•	self	Click Here for Memo Itemization
Fund Raiser Contribution		
Contribution # 2 PAC Receipt? Yes Name & Address	4.	\$ \$\$
If over \$100.00 cumulative, please provide: Occupation:	Description	ua.
Employer Name & Address:	Date Of Receipt:      Vendor Name & Address:	Click Here for Memo Itemization
Fund Raiser Contribution		
Contribution #3 PAC Receipt? Yes Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN	\$\$
If over \$100.00 cumulative, please provide:	Description	-
Employer Name & Address:	Date Of Receipt:     Vendor Name & Address:	Click Here for Memo Itemization
Fund Raiser Contribution		

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

\$200.00 | \$200.00

les 1-IK hedule) \$1,500.00

Page Subtotal

292

Enter this total on line 6 of Summary Page



# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

138271

2. Committee Name Committee To Elect Bob Smith

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name American Graphics		12/02/14	\$ 8052.04
Address	Purpose: printing, mailing	Date	3 0032.04
34895 Groesbeck			
Clinton Township, Mi 48035	<sub> </sub>	tere for Memo	Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2			
Name American Graphics		04/23/15	\$ 1058.92
Address	Purpose: printing, mailing	Date	
34895 Groesbeck	Click t	lere for Memo	Itemization Type
Clinton Twp., MI 48035	<b> </b>	iere ioi Menio	itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
<sup>Name</sup> Talmer Bank		07/20/15	\$ 60.00
Address	<sub>Purpose:</sub> bank charges	Date	¥ <u>00.00</u>
100 N. Main St.			–
Mt. Clemens, MI	<u> </u>	ere for Memo	Itemization Type
Cond Balance	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4 Name			
Hame			\$
Address	Purpose:	Date	Ψ <u></u>
	Click H	ere for Memo	Itemization Type
<b></b>	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name			
Address	Purpose:	Date	\$
	Click H Check box if this expenditure is payment of	ere for Memo	Itemization Type
Fund Raiser	debt or obligation reported on previous statement		
	Subtot	al this page	\$9,170.96

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



1. Committee I.D. Number 138271

EDULE 1E		Communition of the community
E COMMITTEE	2. Committee Name	Committee to Elect Bob Smith

CANDIDATE COMMITTEE  This Schedule itemizes:	. Committee Name	- to Elect Bob t	, result	
				·····
aDebts and obligations owed by_or forgiven the ci(C	ommittee OR b. Deb heck either a or b. Use only for the p	ts and obligations owed <u>to</u> urpose checked.)	or forgiven <u>by</u> the co	ommittee.
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 toan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was	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:	4. Type: stamps,mallings,maps	02/11/11 \$ 44.91		**************************************
Bob Smith 36729 Moravian Clinton Twp., MI 48035	5. Date Debt Was Incurred: 06/01/10	\$	·	
	6. Original Amount of Debt: \$_54.54		\$ <u>44.91</u>	\$ 9.63 FORGIVEN
If bank loan, name of endorser or guarantor:		\$	ount Endorsed: \$	• 
Debt #2 Corp? Yes Owed to or by:	4. Type: gas	s		
Bob Smith 36729 Moravian Clinton Twp., MI 48035	5. <u>Date Debt Was Incurred</u> : 6/1/10-10/17/10	<b>.</b>		
	6. Original Amount of Debt:	\$	\$ 0	\$_980.00
if bank toan, name of endorser or guarantor:		\$Ar	nount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type: Verizon Wireless	\$		
Bob Smith 36729 Moravian	5. <u>Date Debt Was Incurred</u> : 6/1/10-10/17/10	\$		
Clinton Twp., MI 48035	6. Original Amount of Debt: \$ 472.00	\$	\$_0	\$ 472.00 FORGIVEN
If bank loan, name of endorser or guarantor:		\$ Ar	mount Endorsed: \$	
			(Outstanding debt)	\$1,461.63
(C	complete on last page of Schedule sh	Grand Total lowing amounts owed by o	of all Schedules 1E r to the committee)	Enter this total
				on line 12a "owed

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Enter this total on line 12a "owed by"" or line 12b "owed to" of the Summary Page

Page of 1



1. Committee I.D. Number

138271

CANDIDATE	COMMITTEE
-----------	-----------

Committee to Elect Bob Smith

a Debts and obligations owed by or forgiven the committee  Check both of inclases of person, vendor or financial institution to whom debt is owed.  Check bot to inclaste whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantor.  Check bot to inclaste whether debt is owed.  Check bot to inclaste whether debt is owed to an incorporate business. If debt is a bank loan, please provide information regarding the endorsers or guarantor.  Debt #1  Copy? Yes  Owed to or by:  Bob Smith  36729 Moravian  Clinton Twp., MI 48035  Sate Debt Was Incurred:  Sate Debt Was	CANDIDATE COMMITTEE This Schedule Hemizes:	2. Committee Name	- 10 2,000 200 0,	311(11	
Check box to Indicate whether doth is owed.   A. Type: of Obligation (Check plant and amount of finencial institution to whom debt is owed.   A. Type: of Obligation (Check box to Indicate whether doth is to wed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantor.   A. Type: Misc. Auto Exp.   S. Date Debt Was Incurred   Debt #   Corp?   Yes   A. Type: flood-meetings   S. Originel Amount of Debt:   S. Date Debt Was Incurred   S. Originel Amount of Debt:   S. Date Debt Was Incurred   S. Originel Amount of Debt:   S. Date Debt Was Incurred   S. Originel Amount of Debt:   S. Date Debt Was Incurred   S. Originel Amount of Debt:   S. Date Debt Was Incurred   S.					
Check box to indicate whether debt is ewed. S. Indicate debt debt was incurred. S. Indicate debt debt was incurred. S. Indicate debt debt was incurred debt incorporated business. If debt is a bank loan, please provide information reparting the endorsers or guarantors.  Debt #1 Corp? Yes Owed to or by: Bob Smith 36729 Moravian Clinton Twp., Mi 48035  S. Date Debt Was Incurred: 06/01/10 - 10/17/10 S. Date Deb	at the configurations owed by or torgiven the	committee OR b. Debi Check either a or b. Use only for the pi	is and obligations owed <u>to</u> o urpose checked.)	r forgiven <u>by</u> the co	mmittee.
Complete on last page of Schedule showing amounts over by:  A Type: Misc. Auto Exp.  S	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	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount	7. Date and amount of	payment to	Balance at close of this period (item 6 minus
36729 Moravian   Clinton Twp., MI 48035   S. Date Debt Was Incurred:   S	1	4. Type: Misc. Auto Exp.	s		
Debt #2 Corp? Yes	36729 Moravian	06/01/10 - 10   17 / 10 6. Original Amount of Debt:	\$ \$	\$ <u>0</u>	\$_289.00 FORGIVEN
Debt #2 Corp? Yes Owed to or by:  Sob Smith  36729 Moravian Clinton Twp., MI 48035  6. Original Amount of Debt: \$ 246  \$ 1 FORGIVEN  If bank loan, name of endorser or guarantor:  Debt #3 Corp? Yes Owed to or by:  Bob Smith  36729 Moravian Clinton Twp., MI 48035  6. Original Amount of Debt: \$ \$ 1 FORGIVEN  Amount Endorsed: \$ 28.52  If bank loan, name of endorser or guarantor:  Amount Endorsed: \$ 28.52  FORGIVEN  The bank loan, name of endorser or guarantor:  Page Subtotal (Outstanding debt)  Grand Total of all Schedules 1E  Complete on last page of Schedule showing amounts owed by or to the committee  Enter this total  Enter this total	if bank loan, name of endorser or guarantor:			uint Endamadi B	•
36729 Moravian Clinton Twp., Mi 48035  6. Original Amount of Debt: \$ 246  \$ 5  FORGIVEN  If bank loan, name of endorser or guarantor:  Debt #3 Corp? Yes Owed to or by: Bob Smith 36729 Moravian Clinton Twp., MI 48035  6. Original Amount of Debt: \$ \$ 5  Date Debt Was Incurred: \$ \$ 0  \$ 28.52  FORGIVEN  Amount Endorsed: \$ 5  \$ 28.52  FORGIVEN  FORGIVEN  \$ 5  Amount Endorsed: \$ 5  FORGIVEN  \$ 5  Amount Endorsed: \$ 5  FORGIVEN  \$ 5  FORGIVEN  FORG		4. Type: food-meetings		ont Endorsed. \$	
If bank loan, name of endorser or guarantor:  Debt #3	36729 Moravian	6/1/10-10/17/10 6. Original Amount of Debt:	\$\$	\$ <u>0</u>	
Debt #3 Corp? Yes Owed to or by:  Bob Smith 36729 Moravian Clinton Twp., MI 48035  If bank loan, name of endorser or guarantor:  Page Subtotal (Outstanding debt)  (Complete on last page of Schedule showing amounts owed by or to the committee)  Enter this total  Enter this total	If hank loan, name of andorsor or automotor		<u> </u>		
Page Subtotal (Outstanding debt)  Grand Total of all Schedules 1E  (Complete on last page of Schedule showing amounts owed by or to the committee)  Enter this total	Debt #3 Corp? Yes Owed to or by: Bob Smith 36729 Moravian	5. <u>Date Debt Was Incurred</u> : 10/13/10 6. <u>Original Amount of Debt</u> :	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$		\$ 28.52
Grand Total of all Schedules 1E  (Complete on last page of Schedule showing amounts owed by or to the committee)  Enter this total	If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	
A debt or obligation must be shown on this Schedule if there were an extendity and the shown on this Schedule if there were an extendity and the shown of the Schedule if there were an extend to the schedule in the schedule		(Complete on last page of Schedule st	•	· · · · · · · · · · · · · · · · · · ·	Enter this total on line 12a "owed

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

"owed to" of the **Summary Page** 



138271 1. Committee I.D. Number

**SCHEDULE 1E** Committee to Elect Bob Smith 2. Committee Name **CANDIDATE COMMITTEE** This Schedule itemizes: B ✓ Debts and obligations owed by or forgiven the committee OR b. Debts and obligations owed to or forgiven by the committee. (Check either a or b. Use only for the purpose checked.) 7. Date and amount of 9. Outstanding 3. Name and Mailing Address of person, vendor or 4. Type of Obligation 8. Cumulative financial institution to whom debt is owed. (Description) each payment payment to Balance at close 5. Indicate date debt was date on debt of this period Check box to indicate whether debt is owed to an (Item 6 minus incurred 6. Indicate original amount item 8) incorporated business. If debt is a bank loan, please provide information regarding the endorsers or of debt guarantors, if any. 4. Type: independent services Debf #1 Corp? Owed to or by: Stella Smith 5. Date Debt Was Incurred: 39324 Eliot 06/01/10 -/1/31/10 800.00 Clinton Twp., MI 48036 **\$** 0 6. Original Amount of Debt 800.00 ÎFORGIVEN if bank loan, name of endorser or guarantor: Amount Endorsed: \$ Debt #2 4. Type: gas Owed to or by: Bob Smith 5. Date Debt Was Incurred: 36729 Moravian 1/1/2011-12/31/2011 s 720.00 Clinton Twp., MI 48035 6. Original Amount of Debt: 0 720 FORGIVEN If bank loan, name of endorser or guarantor: Amount Endorsed: \$ Debt #3 4. Type: food-meetings Owed to or by: Bob Smith 5. Date Debt Was Incurred: 36729 Moravian 1/1/11-12/31/11 s 75.00 Clinton Twp., MI 48035 6. Original Amount of Debt: 0 75.00 **FORGIVEN** Amount Endorsed: \$ If bank loan, name of endorser or guarantor: \$1.595.00 Page Subtotal (Outstanding debt) Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Enter this total on line 12a \*owed by" or line 12b "owed to" of the Summary Page

Page



1. Committee I.D. Number

138271

SCHEDULE 1E Committee to Elect Bob Smith 2. Committee Name CANDIDATE COMMITTEE This Schedule itemizes: Debts and obligations owed by or forgiven the committee OR b. Debts and obligations owed to or forgiven by the committee. (Check either a or b. Use only for the purpose checked.) Name and Mailing Address of person, vendor or 4. Type of Obligation 7. Date and amount of financial institution to whom debt is owed. 9. Outstanding 8. Cumulative (Description) each payment payment to 5. Indicate date debt was Balance at close Check box to indicate whether debt is owed to an date on debt of this period incurred incorporated business. If debt is a bank loan, please (item 6 minus 6. Indicate original amount provide information regarding the endorsers or Item 8) of debt guarantors, if any. Debt #1 Corp? 4 Type: food-meetings Owed to or by: **Bob Smith** 5. Date Debt Was Incurred: 36729 Moravian 01/01/11 Clinton Twp., MI 48035 66.00 s 0 6. Original Amount of Debt: 66.00 FORGIVEN if bank loan, name of endorser or guarantor: Amount Endorsed: \$ Debt #2 Corp? 4. Type: cell phone service Owed to or by: Bob Smith 5. Date Debt Was Incurred: 36729 Moravian 1/1/11-12/31/11 Clinton Twp., MI 48035 6. Original Amount of Debt 633.00 633.00 FORGIVEN If bank loan, name of endorser or guarantor: Amount Endorsed: \$ Deht #3 Corp? 4. Type: travel - hotel Owed to or by: **Bob Smith** 5. Date Debt Was Incurred: 36729 Moravian 8/15/11 Clinton Twp., MI 48035 6. Original Amount of Debt: s 0 316.00 316.00 **FORGIVEN** If bank loan, name of endorser or guarantor: Amount Endorsed: \$ \$1,015.00 Page Subtotal (Outstanding debt) Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee) Enter this total on line 12a "owed A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of by" or line 12b this Campaign Statement or it was forgiven during the period covered by this Campaign Statement. "owed to" of the

Summary Page



1. Committee I.D. Number

138271

Committee to Flect Rob Smith

CANDIDATE COMMITTEE 2	. Committee Name	e to Flect Dob 2	I COURT I	
This Schedule itemizes:		······································	· · · · · · · · · · · · · · · · · · ·	<del></del>
a Debts and obligations owedby or forgiven the co	ommittee OR b. Debi heck either a or b. Use only for the p	ts and obligations owed <u>to</u> ( urpose checked.)	or 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:	4. Type: travel-car rental	\$		
Bob Smith 36729 Moravian	5. <u>Date Debt Was Incurred</u> : 08/15/11			
Clinton Twp., MI 48035	6. Original Amount of Debt:	\$	\$ 0	\$_90.00
	\$ 90.00	<u> </u>		FORGIVEN
	**************************************	<b></b>	Ī	
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: travel-airlines	\$		
Bob Smith 36729 Moravian	5. <u>Date Debt Was Incurred:</u> 8/15/11	<u> </u>		
Clinton Twp., MI 48035	6. Original Amount of Debt:	s	. 0	\$ 354.00
	\$ 354.00	\$\$	•	
	, , , , , , , , , , , , , , , , , , , ,	<u> </u>		FORGIVEN
If bank loan, name of endorser or guarantor:		An	ount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type: filing fee	s		
Bob Smith	5. Date Debt Was Incurred:	\$		
36729 Moravian	5/1/12	•		
Clinton Twp., MI 48035	6. Original Amount of Debt:	S	s_0	\$ 100.00
	<b>\$</b> 100.00			FORGIVEN
		<u> </u>		
If bank loan, name of endorser or guarantor:		Ar	nount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	\$544.00
(4	Complete on last page of Schedule s	Grand Total howing amounts owed by o	of all Schedules 1E r to the committee)	
				Enter this total on line 12a "owed by" or line 12b

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

"owed to" of the **Summary Page** 



1. Committee I.D. Number

138271

	CANDIE	ATE	COM	MITTEE
--	--------	-----	-----	--------

2 Committee Name Committee to Elect Bob Smith

CANDIDATE COMMITTEE 2: This Schedule Itemizes:	Commence Name			· · · · · · · · · · · · · · · · · · ·
a Debts and obligations owed by or forgiven the co	ommittee OR b. Debi neck either a or b. Use only for the pa	is and obligations owed <u>to</u> o urpose checked.)	r forgiven <u>by</u> the co	mmillee.
3. 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	Outstanding     Balance at close     of this period     (Item 6 minus     Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: gas			
Bob Smith 36729 Moravian	5. <u>Date Debt Was Incurred</u> : 01/11/12~ 7-み2-12	<b>s</b>	<u> </u>	
Clinton Twp., MI 48035	6. Original Amount of Debt:	s	\$ 0	\$_511.00
	\$ 511.00	s		FORGIVEN
If bank loan, name of endorser or guarantor:		Ame	ount Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by:	4. Type: food	\$		
Bob Smith 36729 Moravian	5. <u>Date Debt Was Incurred</u> : 7/14/12	\$		
Clinton Twp., MI 48035	8. Original Amount of Debt:	<u>\$</u>	s <u>0</u>	\$ 91.00
	ş 91.00	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Arr	ount Endorsed; \$	
Debt #3 Corp? Yes Owed to or by:	4. Type: food-meetings	\$		
Bob Smith 36729 Moravian	5. <u>Date Debt Was Incurred</u> : 1/1/12-7/22/12	<u> </u>		
Clinton Twp., MI 48035	6. Original Amount of Debt:	\$	\$ 0	s_107.00
	\$_107.00	<u> </u>		FORGIVEN
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$	· · · · · · · · · · · · · · · · · · ·
		Page Subtotal	(Outstanding debt)	\$709.00
(0	Complete on last page of Schedule s	Grand Total of the control of the co	of all Schedules 1E r to the committee)	
				Enter this total

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

on line 12a "owed by™ or line 12b "owed to" of the **Summary Page** 

Page \_. \_ of \_\_\_\_\_\_



1. Committee I.D. Number

138271

CANDIDATE COMMITTEE 2.0	Committee Name Committe	e to Elect Bob Si	<u>mith</u>	
This Schedule itemizes:				<del></del>
	imittee OR b. Deb	ts and obligations owed to o urpose checked.)	r 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	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: Bob Smith	Type: Cell phone service      Date Debt Was Incurred:	s		
36729 Moravian Clinton Twp., MI 48035	01/11/12 - 7/32/12 6. Original Amount of Debt:		<b>\$</b> 0	\$_420.00
	\$ 420.00	<u> </u>		FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	unt Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: Cable ties	\$		
Bob Smith 36729 Moravian	5. Date Debt Was Incurred: 7/14/12	s		
Clinton Twp., MI 48035	6. Original Amount of Debt:	s	\$ 0	\$_114.00
	\$ <u>114.00</u>	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type: stamps-mailings	\$		
Bob Smith 36729 Moravian	5. <u>Date Debt Was Incurred</u> : 1/1/12-7/22/12	<u> </u>		
Clinton Twp., MI 48035	6. Original Amount of Debt:	<u> </u>	\$ <u>0</u>	\$ 225.00
	<u>\$ 225.00</u>		-	FORGIVEN

Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by™ or line 12b "owed to" of the Summary Page

\$759.00

Amount Endorsed: \$

Page Subtotal (Outstanding debt)

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Page\_\_\_of\_\_\_.

If bank loan, name of endorser or guarantor:



1. Committee I.D. Number \_\_138271

<b>CANDIDA</b>	TE	COMMITTEE

2. Committee Name Committee to Elect Bob Smith

CANDIDATE COMMITTEE				<del></del>
This Schedule itemizes:				· ····
a Debts and obligations owed by or forgiven the com (Che	nmittee OR b. Debt	is and obligations owed to o	or 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:	4. Type: Independent services	s		
Stella Smith 39324 Eliot	5. Date Debt Was Incurred:	<b>s</b>		
Clinton Twp., MI 48036	01/01/12-7-22-12	\$	\$ 0	s 300.00
	6. Original Amount of Debt: \$ 300.00	<u> </u>		FORGIVEN
	· · · · · · · · · · · · · · · · · · ·	<u> </u>	t	I I
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type:	s		
	5. Date Debt Was Incurred:	\$		
	6. Original Amount of Debt:	<u> </u>	\$	\$
	\$	<u> </u>		FORGIVEN
If bank loan, name of endorser or guarantor:		<u> </u>		
Debt #3 Corp? Yes		Am	ount Endorsed: \$	
Owed to or by:	4. Type:	<u> </u>		
	5. Date Debt Was Incurred:	<u> </u>		
	6. Original Amount of Debt:		\$	\$
	\$	•		FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$_	
			T	***
		Page Subtotal (	Outstanding debt)	\$300.00
(Co	mplete on last page of Schedule st	Grand Total on Grand Grand Total on Grand Total on Grand By Or Gra	f all Schedules 1E to the committee)	
A debt or obligation must be shown on this Schedul this Campaign Statement or it was forgiven during ti	e if there was an outstanding am ne pariod covered by this Campa	ount owed on it at the clo lign Statement.	sing date of	Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

Page\_\_\_\_ of <u>\$</u>\_\_\_\_



1. Committee I.D. Number

138271

SCHEDULE 1E	Softmander I.D. Hallinger			
CANDIDATE COMMISTICE	Committee Name Comittee	to Elect Bob Smi	ith	···
This Schedule itemizes:				<del></del>
a Debts and obligations owed by or forgiven the con (Che	nmittee OR b. Deb	ots and obligations owed <u>to</u> courpose checked.)	x 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 regerding 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:	4. Type: gas	ss		
Bob Smith 36729 Moravian Clinton Twp., MI 48035	5. Date Debt Was Incurred:  08/28/10 -/ 9/21/12  6. Original Amount of Debt:  \$ 718	\$ \$	\$ 0	\$_718.00
if bank toan, name of endorser or guarantor:		\$	l	
Debt #2 Corp? Yes Owed to or by:	4. Type: food-sign workers	\$	ount Endorsed: \$	
Bob Smith	5. Date Debt Was Incurred;	<del></del>		
36729 Moravian	10/7/12	<b></b>		
Clinton Twp., MI 48035	6. Original Amount of Debt:		s <u>0</u>	\$_126.00
If bank loan, name of endorser or guarantor:	s_ 126	\$Am	ount Endorsed: \$	FORGIVEN
Debt #3 Corp? Yes Owed to or by:	4. Type: food-meetings			
Bob Smith 36729 Moravian	5. <u>Date Debt Was Incurred</u> : 8/28/12-10/21/12	\$		
Clinton Twp., MI 48035	6. Original Amount of Debt:	\$	ş <u>0</u>	\$ 197.00
	\$ <u>197</u>			FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$	
		Page Subtotal (	Outstanding debt)	\$1,041.00
(Сол	nplete on last page of Schedule sh	Grand Total of nowing amounts owed by or	all Schedules 1E to the committee)	

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

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1. Committee I.D. Number

138271

SCHEDULE 1E  CANDIDATE COMMITTEE 2	. Committee Name Comittee	to Elect Bob Sm	ith	
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the co	ommittee OR b. Deb heck either a or b. Use only for the p	ols and obligations owed <u>to</u> o	or forgiven <u>by</u> the co	ommittee.
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.	Type of Obligation     (Description)     Indicate date debt was	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at clos of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: Bob Smith 36729 Moravian Clinton Twp., MI 48035	4. Type: Pole pounder  5. <u>Date Debt Was Incurred:</u> 10/07/12  6. <u>Original Amount of Debt</u> :		s <u>0</u>	\$ <u>27.62</u>
If bank loan, name of endorser or guarantor:  Debt #2 Corp?   Tyes	\$_27.62	\$ Amo	ount Endorsed: \$	FORGIVEN
Owed to or by:  Bob Smith  36729 Moravian  Clinton Twp., MI 48035  If bank toan, name of endorser or guarantor:	4. Type: cell phone  5. Date Debt Was Incurred:  8/28/12 - 16/21/12  6. Original Amount of Debt:  \$ 412.00	\$\$\$\$	\$ <u>0</u>	\$_412.00 FORGIVEN
Debt #3 Corp? Yes		Апс	ount Endorsed: \$	
Owed to or by: Stella Smith 89324 Eliot Clinton Twp., MI 48036	4. Type: Independent Services  5. <u>Date Debt Was Incurred</u> : 8/28/12-10/21/12  6. <u>Original Amount of Debt</u> : \$ 200.00	\$ \$ \$ \$	\$_0	\$_200.00 FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$	
(Co	emplete on last page of Schedule sho	Page Subtotal (C	Outstanding debt)	\$639.62
4 debt or obligation must be shown on this Schedul	A SEALON OF THE PROPERTY OF TH	amounts owed by Ot E		Enter this total on line 12a "owed

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

on line 12a "owed by" or line 12b "owed to" of the Summary Page



1. Committee I.D. Number

138271

This Schedule Itemizes: a Debts and obligations owedly or forgiven the committee Check either a or b. Use only for the purpose checked.)  3. Name and Mailing Address of peacen, windor or financial institution to whorm debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank tons, please incured or guaranters. If enty.  Cent 41 Corp? Ves Owed to or by: Debt 22/12-11/24/12  S. Date Debt Was Incurred.  If bank loan, name of endorser or guarantor:  Amount Endorsed: \$  10/22/12-11/26/12  S. Original Amount of Debt:	SCHEDULE 1E	Committe	a to Elect Bob Si	mith	
a Debts and obligations owed by or forgiven the committee (Check differ a or 1. Use only for the purpose checked.)  3. Name and Mailing Address of person, vender or financial institution to whom debt is owed.  4. Type of Obligation (Check box to Indicate whether debt is owed to an incorporated business.) If debt is a bank loan, name of endorser or guarantor.  1. Type: Gell Phone  5. Debt sand obligations owed by or forgiven by the committee.  (Check district a or by the purpose checked.)  7. Debt sand anount of S. Curndathin payment of each payment.  8. Curndathin payment of each payment.  9. Curtainaling blacked on debt incorred inco	CANDIDATE COMMITTEE	2. Committee Name	e (o Elect Don 2)	* 14L( )	
Check either a or b. Use only for the purpose chacked.]	This Schedule itemizes:				
Check box to indicate whether debt is owed.			s and obligations owed <u>to</u> ourpose checked.)	r forgiven <u>by</u> the co	mmittee.
Complete on last page of Schedule showing amounts over the first total fall Schedules 15 (Complete on last page of Schedule showing amounts owed by or to the committee)  4. Type: 988  5. Deter Debt Was Isscarred: \$ 10/22/12-11/24/12 \$ 5. Original Amount of Debt: \$ 5. Deter Debt Was Isscarred: \$ 5. Deter Debt	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, plea provide information regarding the endorsers or	(Description) 5. Indicate date debt was incurred 6. Indicate original amount		payment to	Balance at close of this period (Item 6 minus
36729 Moravian Clinton Twp., MI 48035    Same Deet Was Instantant   10/22/12-11/24/12    Same Same Same Same Same Same Same Same	,	4. Type: gas			
Debt #2 Corp? Yes 4. Type: 5. Date Debt Was Incurred: 3 Corp? Yes 0. Original Amount of Debt: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	36729 Moravian	10/22/12-/1/24/12 6. Original Amount of Debt:	\$\$ \$	s <u>0</u>	
Owed to or by:  Bob Smith 36729 Moravian Clinton Twp.,Mi 48035  6. Original Amount of Debt: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$	
36729 Moravian Clinton Twp.,MI 48035  6. Original Amount of Debt: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Owed to or by:	4. Type: food meetingshaledisc & presidente			
Debt #3 Corp? Yes Owed to or by: Bob Smith 36729 Moravian Clinton Twp., MI 48035  If bank loan, name of endorser or guarantor:  Page Subtotal (Outstanding debt)  Grand Total of all Schedules 1E  (Complete on last page of Schedule showing amounts owed by or to the committee)  Enter this total	36729 Moravian	10/22/12-11/26/12	\$	\$ <u>0</u>	• •
Debt #3 Corp? Yes Owed to or by: Bob Smith 36729 Moravian Clinton Twp., MI 48035  If bank loan, name of endorser or guarantor:  Page Subtotal (Outstanding debt)  Grand Total of all Schedules 1E  (Complete on last page of Schedule showing amounts owed by or to the committee)  Enter this total	If bank loan, name of endorser or guaranter		Δν	notint Endorced: \$	
Page Subtotal (Outstanding debt)  Grand Total of all Schedules 1E  (Complete on last page of Schedule showing amounts owed by or to the committee)  Enter this total	Debt #3 Corp? Yes Owed to or by: Bob Smith 36729 Moravian	5. Date Debt Was Incurred: 10/22/12-11/26/12 6. Original Amount of Debt:	\$ \$ \$		, <sub>4</sub>
Page Subtotal (Cutstanding debt)  Grand Total of all Schedules 1E  (Complete on last page of Schedule showing amounts owed by or to the committee)  Enter this total	If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_	
(Complete on last page of Schedule showing amounts owed by or to the committee) Enter this total			<del>-</del>	` '	\$1,476.12
		(Complete on last page of Schedule s	Grand Total on the control of the co	or all Schedules 1E r to the committee)	

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

enter this total on line 12a "owed by"" or line 12b "owed to" of the Summary Page

1. Committee I.D. Number 138271

**CANDIDATE COMMITTEE** 

2. Committee Name Committee to Elect Bob Smith

This Schedule itemizes:				
a Debts and obligations owed by or forgiven the cor	amittae OD			
(Cha	nmittee OR b. Debt eck either a or b. Use only for the pu	is and obligations owed <u>to</u> (	or forgiven <u>by</u> the co	ommittee.
3. Name and Malling 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:	4. Type: Independent Services	\$		
Stella Smith 39324 Eliot	5. Date Debt Was Incurred:	\$		
Clinton Twp., Mi 48036	10/22/12 -11-26-12	\$		
10000	6. Original Amount of Debt:	•	\$ 0	\$_500.00
	s 500.00			FORGIVEN
If bank loan, name of endorser or guarantor:		<u> </u>	•	j transpil
Debt #2 Corp? Yes		Amo	unt Endorsed: \$	
Owed to or by:	4. Type: stamps	\$		
Bob Smith 36729 Moravian	5. Date Debt Was Incurred:	<b>. \$</b>		
Clinton Twp., MI 48035	11/02/12	\$		
	6. Original Amount of Debt: 134.00	•	\$ 0	\$ 134.00
	ş <u>134.00</u>			FORGIVEN
if bank loan, name of endorser or guarantor:				
Debt #3 Corp? Yes		Am Am	ount Endorsed: \$	
Owed to or by:	4. Type: office supplies	<u> </u>		
Bob Smith 36729 Moravian	5. Date Debt Was Incurred:	<u> </u>		
Clinton Twp., MI 48035	11/1/12	s		
Oii 1001 1 Wp., 1011 40035	6. Original Amount of Debt:	•	\$ <u>0</u>	\$ 63.31
	\$ 63.31	<u> </u>		FORGIVEN
if bank loan, name of endorser or guarantor:				
transfer of Gradues of guaranto.		Am	ount Endorsed: \$	
		Page Subtotal (	Outstanding debt)	\$697.31
(Cor	nplete on last page of Schedule sho	Grand Total of owing amounts owed by or	all Schedules 1E to the committee)	
A debt or obligation must be shown on this Schedule this Campaign Statement or it was forgiven during th	e if there was an outstanding amo	ount owed on it at the clos gn Statement.	sing date of	Enter this total on line 12a "owed by"" or line 12b "owed to" of the

Summary Page

Page /2 of



1. Committee I.D. Number

138271

CANDIDATE COMMITTEE 2.	Committee Name Committ	ee to Elect Bob	Smith	
This Schedule itemizes:				
aDebts and obligations owed by or forgiven the cor(Ch	mmittee OR b. De eck either a or b. Use only for the	hts and obligations owed to	or forgiven by the co	ommittee.
3. 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 toan, 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 9)
Owed to or by: Bob Smith	4. Type: mileaage	<b>s</b>		
36729 Moravian Drive Clinton Twp., MI 48035	5. Nate Debt Was Incarred: 11/27/12 6. Original Amount of Debt: 169.00	<u> </u>	\$	\$ 169.00
If bank loan, name of endorser or guarantor:	3_130.00		Unt Endorsed: \$	FORGIVEN
Owed to or by: Bob Smith 36729 Moravian Dr. Clinton Twp., MI 48035	4. Type: food/meetings 5. Date Debt Was iscarred: 10/10/2013 6. Original Amount of Debt: \$ 27.00	\$\$\$\$	\$	\$_27.00
if bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by: Bob Smith B6729 Moravian Dr. Clinton Twp., MI 48035	4. Type: food/meeting 5. Date Debt Was Incurred:			
'	8. Original Amount of Debt: \$ 58.20	\$ 	\$	\$ 58.20 FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	
			ngamanang 0ebt)	\$254.20
(Con	nplete on last page of Schedule sh	Grand Total of cowing amounts owed by or	all Schedules 1E to the committee)	

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page



1. Committee I.D. Number

138271

CANDIDATE COMMITTEE 2	. committee Name Committ	tee to Elect Bob	Smith	
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the co	ommittee OR b. De neck either a or b. Use only for the	bts and obligations owed to	or forgiven <u>by</u> the c	Committee.
financial institution to whom debt is owed.  Check box to indicate whather debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or quarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was	7. Date and amount of each payment	Cumulative payment to date on debt	9. Outstanding Balance at close
Debt #1 Corp? Yes Owed to or by: Bob Smith 36729 Moravian Drive Clinton Twp., MI 48035	4. Type: food/meeting  5. Date Debt Was Jaconced: 12/27/13  6. Original Amount of Debt:			49.96
If bank loan, name of endorser or guerantor:	\$ 49.96	<u> </u>		FORGIVEN
Debt #2 Corp? Yes Owed to or by:	4. Type: Phone	Airk	unt Endorsed: \$ _	1
Bob Smith	4. Type: 1 1 Kare	\$		
36729 Moravian Dr.	5. Date Debt Was Incurred:			
Clinton Twp., MI 48035	11/27/12-12/31/13			
,	6. Original Amount of Debt:		•	e 356.00
	s 356.00	\$	•	
if bank loan, name of endorser or guarantor:		\$		FORGIVEN
Debt #3 Corp? Yes		Amo	unt Endorsed; \$	
Owed to or by:	4. Type: stamps	ŝ		
86729 Moravian Dr.	S. Date Debt Was Incurred:			
Clinton Twp., MI 48035	12/21/12/12/31/13	***************************************		
7 THE	6. Original Amount of Debt:	<b>s</b>		s 146.00
	s 146.00	\$	\$!	\$ 140.00
Manual tares		<u> </u>		FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	unt Endorsed: \$	
		Page Subtotal (O	American Street 1	\$551.96
(Cor	npiete on last page of Schedule sh	Grand Total of a owing amounts owed by or b	all Schedules 1E the committee)	
A debt or obligation must be shown on this Schedule his Campaign Statement or it was forgiven during th Page 14 of	of there was an outstanding amo e pariod covered by this Campai	ount owed on it at the closi ign Statement.	ng date of	Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page



1. Committee I.D. Number 138271

	Committee Name Committee	ee to Elect Bob	Smith	
This Schedule itemizes:				
Debts and obligations owedby or forgiven the co	mmittee OR b. Det eck either a or b. Use only for the p	ots and obligations owed to c	or forgiven by the co	mittee
	4. Type of Obligation	mpad diodital.		
financial institution to whom debt is owed.	(Description)	7. Date and amount of	8. Cumulative	9. Outstanding
Check box to indicate whether debt is owed to an	5. Indicate date debt was	each payment	payment to	Belance at dos
HIVARIUGICES INFRITARE IT COMP In a bount 1	incurred 6. Indicate original amount		date on debt	of this period (item 6 minus
provide information regarding the endorsers or querantors, if any.	of debt	ļ		(tem 8)
Po - 2 - 2 - 4	V-		İ	]
Oebt #1 Corp? Yes Owed to or by:	4. Type: various holidaydonations			
Sob Smith	4. Type:			
6729 Moravian Dr.	5. Date Debt Was Incurred:			
Clinton Twp., MI 48035	11/30/13			
		s		
	6. Original Amount of Debt:		\$	\$_55.00
	\$ 55.00	\$		
hank loon war a se			ł	FORGIVEN
bank loan, name of endorser or guarantor:			•	· - <b></b>
Pebt #2 Corp? Yes		Amor	unt Endorsed: \$	
owed to or by:  della Smith	4. Type: Independent services	2		
3324 Eliot	5. Date Debt Was Incurred:		1	
	THE REAL PROPERTY OF THE PERSON OF THE PERSO		I	
linton Twp., MI 48036			f	
	6. Original Amount of Debt:			s 200.00
	<b>\$ 200.00</b>	\$	<u> </u>	
			[	FORGIVEN
bank loan, name of endorser or guarantor:		3	_	
obt#3 Corp? Yes		Amou	int Endorsed: \$	
Wed to or by:	4. Type:			
	5. Date Debt Was Incarred:		[	
	- Mate Deat Wat Incorred:	\$	- 1	
	6. Original Amount of Debt:			_
	\$ -	\$ ' '	·	·
				FORGIVEN
enk loan, name of endorser or guarentor:	-	<u>S</u>		
The state of guaranters.		Amou	nt Endomed: \$	1
	•	Page Subtotal (Ou	\$	255.00
			(vina) General	
(Com	plete on last page of Schedule show	Grand Total of al	Schedules 1E	
		a a a a a a a a a a a a a a a	ure committee)[	nter this total
bt or obligation must be about an account	_		or or	iline 12e "owed
ebt or obligation must be shown on this Schedule Campaign Statement or it was forgiven during the	if there was an outstanding emou	int owed on it at the closi-	a data of by	or line 12h
and safetail afterlig (196	period covered by this Campaig	n Statement.		wed to" of the Immary Page



DEBTS AND OBLIGATIONS 1.0	ommittee I.D. Number	· -		
SCHEDULE 1E	ommittee Name Committee	e To Elect Bob Si	mith	
CANDIDATE COMMITTEE	OTHERIBLES INSINE			
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the com (Che	mittee OR b. Debt ok either a or b. Use only for the pu			
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	S. 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:	4, Type: mileage	<u> </u>		
Bob Smith 36729 Moravian Dr.	5. Date Debt Was Incurred:	<b>\$</b>		s 205.00
Clinton Township, MI 48035	6. Original Amount of Debt:	<u> </u>	\$	FORGIVEN
If bank loan, name of endorser or guarantor:		<b>\$</b> Ame	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: food/meetings	\$		
Bob Smith 36729 Moravian Dr.	5. <u>Date Debt Was Incurred:</u> 1/1/14 7/20/14			104.00
Clinton Township, MI 48035	6. Original Amount of Debt: \$ 191.83	\$ 5	\$	\$ 191.83
	-	<u> </u>		FORGIVEN
If bank loan, name of endorser or guarantor:		Ac	nount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type: phone	<u> </u>		
Bob Smith	5. Date Debt Was Incurred:	\$		
36729 Moravian	1/1/14 7/31/14	\$	-	4 400 00
Clinton Township, MI 48035	6. Original Amount of Debt:	\$	\$	s_1,106.00
	\$ 1,108.00			FORGIVEN
if bank loan, name of endorser or guarantor:		A	mount Endorsed: \$_	
It bark rout, taking or any and a second		Page Subtota	I (Outstanding debt)	\$1,502.83
(0	Complete on last page of Schedule	Grand Total showing amounts owed by	of all Schedules 1E or to the committee)	
A debt or obligation must be shown on this Sched this Campaign Statement or it was forgiven during	inie if there was an outstanding	emount owed on it at the		Enter this total on line 12a "owe by"" or line 12b "owed to" of the Summary Page



## DEBTS AND OBLIGATIONS 1. Committee I.D. Number 138271

DEDIGNIES OPPIGALISMO 1'0	ommittee i.D. Number			
SCHEDULE 1E	Committe	e To Elect Bob S	mith	
CANDIDATE COMMITTEE 2.0	committee Name			
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> o irpose checked.)	r forgiven <u>by</u> the con	mnittee.
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	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	Outstanding     Balance at close     of this period     (Item 6 minus     item 8)
guarantors, if any.				
Debt #1 Corp? Yes Owed to or by:	4. Type: Independent Services	s		
Stella Smith 39324 Eliot St.	5. Date Debt Was Incurred:	<b>s</b>		
Clinton Twp., MI 48036	6. Original Amount of Debt	\$\$	\$	\$_200.00
·	\$_200.00	s		FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by:	4. Type:	<u> </u>		
	5. Date Deht Was Incurred:	<u> </u>		
	6. Original Amount of Debt	\$	\$	s
	\$	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Туре:	<u> </u>		
	5. Date Debt Was Incurred:	<u> </u>		
	6. Original Amount of Debt.	s	s	s
	\$	s		FORGIVEN
If bank loan, name of endorser or guarantor:			mount Endorsed: \$_	
				\$200.00
		•	(Outstanding debt)	
·	complete on last page of Schedule			Enter this total on line 12a *owed by*** or line 12b
A debt or obligation must be shown on this Scheduling Campaign Statement or it was forgiven during	ule if there was an outstanding a the period covered by this Camp	mount owed on it at the c paign Statement.	iosing date of	"owed to" of the Summary Page

Page \_\_\_\_ of \_17



1. Committee I.D. Number

138271
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SCHEDULE 1E		Committee To Elect Bob Smith
CANDIDATE COMMITTEE	2. Committee Name	Constitute to Elect Bob Offiliat
nis Schedule itemizes:		

OMITOIDALIE OCIMINITIME				
This Schedule itemizes:				
a Debts and obligations owediby or forgiven the co	mmittee OR b. Debt neck either a or b. Use only for the pu	s and obligations owed <u>to</u> rposa checked.)	or forgiven <u>by</u> the car	nmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed.	4. Type of Obligation (Description) 5. Indicate date debt was	7. Date and amount of each payment	8. Cumulative payment to date on debt	Outstanding     Balance at close     of this period
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 guaranters, if any.	incurred 6. Indicate original amount of debt			(Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: mileage	<u> </u>		
Bob Smith	5. Date Debt Was Incurred:	\$		
36729 Moravian	07/21/14 - [0/19/M	\$\$		e 189.00
Clinton Township, MI 48035	6. Original Amount of Debt:	\$	\$	\$ 109.00
	\$_189.00			FORGIVEN
If bank loan, name of endorser or guarantor:		<u> </u>		•
to busin local, matrix of orderoods of grantation.		An An	rount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: Food/meetings	<u> </u>		
Bob Smith	5. <u>Date Debt Was Incurred</u> :	s	ļ	
36729 Moravian	7/21/14_10/19/14	•		400.77
Clinton Township, MI 48035	6. Original Amount of Debt:	s	i s	\$ 139.77
	\$_139.77	· · · · · · · · · · · · · · · · · · ·		FORGIVEN
		<u> </u>		•
if bank loan, name of endorser or guarantor:		A	mount Endorsed: \$ _	
Debt #3 Corp? Yes Owed to or by:	4. Type: phone	<u> </u>		
Bob Smith	5. Date Debt Was Incurred:	\$\$		
36729 Moravian	7/21/14 -10/19/14	ss		474 00
Clinton Township, MI 48035	6. Original Amount of Debt:	\$	\$	\$ <u>474.00</u>
	\$ <u>474.00</u>	<b>*</b>		FORGIVEN
		<u></u>		
If bank loan, name of endorser or guarantor:			unount Endorsed: \$_	
		Page Subtota	at (Outstanding debt)	\$802.77
	Complete on last page of Schedule s	Grand Tota showing amounts owed by	of all Schedules 1E or to the committee)	<del></del>
`	, and the second			Enter this total on line 12a "owed

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

on line 12a "owe by" or line 12b "owed to" of the Summary Page

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Page \_\_\_\_ of 19

1. Committee I.D. Number 138271

Committee To Flect Rob Smith

AMADIENTIE OCHUM) I FF	Committee Name CONTITING	e to Elect Bob S	Smith	
This Schedule itemizes:				
a Debts and obligations owedby or forgiven the com (Che	nmittee OR b. Debi	s and obligations owed <u>to</u> o	or 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	Cumulative payment to date on debt	Outstanding     Balance at close     of this period     (Item 6 minus     item 8)
Debt #1 Corp? Yes Owed to or by: Stella Smith 39324 Eliot Clinton Township, MI 48036	4. Type: Independent Services  5. Date Debt Was Incurred: 07/21/14 -/p/14/14  6. Original Amount of Debt: \$ 200.00	\$ \$ \$	\$	\$_200.00 FORGIVEN
If bank loan, name of endorser or guarantor:		Ame Ame	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:  If bank loan, name of endorser or guarantor:	4. Type:	\$\$\$\$	\$	\$FORGIVEN
Debt #3 Corp? Yes		Am	ount Endorsed: \$	
Owed to or by:	4. Type:  5. Date Debt Was Incurred:  8. Original Amount of Debt:  \$	\$\$\$\$	\$	\$FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	
(Co	mplete on last page of Schedule sh		Outstanding debt) If all Schedutes 1E to the committee)	\$200.00 \$14,567.77 Enter this total on line 12a "owed
A debt or obligation must be shown on this Scheduk this Campaign Statement or it was forgiven during the	e if there was an outstanding am ne period covered by this Campa	ount owed on it at the clo ign Statement.	sing date of	by"" or line 12b "owed to" of the Summary Page



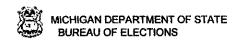
1. Committee I.D. Number \_\_

13827	1				
		 	<del></del>	 , ,	

Committee To Elect Bob Smith

CANDIDATE COMMITTEE 2. C	ommittee Name			
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the com (Cher	mittee OR b. Debts ck either a or b. Use only for the pu	and obligations owed <u>to</u> or rpose checked.)	forgiven <u>by</u> the con	nmittee.
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	Outstanding     Balance at close     of this period     (Item 6 minus     Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: mileage	<u> </u>		
Bob Smith	5. Date Debt Was Incurred:	<b>\$</b>		
36729 Moravian	10/20/14/1/24/14	\$		e 193.00
Clinton Twp., MI 48035	6. Original Amount of Debt	\$	\$	Ψ
	\$_193.00	\$	1	FORGIVEN
If bank loan, name of endorser or guarantor: Amount Endorsed: \$				
Debt #2 Corp? Yes Owed to or by:	4. Type: food/meetings/workers	\$		
Bob Smith 36729 Moravian	5. <u>Date Debt Was Incurred</u> : 11/4/14	\$		
Clinton Township, MI 48035	6. Original Amount of Debt	\$	s	\$ 290.79
Chillon Township, and	\$ 290.79	<u> </u>		FORGIVEN
		<u> </u>		
If bank loan, name of endorser or guarantor:		Ar	nount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type: Election supplies / poles	\$		
Bob Smith	5. Date Debt Was Incurred:	\$		
36729 Moravian	10/20/14	<u> </u>		s 264.36
Clinton Township, MI 48035	6. Original Amount of Debt:	<b>\$</b>	¹ \$	· · · · · · · · · · · · · · · · · · ·
	<u>\$_264.36</u>	\$		FORGIVEN
If bank loan, name of endorser or guarantor:			mount Endorsed: \$_	
				\$748.15
		Page Subtota	(Outstanding debt)	\$746.15
(0	Complete on last page of Schedule:	Grand Total showing amounts owed by	of all Schedules 1E or to the committee)	
A debt or obligation must be shown on this Sched	ule if there was an outstanding a the period covered by this Cam	mount owed on it at the coalgn Statement.	losing date of	Enter this total on line 12a "owe by" or line 12b "owed to" of the Summary Page

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1. Committee I.D. Number 1382

138271	1	
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v	~11 71	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		VVI			

2. Committee Name Committee To Elect Bob Smith

CANDIDATE COMMITTEE				
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the com	mittee OR b. Debt ck either a or b. Use only for the pu	s and obligations owed to or rpose checked.)	forgiven by the cor	nmittee.
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 toan, 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	Cumulative payment to date on debt	Outstanding     Balance at close     of this period     (Item 6 minus     Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: election supplies/straps	\$		
Bob Smith	5. Date Debt Was Incurred:	\$		
36729 Moravian	10/20/14	\$	:	e 53.70
Clinton Township, MI 48035	6. Original Amount of Debt	•	\$	\$ 33.70
	s 53.70	<u> </u>		FORGIVEN
	•	<u> </u>		
If bank loan, name of endorser or guarantor:		Amo	unt Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: phone	\$		•
Bob Smith	5. Date Debt Was Incurred:	<u> </u>		
36729 Moravian	11/24/14	\$		s 316.00
Clinton Township, MI 48035	6. Original Amount of Debt:	\$	1 \$	\$ _ 510.00
1,	<b>\$</b> 316.00			FORGIVEN
		<u> </u>		
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type: Independent Services	<u> </u>		
Stella Smith	5. <u>Date Debt Was Incurred</u> :	\$		
39324 Eliot	11/24/14	<b>\$</b>		s 200.00
Clinton Twp., MI 48036	6. Original Amount of Debt:	i \$	\$	\$ 200.00
	\$_200.00			FORGIVEN
	•	<b>\$</b>		
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	\$569.70
(C.	omplete on last page of Schedule s		of all Schedules 1E r to the committee)	
A debt or obligation must be shown on this Scheduthis Campaign Statement or it was forgiven during	ile if there was an outstanding a	mount owed on it at the cl		Enter this total on line 12a "owed by"" or line 12b "owed to" of the Summary Page

Page \_\_\_\_ of 2|



### DEBTS AND OBLIGATIONS 1. Committee I.D. Number 138271 SCHEDULE 1E

1. Committee I.D. Nu	mber
2. Committee Name	Committee To Elect Bob Smith

This Schedule itemizes:	Committee Name COMMINITY	ee 10 Elect Bob	Smith	
aDebts and obligations owed by or forgiven the co	mmittee OR b. De eck either a or b. Use only for the	bts and obligations owed to	or forgiven by the	committee
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 deb	9. Outstanding Balance at clo
Owed to or by:  American Graphics 34895 Groesbeck Clinton Township, MI 48035	4. Type: Envelopes  5. <u>Date Debt Was Incurred</u> : 10/09/14  6. <u>Original Amount of Debt</u> : \$ 44.52	12/02/14 <sub>\$</sub> 44.52 \$ \$ \$	\$ <u>44.52</u>	\$ 0.00
If bank loan, name of endorser or guarantor:		\$	ł	FORGIVE
Debt #2 Corp? Yes Owed to or by:		Am	ount Endorsed: \$ -	
American Graphics 34895 Groesbeck Clinton Township, MI 48035	4. Type: Printing,postage,mailing  5. <u>Date Debt Was Incurred</u> : 10/9/14  6. <u>Original Amount of Debt</u> : \$ 2,050.86	\$ \$ \$ \$	\$ 2,050.86	\$_0.00
if bank loan, name of endorser or guarantor:		<u> </u>		FORGIVEN
Debt #3 Corp? Yes	M-H		ount Endorsed: \$_	
Owed to or by: American Graohics 4895 Groesbeck Clinton Township, MI 48035	4. Type: Mailers / postage  5. Date Debt Was Incurred: 10/9/14  6. Original Amount of Debt: \$ 2,640.13	\$ \$	\$_2,640.13	\$_0.00
f bank loan, name of endorser or guarantor:		<u> </u>		LI FORGIVEN
guaranto.		Amo	ount Endorsed: \$_	
		Page Subtotal (0	Outstanding debt)	\$0.00
(Con	plete on last page of Schedule sh	Grand Total of owing amounts owed by or i	all Schedules 1E to the committee)	
debt or obligation must be shown on this Schedule is Campaign Statement or it was forgiven during the	if there was an outstanding amo period covered by this Campai	ount owed on it at the clos gn Statement.	ing date of	Enter this total on line 12a "owed by"" or line 12b "owed to" of the Summary Page
ageof_ <u>22</u>		44.52 2050.86 2640.13 3316.53		
	mangra-	8052.04		



# DEBTS AND OBLIGATIONS 1. Committee I.D. Number 138271

Page \_\_\_\_ of \_23

SCHEDULE 1E	•	<u> </u>		
CANDIDATE COMMITTEE 2.0	Committee Name Committee	ee To Elect Bob S	mith	
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the con (Che	nmittee OR b. Del	ots and obligations owed <u>to</u> o	r forgiven <u>by</u> the o	ommittee.
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:	4. Type: Mailer/postage	04/23/15 <sub>\$</sub> 1,058.92		
American Graphics 34695 Groesbeck Clinton Twp., MI 48035	5. <u>Date Debt Was Incurred</u> : 10/27/14 6. <u>Original Amount of Debt</u> : \$ 1,772.12	\$ \$ \$	\$ <u>1,058.92</u>	\$ ZF3:20
If bank loan, name of endorser or guarantor:		Amo	unt Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by: American Graphics 34695 Groesbeck Clinton Twp., MI 48035  If bank loan, name of endorser or guarantor:	4. Type: Mailer/Postage  5. Date Debt Was Incurred: 11/3/14  6. Original Amount of Debt: \$ 3,316.53	\$ \$ \$ \$ \$	\$ 3,316.53	\$_0.00
Debt #3 Corp? Yes	4.7	Amo	ount Endorsed: \$_	T
Owed to or by:	4. Type:  5. <u>Date Debt Was Incurred</u> :  6. <u>Original Amount of Debt</u> :	\$ \$ \$	\$	\$
	\$			FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$	
				***
		Page Subtotal (C	Outstanding debt)	\$0.00
(Cor	mplete on last page of Schedule st	Grand Total of nowing amounts owed by or t	all Schedules 1E o the committee)	\$0.00
A debt or obligation must be shown on this Schedule this Campaign Statement or it was forgiven during the	e if there was an outstanding am se period covered by this Campa	nount owed on it at the clos aign Statement.	ing date of	Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page



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1. Committee I.D. Number 1382

138271

SCHEDULE 1E				
CANDIDATE COMMITTEE 2.0	Committee Name Committee	e To Elect Bob S	Smith	
This Schedule itemizes:				
aDebts and obligations owed by or forgiven the com (Che	nmittee OR b. Deb	ots and obligations owed <u>to</u> o	or forgiven <u>by</u> the c	ommittee.
3. 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: Bob Smith	4. Type: gas	s		
36729 Moravian Dr. Clinton Twp., MI 48035	5. <u>Date Debt Was Incurred</u> :  11/25/14 - 7/20/15  6. <u>Original Amount of Debt</u> :		     s	\$ 156.00
If bank loan, name of endorser or guarantor:	\$ 156.00	\$		FORGIVEN
Debt #2 Corp? Yes		Amo	unt Endorsed: \$ _	
Owed to or by:	4. Type: food/meetings	\$		
Bob Smith 36729 Moravian Dr.	5. Date Debt Was Incurred:	s		
Clinton Twp., MI 48035	4/6/2015 6. Original Amount of Debt:	\$		44.00
	\$ 44.00	\$	\$	\$ 44.00
		\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type: phone bill	\$		
Bob Smith	5. Date Debt Was Incurred:	\$		
36729 Moravian Dr.	12/1/14-7/20/15			
Clinton Twp., MI 48035	6. Original Amount of Debt:	\$	e .	s 1,100.00
	\$_1,100.00	<u> </u>	Ψ	FORGIVEN
if bank loan, name of endorser or guarantor:		\$		LI ONGIVEN
day, name of endorser of guarantor:		Amo	ount Endorsed: \$	
		Page Subtotal (C	Outstanding debt)	\$1,300.00
(Con	oplete on last page of Schedule sh	Grand Total of owing amounts owed by or t	all Schedules 1E o the committee)	
A debt or obligation must be shown on this Schedule this Campaign Statement or it was forgiven during the	if the area was a second as		· ·	Enter this total on line 12a "owed by"" or line 12b "owed to" of the Summary Page



1. Committee I.D. Number

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SOUITEDOLL IL		Committee To Elect Bob Smith		
OANDIDATE COMMITTEE	2. Committee Name	Committee to Elect Dob Cities		
CANDIDATE COMMITTEE				

This Schedule itemizes:				
a Debts and obligations owed <u>by</u> or forgiven the committee OR b. Debts and obligations owed <u>to</u> or forgiven <u>by</u> the committee.  (Check either a or b. Use only for the purpose checked.)				
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:	4. Type: Independent services	<b>s</b>		
Stella Smith 39324 Eliot St. Clinton Twp., MI 48036	5. <u>Date Debt Was Incurred</u> :  11/25/14-7/30/i 5  6. <u>Original Amount of Debt</u> :  \$ 200.00	\$ \$ \$ \$	\$	\$_200.00 FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	· · · · · · · · · · · · · · · · · · ·
Debt #2 Corp? Yes Owed to or by:	4. Type:	\$		
	5. Date Debt Was Incurred:	\$		
	6. Original Amount of Debt:	\$ \$	\$	\$
	\$	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Ar	mount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type: 5. Date Debt Was Incurred:	<u> </u>		
	6. Original Amount of Debt:	\$	\$	\$FORGIVEN
if bank loan, name of endorser or guarantor:		\$A	mount Endorsed: \$_	_
		Page Subtota	l (Outstanding debt)	\$200.00
25	Complete on last page of Schedule s	Grand Total showing amounts owed by	of all Schedules 1E or to the committee)	\$17,385.81
$\sim$				mitter mis total

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

enter this total on line 12a "owed by"" or line 12b "owed to" of the