#### MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

#### FILED

#### 15 JUL 24 AM 10: 11

#### **CANDIDATE COMMITTEE** COVER PAGE

FOR OFFICIAL USE ONLY

Ponert must be to the	- TILLIS, MIC	HIGAN
Report must be legible, typed or printed in ink at the treasurer (or designated record keeper) and	nd signed by candidate.  3. This Statement cover	ers: 14/94/4
1. Committee I.D. Number	4. Candidate Last Na	200
138559-5	Miller	ame First Name M.I.  Frederick
2. Committee Name	4a. Office Sought Inclu	iding District # or Community Served (If applicable)
ĺ	County Commiss	sioner, 9th District
Friends of Fred Miller		
5. Committee's Mailing Address	4b. County of Residence	
PO Box 46274	6. Treasurer's Name &	
Mount Clemens, MI 48046	Michelle DeBea	
, , , , , , , , , , , , , , , , , , , ,	39856 Brylor Co	OUIT
	Clinton Townsh	iip, Mii 48038
Area Code and Phone If the address in this box is different from the comm		
mailing address on the Statement of Organization, be sent to this address by the filing official.	mail may	
7. Treasurer's Business Address	Area Code & Phone (5	
None	8. Designated Record to Designated Record Ke	Keeper's Name and Mailing Address (If the committee has a
None	Seal Average Mesona We	eper <i>j</i>
		i
1	İ	
Area Code and Phone	Area Code and Phone	
9. TYPE OF STATEMENT	Required ONLY if candidate	9e. Dissolution of Candidate Committee
9a. Pre-Election OR 9b. Post-Election	is not on the ballot for the current year:	By checking this item I/We certify any outstanding debt
Pre-Election or Post-Election Statement relates to:		by the committee to the candidate or his or her spouse is here by discharged and forgiven and no longer collectible from
Primary	July Quarterly	the committee. The committee has no outstanding assets, owes no lates fees or has any outstanding debt.
General	October Quarterly	
Convention		Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.
Special	9c	
School	Annual Statement () Coverage Year	Effective date of dissolution
	9d. Amendment to Campaign Stater	1
	(Complete Item 9a, 9b, 9c or 9e	to I
į	indicate which Statement is being amended.)	Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.
Date of Election, Convention or Caucus		, , , ,
10. Verification: I/We certify that all reasonable diliger	nce was used in the preparation of this st	atement and attached schedules (if any) and to the best of
Current Treasurer or	, , , , ,	O O O O O O O O O O O O O O O O O O O
Designated Record Keeper Michelle DeBe	aussaert Muhum I	Drawnaut 7/21/1-
Type or Print Name	Signature	Date
Candidate Frederick Miller	Freder	d Mulla 1/23/15
Type or Print Name	Signature	Date

1. Committee I.D. Number 138559

#### SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Friends of Fred Miller

RECEIPTS	Column f	Calume II
3. Contributions	This Period	Column II Cumulative this election cycle
	25 880 00	
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <b>25,880.00</b>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ \$25,880.00	(18.) \$ \$81,255.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$42.82	(19.) \$ \$142.82
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$25,922.82	(20.) \$ \$81,397.82
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) <b>\$ \$1,643.50</b>	(21.) \$ \$3,051.58
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ _\$0.00	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$5,701.22	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <b>\$0.00</b>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ \$150.68	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$5,851.90	(23.) \$ \$34,794.13
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <b>\$0.00</b>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	<b>\$0.00</b>	¢0.00
DEBTS AND OBLIGATIONS	(11.) \$ \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	(24.) \$ \$0.00
12. Debts and Obligations	<b>00.005.54</b>	
a. Owed by the Committee (Schedule 1E)	(12a.) \$ \$6,625.54	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ \$0.00	
	BALANCE STATEMENT	
Ending Balance of last report filed     (Enter zero if no previous reports have been filed.)	(13.) \$ \$60,068.44	
14. Amount received during reporting period	(14.) + \$ \$25,922.82	
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$_\$85,991.26	
<ol> <li>Amount expended during reporting period (Add lines 9 and 11)</li> </ol>	(16.) - <b>\$ \$5,851.90</b>	
17. ENDING BALANCÉ (Subtract line 16 from line 15)	(17.) \$ \$80,139.36	•
<u> </u>	· / ·	

1. Committee I.D. Number		138559-5	
2. Committee Name	Frie	nds of Fred Miller	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees 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 12/30/2014	50.00	50.00
Name: Jane Gabler Address: 35611 Grayfield	00.00	00.00
Sterling Heights MI 48312 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer	·	
Business Address	·	
Type of Contribution:  Direct		
3. Contribution # 2 PAC Receipt? ☐ YES 4. Date of Receipt 01/20/2015  Name: Joyce Lalonde	100.00	100.00
Address: 24801 Rosalind		
Eastpointe MI 48021 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 01/21/2015	330.00	330.00
Name: Mark Brewer		
Address:37414 Stonegate Circle		
Clinton Township MI 48036 5. If over \$100.00 cumulative, please provide:		
Occupation Attorney Employer Goodman & Acker		
Business 17000 W. 10 Mile Road		
Address Southfield MI 48075		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser  3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 01/21/2015		
Name: Michelle DeBeaussaert	50.00	50.00
Address: 39856 Brylor Ct.		
Clinton Twp MI 48038  5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct    Loan from a person    Fund Raiser		
Page Subtotal	530.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Nun	nber _	138559-5	 	
2 Committee Name	Frien	ds of Fred Miller		

	<del></del>	
Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 5 PAC Receipt? ☐ YES 4. Date of Receipt 01/26/2015	100.00	200.00
Name: Joyce Lalonde Address: 24801 Rosalind	100.00	200.00
Eastpointe MI 48021 5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer Retired		
Business Address Home MI 00000		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 6 PAC Receipt?   YES 4. Date of Receipt 01/26/2015	35.00	35.00
Name: Rosa Lee Walker Address: 34 Park Street		
Mount Clemens MI 48043 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct	· ·	
3. Contribution # 7 PAC Receipt? ☐ YES 4. Date of Receipt 02/03/2015	100.00	100.00
Name: Sarah Roberts for State Rep		
Address: PO Box 643		
St Clair Shores MI 48080 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution:  Direct		
3. Contribution # 8 PAC Receipt? ☐ YES 4. Date of Receipt 02/09/2015	50.00	50.00
Name: Debra Dorosh	50.00	50.00
Address: 44188 Rina Lane		
Clinton Twp. MI 48038 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:  Direct		
Page Subtotal	285.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Nun	nber	138559-5		
2 Committee Name	Frien	ds of Fred Miller		

	<u> </u>	<u> </u>
Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 9 PAC Receipt?   YES 4. Date of Receipt 02/09/2015	75.00	75.00
Name: Julie Wright Address: 3342 Aquinas	75.00	75.00
Rochester Hills MI 48309 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 10 PAC Receipt? ☐ YES 4. Date of Receipt 02/19/2015	1000.00	1000.00
Name: Dianne Byrum Address:4933 Bellevue Road	1000.00	1000.00
Onondaga MI 49264 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 11 PAC Receipt?   YES 4. Date of Receipt 02/27/2015	50.00	100.00
Name: Debra Dorosh Address:44188 Rina Lane	30.00	100.00
Clinton Twp. MI 48038 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 12 PAC Receipt?   YES 4. Date of Receipt 03/01/2015	100.00	300.00
Name: Joyce Lalonde Address:24801 Rosalind		
Eastpointe MI 48021 5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer Retired		
Business Same as home Address Home MI 00000		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
Page Subtotal	1225.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		]

1. Committee I.D. Num	ber 138559-5	
2 Committee Name	Friends of Fred Miller	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 13 PAC Receipt? ☐ YES 4. Date of Receipt 03/03/2015	500.00	500.00
Name: Judith Bonior Address: 1000 New Jersey Ave SE		
Washington DC 20003 5. If over \$100.00 cumulative, please provide:	:	
Occupation Retired Employer RETIRED		
Business Same as Home Address Home ML 00000		
Type of Contribution:  Direct		
3. Contribution # 14 PAC Receipt? ☐ YES 4. Date of Receipt 03/05/2015	30.00	30.00
Name: Victoria Barrows Address: 20401 Erben		
St. Clair Shores MI 48081  5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser  3. Contribution # 15 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 03/05/2015		
	30.00	30.00
Name: Clara Brnjac Address: 2375 Maplecrest		
Sterling Heights MI 48310 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 16 PAC Receipt? ☐ YES 4. Date of Receipt 03/05/2015	30.00	30.00
Name: Ron Campbell Address:44 Lodewyck		
Mt. Clemens MI 48043		
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: 🛛 Direct 🔲 Loan from a person 🔯 Fund Raiser		
Page Subtotal	590.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Nur	nber .	138559-5	 	
2. Committee Name	Frie	nds of Fred Miller		

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 17 PAC Receipt? ☐ YES 4. Date of Receipt 03/05/2015		- <del>                                    </del>
Name: Philip Cangemi Address:11235 Hemlock	100.00	100.00
Sterling Heights MI 48312 5. If over \$100.00 cumulative, please provide:		
Occupation Employer	•	
Business Address		
Type of Contribution:  Direct		
3. Contribution # 18 PAC Receipt? ☐ YES 4. Date of Receipt 03/05/2015		
Name: Irene Courtney	30.00	30.00
Address: 17747 N. Nunneley		i
Clinton Township MI 48036 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:  Direct		
3. Contribution # 19 PAC Receipt? ☐ YES 4. Date of Receipt 03/05/2015	60.00	60.00
Name: Gary Cynowa	00.00	00.00
Address:45451 Fielding St		
Macomb MI 48042 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 20 PAC Receipt?   PAC Receipt?   YES 4. Date of Receipt 03/05/2015		
Name: Nancy Donahue	30.00	30.00
Address:80 Eastman Street		
Mount Clemens MI 48043 5. If over \$100.00 cumulative, please provide;		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
Page Subtotal	220.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)		

1. Committee I.D. Number		138559-5	
2 Committee Name	Frie	nds of Fred Miller	

	1	T
Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 21 PAC Receipt? ☐ YES 4. Date of Receipt 03/05/2015	25.00	25.00
Name: John Emerson Address: 190 Clinton River	25.00	25.00
Mt. Clemens MI 48043 5. If over \$100.00 cumulative, please provide:	·	
Occupation Employer		
Business Address		
Type of Contribution: Direct    Loan from a person    Fund Raiser		
3. Contribution # 22 PAC Receipt? ☐ YES 4. Date of Receipt 03/05/2015  Name: Shirley Hunter	20.00	20.00
Address: 20351 Pine Meadow		
Clinton Township MI 48036 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: 🗵 Direct 🔲 Loan from a person 🔯 Fund Raiser		
3. Contribution # 23 PAC Receipt? ☐ YES 4. Date of Receipt 03/05/2015	30.00	30.00
Name: Kenneth Jenkins	00.00	00.00
Address: 46385 White Cap Dr		
Macomb MI 48044 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 24 PAC Receipt? ☐ YES 4. Date of Receipt 03/05/2015	30.00	30.00
Name: Bernard Klein Address: 27528 Echo VAlley	30.00	30.00
Farmington Hills MI 48334 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: 🗵 Direct 🔲 Loan from a person 🖾 Fund Raiser		
Page Subtotal	105.00	
·	105.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Num	nber _	138559-5		
2 Committee Name	Frier	nds of Fred Miller		

Enter contributor's name and address. If contribution if from an individual and the more, enter last name, first name, middle initial. Check box to indicate if contribut Committee or an Independent Committee. (PAC) Report all contributions from conamount.	ion is from a Political mmittees regardless of	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 25 PAC Receipt? ☐ YES 4. Date of Receipt_	03/05/2015	15.00	15.00
Name: Cheryl Krysiak Address:65 Kendrick St		10.00	10.50
Mt. Clemens MI 48043  5. If over \$100.00 cumulative, please provide:  Occupation Employer			
Business Address			
Type of Contribution: Direct	X Fund Raiser		
3. Contribution # 26 PAC Receipt?   YES 4. Date of Receipt  Name: Michael Labuhn	03/05/2015	30.00	30.00
Address: 57248 White Oaks			
Washington MI 48094 5. If over \$100.00 cumulative, please provide:			
OccupationEmployer			
Business Address			
Type of Contribution: Direct	Fund Raiser		
3. Contribution # 27 PAC Receipt?   YES 4. Date of Receipt  A. Date of Receipt	03/05/2015	30.00	30.00
Name: Pamela Lavers Address: 27870 Lauren St E			
Harrison Township MI 48045 5. If over \$100.00 cumulative, please provide:			
OccupationEmployer_			
Business Address			
Type of Contribution: 🗵 Direct 🔲 Loan from a person	☑ Fund Raiser		·
3. Contribution # 28 PAC Receipt? II YES 4. Date of Receipt	03/05/2015	30.00	30.00
Name: Kevin Marvin Address: 17474 Doleen			
Macomb Township MI 48044  5. If over \$100.00 cumulative, please provide:			
Occupation Employer	<u> </u>		
Business Address	· ————		
Type of Contribution: ☑ Direct ☐ Loan from a person	☑ Fund Raiser		
	Page Subtotal	105.00	
	of Ali Schedules 1A it page of Schedule)		

1. Committee I.D. Num	ber138559	-5	 
2 Committee Name	Friends of Fred	l Miller	

	· · · · · · · · · · · · · · · · · · ·	1	I
Enter contributor's name and address. If contribution if from an individual and the amore, enter last name, first name, middle initial. Check box to indicate if contribution Committee or an Independent Committee. (PAC) Report all contributions from commount.	n is from a Political mittees regardless of	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 29 PAC Receipt?   YES 4. Date of Receipt  A page 1.	03/05/2015	50.00	50.00
Name: James O'Brien Address: 42041 Little Road		50.00	50.00
Clinton Township MI 48036 5. If over \$100.00 cumulative, please provide:			
OccupationEmployer			
Business Address			
Type of Contribution:   Direct    Loan from a person	☑ Fund Raiser		
3. Contribution # 30 PAC Receipt?   YES  4. Date of Receipt	03/05/2015	30,00	30.00
Name: Dolora Paull Address: 38831 Townhill		30.00	30.00
Harrison Township MI 48045 5. If over \$100.00 cumulative, please provide:			
OccupationEmployer			
Business Address			
Type of Contribution:   Direct    Loan from a person	☑ Fund Raiser		
3. Contribution # 31 PAC Receipt? ☐ YES 4. Date of Receipt	03/05/2015	25.00	25.00
Name: Jon Pettyes Address: 23646 Kim Drive		20.00	20.00
Clinton Twp MI 48035 5. If over \$100.00 cumulative, please provide:			
Occupation Employer			
Business Address			
	☑ Fund Raiser	<u> </u>	
3. Contribution # 32 PAC Receipt? X YES 4. Date of Receipt_	03/05/2015	500.00	500.00
Name: Pipefitter's Loc 636 PAC St		500.00	300.00
Address: 30100 Northwestern			
Farmington Hills MI 48334 5. If over \$100.00 cumulative, please provide:			
OccupationEmployer			
Business Address			
Type of Contribution:	☑ Fund Raiser		
	Page Subtotal	605.00	
Grand Total or (Complete on last	f All Schedules 1A page of Schedule)		

1. Committee I.D. Num	nber	138559-5	 
2 Committee Name	Frien	ds of Fred Miller	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 33 PAC Receipt? ☐ YES 4. Date of Receipt 03/05/2015	30.00	30.00
Name: Terry Pritchett Address: 62823 Tournament Dr		
Washington Twp MI 48094  5. If over \$100.00 cumulative, please provide:  Occupation Employer		
Business Address		
Type of Contribution:  Direct		
3. Contribution # 34 PAC Receipt? ☐ YES 4. Date of Receipt 03/05/2015  Name: Marcia Relyea	60.00	60.00
Address: 79 South Wilson		
Mt. Clemens MI 48043  5. If over \$100.00 cumulative, please provide:  OccupationEmployer		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser  3. Contribution # 35 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 03/05/2015		
Name: Elaine Shinnaberry Address: 35844 Rutherford Dr	30.00	30.00
Clinton Township MI 48035 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser  3 Contribution # 36 PAC Receipt? ☐ YES 4 Date of Receipt 03/05/2015		
Name: Theodora Skinner	30.00	30.00
Address: 22424 Milner		
St. Clair Shores MI 48081 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct  D Loan from a person  E Fund Raiser		
Page Subtotal	150.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Nur	mber138559-5	
2 Committee Name	Friends of Fred Mi	llor

Enter contributor's name and address. If contribution if from an individual and the amo more, enter last name, first name, middle initial. Check box to indicate if contribution is Committee or an Independent Committee. (PAC) Report all contributions from committee amount.	from a Political ees regardless of	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 37 PAC Receipt? ☐ YES 4. Date of Receipt ☐	03/05/2015	50.00	50.00
Name: Thomas Stanton Address: 50945 Ashley St.		50.00	50.00
New Baltimore MI 48047 5. If over \$100.00 cumulative, please provide:			
OccupationEmployer	<u></u>		
Business Address			
Type of Contribution: 🗵 Direct 🔲 Loan from a person	Fund Raiser		
3. Contribution # 38 PAC Receipt?   YES 4. Date of Receipt (	03/05/2015	30.00	30.00
Name: Nancy Ventimiglia Address:20141 Woodward		30.00	30.00
Clinton Township MI 48035 5. If over \$100.00 cumulative, please provide:			
OccupationEmployer			
Business Address			
	Fund Raiser		
3. Contribution # 39 PAC Receipt?   YES  4. Date of Receipt  C	03/06/2015	100.00	100.00
Name: CTE Laura Cardamone Address:17187 Canvasback			
Clinton Township MI 48038 5. If over \$100.00 cumulative, please provide:			
OccupationEmployer			
Business Address			
	Fund Raiser		
3. Contribution # 40 PAC Receipt?   YES  4. Date of Receipt	03/09/2015	500.00	500.00
Name: Leo Lalonde Address: 24801 Rosalind		000.00	<b>500</b> .000
Eastpointe MI 48021 5. If over \$100.00 cumulative, please provide:			
Occupation RETIRED Employer Retired			
Business Same as home Address Home MI 00000			
<u> </u>	Fund Raiser	<del></del>	
	Page Subtotal	680.00	
Grand Total of All			

1. Committee I.D. Nu	ımber _	138559-5	
2 Committee Name	Erion	ds of Fred Miller	

		T	T
Enter contributor's name and address. If contribution if from an individual and the more, enter last name, first name, middle initial. Check box to indicate if contributions from committee or an Independent Committee. (PAC) Report all contributions from community.	tion is from a Political mmittees regardless of	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 41 PAC Receipt?   YES 4. Date of Receipt  4. Date of Receipt	03/09/2015	100.00	100.00
Name: Eileen McMichael Address: 18139 Fleur de Lis		100.00	100.00
Clinton Twp. MI 48038 5. If over \$100.00 cumulative, please provide:			
OccupationEmployer	<del></del>		
Business Address	,		
Type of Contribution: 🗵 Direct 🔲 Loan from a person	☑ Fund Raiser		
3. Contribution # 42 PAC Receipt? ☐ YES 4. Date of Receipt	03/09/2015	100.00	100.00
Name: Donald Ritzenhein Address:45546 Limerick		100.00	100.00
Macomb MI 48044 5. If over \$100.00 cumulative, please provide:			
OccupationEmployer			
Business Address			
Type of Contribution: 🗵 Direct 🔲 Loan from a person	☑ Fund Raiser		
3. Contribution # 43 PAC Receipt? ☐ YES 4. Date of Receipt	03/09/2015	30.00	30.00
Name: Ronald Robinson Address:39801 Moravian		00.00	
Clinton Township MI 48036 5. If over \$100.00 cumulative, please provide:			
OccupationEmployer			
Business Address	·		
Type of Contribution:   Direct   Loan from a person	Fund Raiser		
3. Contribution # 44 PAC Receipt?   YES 4. Date of Receipt	03/09/2015	100.00	100.00
Name: Judy Timpner Address:28811 Glenbrook			
Farmington Hills MI 48331 5. If over \$100.00 cumulative, please provide:			
OccupationEmployer			
Business Address			
Type of Contribution:  Direct	☑ Fund Raiser		
	Page Subtotal	330.00	
	of All Schedules 1A		-

1. Committee I.D. Numb	per 138559-5
2 Committee Name	Friends of Fred Miller

		<del>,</del>
Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 45 PAC Receipt? ☐ YES 4. Date of Receipt 03/09/2015	30.00	30.00
Name: Mark Wojdynski Address:20255 Nicke	30.00	30.00
Clinton Township MI 48035 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct   Loan from a person   Fund Raiser		
3. Contribution # 46 PAC Receipt? ☐ YES 4. Date of Receipt 03/12/2015	100.00	100.00
Name: John Axe	100.00	
Address: 21 Kercheval, Suite 360		
Grosse Pointe Farms MI 48236 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct    Loan from a person    Fund Raiser		
3. Contribution # 47 PAC Receipt? X YES 4. Date of Receipt 03/12/2015	100.00	100.00
Name: Bricklayers Local 1 MI Pac		
Address:21031 Ryan Road		
Warren MI 48091 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 48 PAC Receipt? ☐ YES 4. Date of Receipt 03/12/2015	100.00	100.00
Name: Jack Dolan		
Address: 42850 Garfield		
Clinton Township MI 48038 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: 🛛 Direct 🔲 Loan from a person 🔯 Fund Raiser		
Page Subtotal	330.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Numb	er 138559-5	
2 Committee Name F	riends of Fred Miller	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 49 PAC Receipt?   YES 4. Date of Receipt 03/12/2015	100.00	100.00
Name: Jonathon Fielbrandt Address:5929 Misty Hill Court	100.00	
Clarkston MI 48346 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address	•	
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser  3 Contribution # 50 PAC Receipt? ☐ YES 4. Date of Receipt 03/12/2015	<u> </u>	
o. continuation a continuation and the continuation and the continuation and the continuation are continuation and the continuation and the continuation are continuation are continuation and the continuation are continuation and the continuation are continuation are continuation are continuation are continuation are continuation and the continuation are continuation are continuation and the continuation are continuation are continuation are continuation are continuation are continuation are continuation and the continuation are continuat	100.00	100.00
Name: David Joseph Flynn		
Address: 2957 Parkway Circle Apt F. Address: Address: Address: 2957 Parkway Circle		
Sterling Heights MI 48310 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: 🛛 Direct 🔲 Loan from a person 🔯 Fund Raiser		
3. Contribution # 51 PAC Receipt? ☐ YES 4. Date of Receipt 03/12/2015	100.00	100.00
Name: Eugene Gargaro, Jr.	100.00	
Address: 22 Renaud Road		
Grosse Pointe Shores MI 48236 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct    Loan from a person    Fund Raiser		
3. Contribution # 52 PAC Receipt?   YES 4. Date of Receipt 03/12/2015	100.00	100.00
Name: James Jacobs		
Address: 1017 Balfour		
Grosse Pointe MI 48230 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
Page Subtotal	400.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Num	ber	138559-5		
2 Committee Name	Frie	nds of Fred Miller		

	T	
Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 53 PAC Receipt? ☐ YES 4. Date of Receipt 03/12/2015	100.00	400.00
Name: Joyce Lalonde Address:24801 Rosalind	100.00	400.00
Eastpointe MI 48021 5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer Retired		
Business Same as home Address Home MI 00000		
Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution # 54 PAC Receipt? ☐ YES 4. Date of Receipt 03/12/2015	500.00	500.00
Name: Robert Leonetti	300.00	300.00
Address: 47 Crocker		
Mt. Clemens MI 48043 5. If over \$100.00 cumulative, please provide:		
Occupation Attorney Employer Robert Leonetti		
Business 47 Crocker Address Mt Clemens MI 48043		
Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution # 55 PAC Receipt? ☐ YES 4. Date of Receipt 03/12/2015	20.00	20.00
Name: Marguerite Moore	30.00	30.00
Address:41037 Court		
Clinton Township MI 48038 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 56 PAC Receipt? II YES 4. Date of Receipt 03/12/2015	30.00	30.00
Name: Norrine Neville		
Address: 22464 Virginia		
Eastpointe MI 48021 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: 🛛 Direct 🔲 Loan from a person 🖫 Fund Raiser		
Page Subtotal	660.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Numb	per 138559-5	
2 Committee Name	Friends of Fred Miller	

	<del></del>	T
Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 57 PAC Receipt? ☐ YES 4. Date of Receipt 03/12/2015	100.00	100.00
Name: Eliza Parkinson Address:406 Waverley AVe	100.00	100.00
Royal Oak MI 48067 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: 🛛 Direct 🔲 Loan from a person 🖾 Fund Raiser		
3. Contribution # 58 PAC Receipt? ☐ YES 4. Date of Receipt 03/12/2015	200.00	200.00
Name: Judith Payton Address:4732 Barcroft		
Sterling Heights MI 48310 5. If over \$100.00 cumulative, please provide:		
Occupation Retired Employer Retired		
Business Same as home Address Home MI 00000		
Type of Contribution: 🛛 Direct 🔲 Loan from a person 🛣 Fund Raiser		
3. Contribution # 59 PAC Receipt? X YES 4. Date of Receipt 03/12/2015	100.00	100.00
Name: Plumber's Local 98 Address:531 E SEVEN MILE RD	100.00	100.00
Detroit MI 48203 5. If over \$100.00 cumulative, please provide:		1
OccupationEmployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 60 PAC Receipt? ☐ YES 4. Date of Receipt 03/12/2015	250.00	250.00
Name: Barbara Rossman Address: 54311 Queensborough		
Shelby Township MI 48315 5. If over \$100.00 cumulative, please provide:		
Occupation CEO Employer Henry Ford Macomb Hospital		
Business 15855 19 Mile Road Address Clinton Two MI 48038		:
Address Clinton Twp MI 48038  Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
Page Subtotal	650.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		1

1. Committee I.D. Num	nber	138559-5	 
2 Committee Name	Frie	nds of Fred Miller	

	1	
Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 61 PAC Receipt? ☐ YES 4. Date of Receipt 03/12/2015	100.00	100.00
Name: Eleanor Tocco Address:37139 N. Aragona	100.00	100.00
Clinton Twp M1 48036		
5. If over \$100.00 cumulative, please provide:  Occupation Employer		
Business Address		
Type of Contribution: 🛛 Direct 🔲 Loan from a person 🔯 Fund Raiser		
3. Contribution # 62 PAC Receipt? ☐ YES 4. Date of Receipt 03/12/2015	30.00	30.00
Name: Josh Weston	00.00	00.00
Address: 1436 Albany Avenue		
Ferndale MI 48220 5. If over \$100.00 cumulative, please provide:		!
Occupation Employer		·
Business Address		
Type of Contribution: Direct		
3. Contribution # 63 PAC Receipt?   YES 4. Date of Receipt 03/12/2015	150.00	225.00
Name: Julie Wright		
Address: 3342 Aquinas		
Rochester Hills MI 48309 5. If over \$100.00 cumulative, please provide:		
Occupation Teacher Employer Utica Community Schools		
Business 11303 Greendale		
Address Sterling Heights MI 48312		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser  3. Contribution # 64 PAC Receipt? ☑ YES 4. Date of Receipt 03/13/2015	<u> </u>	
	500.00	500.00
Name: Registrars PAC Local 58 IBEW		
Address:1358 Abbott St		
Detroit MI 48226 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct    Loan from a person		
Page Subtotal	700.00	
-	780.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Nun	nber _	138559-5	 
2. Committee Name_	Frien	ds of Fred Miller	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 65 PAC Receipt? © YES 4. Date of Receipt 03/15/2015	100.00	
Name: Rick Flynn	100.00	100.00
Address: 43225 Chardonnay Drive		
Sterling Heights MI 48314 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 66 PAC Receipt?   YES  4. Date of Receipt  03/15/2015	22.22	20.00
Name: Dana Gire	60.00	60.00
Address: 37567 Radde Street		
Clinton Twp Mi 48036 5. If over \$100.00 cumulative, please provide:		
Occupation Employer	i.	
Business Address		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Type of Contribution:  Direct		
3. Contribution # 67 PAC Receipt? X YES 4. Date of Receipt 03/15/2015	500.00	500.00
Name: Local #1 MEA PAC	300.00	300.00
Address: 38550 Garfield, Suite B		
Clinton Township MI 48038 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct		
3. Contribution # 68 PAC Receipt? X YES 4. Date of Receipt 03/15/2015	500.00	500.00
Name: Rizzo Enviro. Services PAC Address: 6200 Elmridge	500.00	500.00
Sterling Heights MI 48313 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
Page Subtotal	1160.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Num	nber138559-5	
2 Committee Name	Friends of Fred Miller	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 69 PAC Receipt? ☐ YES 4. Date of Receipt 03/17/2015	30.00	20.00
Name: John Miller	30.00	30.00
Address: 46690 Partridge Creek		
Clinton Township MI 48038 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:  Direct    Loan from a person		
3. Contribution # 70 PAC Receipt? ☐ YES 4. Date of Receipt 03/20/2015	20.00	20.00
Name: Judy Strong	30.00	30.00
Address: 20054 15 Mile Road		
Clinton Twp MI 48035 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 71 PAC Receipt?   YES 4. Date of Receipt 03/22/2015	30.00	30.00
Name: Harold Brewer	30.00	30.00
Address: 21371 Cass Ave		
Clinton Township MI 48036 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: 🛛 Direct 🔲 Loan from a person 🔯 Fund Raiser		
3. Contribution # 72 PAC Receipt? ☐ YES 4. Date of Receipt 03/22/2015	20.00	20.00
Name: Margaret DeMuynck	30.00	30.00
Address:52171 Jacqueline Court		
Macomb Township MI 48042 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: 🛛 Direct 🔲 Loan from a person 🔯 Fund Raiser		
Page Subtotal	120.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Number _		138559-5	
2 Committee Name	Frien	ds of Fred Miller	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 73 PAC Receipt? ☐ YES 4. Date of Receipt 03/22/2015	50.00	50.00
Name: Patrick Maceroni Address:105 S. Wilson	00.00	00.00
Mount Clemens MI 48043 5. If over \$100.00 cumulative, please provide:	·	
OccupationEmployer		:
Business Address		
Type of Contribution:  Direct		
3. Contribution # 74 PAC Receipt? ☐ YES 4. Date of Receipt 03/22/2015	100.00	100.00
Name: Andrew Patzert Address: 21175 Harrington		
•		
Clinton Township MI 48036 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		. •
Business Address		
Type of Contribution: 🗵 Direct 🔲 Loan from a person 🔟 Fund Raiser		
3. Contribution # 75 PAC Receipt? ☐ YES 4. Date of Receipt 03/22/2015	30.00	30.00
Name: John Rauchman	00.00	33.33
Address: 525 E. Woodland St.		
Apt. D Ferndale MI 48220  5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: 🗵 Direct 🔲 Loan from a person 🔯 Fund Raiser		
3. Contribution # 76 PAC Receipt?   YES 4. Date of Receipt 03/22/2015	30.00	30,00
Name: Michael Smith		
Address: 33006 Slocum St		
Farmington MI 48336 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: 🛛 Direct 🔲 Loan from a person 🔯 Fund Raiser		
Page Subtotal	210.00	
Grand Total of All Schedules 1A		

1. Committee I.D. Num	ber	138559-5		
2 Committee Name	Frie	nds of Fred Miller		

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 77 PAC Receipt?   YES 4. Date of Receipt 03/22/2015  Name: Grozda Swetech	30.00	30.00
Address: 44370 Cadburry Drive		
Clinton Township MI 48038 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser  3. Contribution # 78 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 03/22/2015		
3. Contribution # 78 PAC Receipt? ☐ YES 4. Date of Receipt 03/22/2015  Name: Ronald Syme	30.00	30.00
Address: 38690 Long		
Harrison Township MI 48045 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address	·	
Type of Contribution:  Direct		
3. Contribution # 79 PAC Receipt?   YES 4. Date of Receipt 03/22/2015	30.00	30.00
Name: Jill Zech Address: 19292 Scenic Harbor		
Macomb Township MI 48044  5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution # 80 PAC Receipt?   YES 4. Date of Receipt 03/25/2015	15.00	15.00
Name: Loretta Brownlee	10.00	10.00
Address: 240 Clinton River Drive		
Mt. Clemens MI 48043 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
Page Subtotal	105.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Nur	mber _	138559-5	
2 Committee Name	Erion	ds of Fred Miller	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or	6. Amount	7. Cumulative for
more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.		Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 81 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015	20.00	
Name: Dominic Abbate Address: 2500 Royal View Drive	30.00	30.00
Oakland MI 48363 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: 🛛 Direct 🔲 Loan from a person 🔯 Fund Raiser		
3. Contribution # 82 PAC Receipt?   YES 4. Date of Receipt 03/26/2015	30.00	30.00
Name: John Bierbusse Address: 77147 N. Mary Grace Court		
Romeo MI 48065  5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:  Direct		
3. Contribution # 83 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015	30.00	30.00
Name: Dennis Bruck Address: 19637 LLoyd		
Clinton Twp MI 48038 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 84 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015	250.00	250.00
Name: Nick Ciaramitaro Address:19473 Candlelight		
Roseville MI 48066		
5. If over \$100.00 cumulative, please provide:  Occupation Legislative Director Employer AFSCME Council 25		
Business 600 Lafayette		
Address Detroit MI 48235		
Type of Contribution:  Direct		
Page Subtotal	340.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Nur	mber	138559-5	
2 Committee Name	Frie	nds of Fred Miller	

	T	1
Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 85 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015	400.00	400.00
Name: CTE Denise Mentzer Address: 1399 Kingsley	100.00	100.00
Mount Clemens MI 48043  5. If over \$100.00 cumulative, please provide:  Occupation Employer		
Business Address		
Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution # 86 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015	400.00	450.00
Name: Michelle DeBeaussaert Address: 39856 Brylor Ct.	100.00	150.00
Clinton Twp MI 48038 5. If over \$100.00 cumulative, please provide:		
Occupation Retired Employer Retired		
Business Same as home Address Home MI 00000		
Type of Contribution: Direct		
3. Contribution # 87 PAC Receipt?   YES  4. Date of Receipt  03/26/2015	30.00	30.00
Name: Cardi DeMonaco	30.00	30.00
Address: 23225 Oakwood		
Eastpointe MI 48021 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: 🗵 Direct 🔲 Loan from a person 🖾 Fund Raiser		
3. Contribution # 88 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015	50.00	450.00
Name: Debra Dorosh Address:44188 Rina Lane	50.00	150.00
Clinton Twp. MI 48038 5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer RETIRED		
Rusiness Same as Home		
Business Same as Home Address Home MI 00000		
Type of Contribution:  Direct		
Page Subtotal	280.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)		

A STATE OF THE STA

1. Committee I.D. Num	ber138559-5
2 Committee Name	Friends of Fred Miller

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 89 PAC Receipt?   YES 4. Date of Receipt 03/26/2015	30.00	30.00
Name: Nancy Falcone Address: 63308 Ashbury Drive	00.00	00.00
Washington MI 48095 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 90 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015	100.00	100.00
Name: John Foster Address: 38567 Riverside Drive		
Clinton Twp Mi 48036 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 91 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015	60.00	60.00
Name: Sara Gieleghem Address: 37905 Horseshoe Drive		
Clinton Township MI 48036 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser	<u> </u>	
3. Contribution # 92 PAC Receipt?   YES 4. Date of Receipt 03/26/2015	75.00	75.00
Name: Barb Gotz		
Address: 4626 County Road 489		
Onaway MI 49765 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
Page Subtotal	265.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		]

1. Committee I.D. Nu	mber1	38559-5	
2 Committee Name	Eriondo	of Fred Miller	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 93 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015	30.00	30.00
Name: Barry Gross Address: 9838 Dixie Hwy	00.00	00.00
Fair Haven MI 48023 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct		
3. Contribution # 94 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015	100.00	100.00
Name: Thomas Guastello		
Address:34120 Woodward		
Birmingham MI 48009 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		:
Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution # 95 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015	100.00	100.00
Name: Paula Herbart	133.33	100.00
Address:21163 Hale		
Clinton Township M! 48036 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address	·	
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 96 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015	100.00	100.00
Name: Thomas Hill	,,,,,,,	
Address: 15 S. Highland		
Mt. Clemens MI 48043 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
Page Subtotal	330.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Num	nber	138559-5	
2 Committee Name	Frien	ds of Fred Miller	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 97 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015	100.00	100.00
Name: Laura Kropp		
Address: 15 Belleview		
Mt. Clemens Mt 48043 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:  Direct		
3. Contribution # 98 PAC Receipt?   YES 4. Date of Receipt 03/26/2015	20.00	20.00
Name: John MacArthur	30.00	30.00
Address: 40 W. Breitmeyer Place		
Mount Clemens MI 48043 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution # 99 PAC Receipt?   YES 4. Date of Receipt 03/26/2015	500.00	500.00
Name: James Maceroni	500.00	500.00
Address: 22954 Allen Road		
St. Clair Shores MI 48080 5. If over \$100.00 cumulative, please provide:		
Occupation Judge Employer 16th Circuit Court		
Business 40 N. Main Street		
Address Mount Clemens MI 48043		
Type of Contribution:  Direct		
3. Contribution # 100 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015	500.00	500.00
Name: Beverly Miller		
Address:11499 Stewart Beach Road		
Onaway MI 49765 5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer RETIRED		
Business Same as Home		
Address Home MI 00000		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
Page Subtotal	1130.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Nur	mber _	138559-5	
2 Committee Name	Erior	nds of Fred Miller	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 101 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015  Name: Cindy Miller	30.00	30.00
Address: 46690 Partridge Creek		
Macomb MI 48044 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 102 PAC Receipt? X YES 4. Date of Receipt 03/26/2015	1000.00	1000.00
Name: MRCC MI Reg Coun of Carpenters		
Address: 400 Tower, Ren Cen Suite 1010 Detroit MI 48243		
5. If over \$100.00 cumulative, please provide:		
Occupation Employer Employer		
Business Address		:
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 103 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015	30.00	30.00
Name: Colleen Orr		
Address: 54637 Marissa Way		
Shelby Township MI 48316 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: 🗵 Direct 🔲 Loan from a person 🗵 Fund Raiser		
3. Contribution # 104 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015	30.00	30.00
Name: Ken Pearl	30.00	30.00
Address: 38316 Santa Barbara		
Clinton Twp MI 48036 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
Page Subtotal	1090.00	·
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Number _		138559-5	
2 Committee Name	Friend	ds of Fred Miller	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 105 PAC Receipt? II YES 4. Date of Receipt 03/26/2015	30.00	30.00
Name: Elizabeth Pugh		
Address: 22641 Katzman		
Clinton Township MI 48035 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		·
Business Address		
Type of Contribution: 🛛 Direct 🔲 Loan from a person 🔯 Fund Raiser		
3. Contribution # 106 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015	30.00	30.00
Name: William Putney		
Address: 8151 Division		
Casco MI 48064 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Puninana		
Business Address		
Type of Contribution:  Direct		
3. Contribution # 107 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015	50.00	50.00
Name: Catherine Reed		
Address: 150 S. Wilson		
Mount Clemens MI 48043 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Duringer		
Business Address		
Type of Contribution: Direct		
3. Contribution # 108 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015	100.00	100.00
Name: Stephen Saph		
Address:44 Macomb Place		
Mount Clemens MI 48046 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
Page Subtotal	210.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Numl	per 138559-5	
2 Committoe Name	Friends of Fred Miller	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 109 PAC Receipt? X YES 4. Date of Receipt 03/26/2015	100.00	100.00
Name: Sheet Metal Worker's Loc 80 Address: 17255 W 10 Mile		
Southfield MI 48075 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:  Direct		
3. Contribution # 110 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015  Name: Joe Slabbinck	30.00	30.00
Address:7012 Amberwick Way		
Citrus Heights CA 95621 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:  Direct		
3. Contribution # 111 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015	100.00	100.00
Name: William Sowerby Address: 37860 Saddle Lane		
Clinton Twp MI 48036		
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 112 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015	30.00	30.00
Name: Matthew Switalski		
Address: 43838 Pintail		
Clinton Township MI 48038 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
Page Subtotal	260.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Nun	nber _	138559-5	
2 Committee Name	Frier	ds of Fred Miller	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 113 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015  Name: Mary Vandermaas	50.00	50.00
Address: 14351 Pernell		
Sterling Heights MI 48313 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		·
Business Address		·
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser  3. Contribution # 114 PAC Receipt? ☐ YES 4. Date of Receipt 03/26/2015		
	30.00	30.00
Name: Jennifer Jo West Address: 20752 Aldo Ct		
Clinton Twp MI 48038 5. If over \$100.00 cumulative, please provide:		:
OccupationEmployer		
Business Address		
Type of Contribution: 🗵 Direct 🔲 Loan from a person 🖾 Fund Raiser		· · · · · ·
3. Contribution # 115 PAC Receipt?   YES 4. Date of Receipt 03/26/2015	100.00	100.00
Name: Paul Wojno		
Address: 32025 Margaret Court		
Warren Mi 48093 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: 🗵 Direct 🔲 Loan from a person 🖾 Fund Raiser		
3. Contribution # 116 PAC Receipt?   YES 4. Date of Receipt 03/30/2015	100.00	100.00
Name: Robert Fetter		ļ
Address: 22028 Englehardt		
St. Clair Shores MI 48080 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution:   Direct  Loan from a person  Fund Raiser		
Page Subtotal	280.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Numl	ber138559-5	
2 Committee Name	Friends of Fred Miller	-

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 117 PAC Receipt? ☐ YES 4. Date of Receipt 03/30/2015	20.00	20.00
Name: Joan Flynn		
Address: 13810 Trafalga		
Warren MI 48088 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct    Loan from a person    Fund Raiser		
3. Contribution # 118 PAC Receipt? ☐ YES 4. Date of Receipt 03/30/2015	25.00	25.00
Name: Mary Jane Howard	25.00	25.00
Address:17751 Edloyton Way		
Clinton Twp MI 48038  5. If over \$100.00 cumulative, please provide:		:
Occupation Employer		
Business Address		
Type of Contribution: 🗵 Direct 🔲 Loan from a person 🗵 Fund Raiser		
3. Contribution # 119 PAC Receipt? ☐ YES 4. Date of Receipt 03/30/2015	100.00	100.00
Name: Michael R Kramer	100.00	100.00
Address: 2600 Big Beaver Road Suite 300 Troy MI 48084		
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: 🛛 Direct 🔲 Loan from a person 🖾 Fund Raiser		
3. Contribution # 120 PAC Receipt? ☐ YES 4. Date of Receipt 03/30/2015	60.00	60.00
Name: Anne Lilla	00.00	33.33
Address: 153 South Highland		
Mt. Clemens MI 48043 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
Page Subtotal	205.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Number		138559-5	
2 Committee Name	Frie	nds of Fred Miller	

3. Contribution # 121   PAC Receipt?   PKS   4. Date of Receipt   03/30/2015   10.00   10.00	Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Mt. Clemens MI. 48043 5. If over \$100.00 cumulative, please provide:    Coccupation		10.00	10.00
S. If over \$100.00 cumulative, please provide:			
Business   Address   Type of Contribution:   Direct	5. If over \$100.00 cumulative, please provide:		
Address   Type of Contribution:	OccupationEmployer		
3. Contribution # 122 PAC Receipt? □ YES 4. Date of Receipt			
Name: Clemmie Swoope			
Address:17200 Dove Street, Unit 324  Clinton Township MI 48038 5. If over \$100.00 cumulative, please provide:  Occupation	\ <del></del>	20.00	20.00
Clinton Township MI 48038  5. If over \$100.00 cumulative, please provide:  Occupation	·		
Description	Clinton Township MI 48038		
Address   Type of Contribution:			
3. Contribution # 123 PAC Receipt? □ YES			
Name: Lori Richards Address: 364 Harringrton  Mt. Clemens MI 48043  5. If over \$100.00 cumulative, please provide:  Occupation			
Address: 364 Harringrton  Mt. Clemens MI 48043 5. If over \$100.00 cumulative, please provide:  OccupationEmployer	,20	100.00	100.00
Mt. Clemens MI 48043  5. If over \$100.00 cumulative, please provide:  OccupationEmployer			
5. If over \$100.00 cumulative, please provide:  Occupation			
Business Address  Type of Contribution: Direct    Loan from a person	5. If over \$100.00 cumulative, please provide:		
Type of Contribution: Direct  Loan from a person  Direct  O4/11/2015  3. Contribution # 124  PAC Receipt? YES  4. Date of Receipt  O4/11/2015  Name: Debra Dorosh Address: 44188 Rina Lane Clinton Twp. MI 48038  5. If over \$100.00 cumulative, please provide: Occupation RETIRED  Employer RETIRED  Business Address  Home  MI 00000	Occupation Employer		
Type of Contribution: Direct			
3. Contribution # 124 PAC Receipt? ☐ YES 4. Date of Receipt 04/11/2015  Name: Debra Dorosh Address: 44188 Rina Lane  Clinton Twp. MI 48038  5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer RETIRED  Business Address Home Mi 00000			
Name: Debra Dorosh  Address: 44188 Rina Lane  Clinton Twp. MI 48038  5. If over \$100.00 cumulative, please provide:  Occupation RETIRED Employer RETIRED  Business Same as Home Address Home Mi 00000		50.00	200.00
5. If over \$100.00 cumulative, please provide:  Occupation RETIRED Employer RETIRED  Business Same as Home Address Home Mi 00000		30.00	200.00
Occupation RETIRED Employer RETIRED  Business Same as Home Address Home Mi 00000			
Address Home MI 00000			
Address Home Mi 00000	Business Same as Home		
Type of Contribution:	Address Home MI 00000		
	Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
Page Subtotal 180.00	Page Subtotal	180.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)			

1. Committee I.D. Number		138559-5	
2 Committee Name	Frie	nds of Fred Miller	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 125 PAC Receipt?   YES 4. Date of Receipt 04/16/2015	50.00	50.00
Name: Sarah Stovall Address:23628 Marlborough	50.00	50.00
Clinton Twp MI 48036 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct Loan from a person Fund Raiser		
3. Contribution # 126 PAC Receipt?   YES 4. Date of Receipt 04/20/2015	20.00	20.00
Name: Carole Bannister	30.00	30.00
Address: 18877 Highlite Drive S.		
Clinton Township MI 48035 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution # 127 PAC Receipt?   YES 4. Date of Receipt 04/20/2015	00.00	20.00
Name: Marilyn Grosteffon	30.00	30.00
Address: 1984 Lockmoor Blvd		
Grosse Pointe Woods MI 48236 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Direct Fund Raiser		
3. Contribution # 128 PAC Receipt? ☐ YES 4. Date of Receipt 04/20/2015	20.00	20.00
Name: Brian Jackson	20.00	20.00
Address: 5049 Lakeshore Road		
Lexington MI 48450 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct Loan from a person   Fund Raiser		
Page Subtotal	130.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Nun	nber	138559-5	
2 Committee Name	Frie	nds of Fred Miller	

Enter contributor's name and address, if contribution if from an individual and the amount is \$20.01 or more, enter leaf name, first name, middle initial. Check box to individual and the amount is \$20.01 or more, enter leaf name, first name, middle initial. Check box to individual is from a Political amount.  3. Centribution # 129 PAC Receipt?			
Name: Julie Wright   100.00   325.00	more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	Election Cycle for Each Contributor (Through
Name:   Julie Wright	3. Contribution # 129 PAC Receipt? ☐ YES 4. Date of Receipt 05/02/2015	400.00	005.00
6. If over \$10.00 cumulative, please provide:         Employer _ Utica Community Schools           Dushness Sterling Heights _MI _48312		100.00	325.00
Business   11303 Greendale   Address   Starting Heights   ML 48312			
Address   Starting Haights   M   48312	Occupation Teacher Employer Utica Community Schools		
3. Contribution # 130 PAC Receipt? □ YES	Address Sterling Heights MI 48312		
Name: Freya Weberman   So.00   So.00			
Address: 10144 Ludlow  Huntington Woods MI 48070 5. If over \$100.00 cumulative, please provide:  Occupation  Employer  Business Address  Type of Contribution: Direct		50.00	50.00
5. If over \$100.00 cumulative, please provide:    Coccupation	•		
Business   Address   Type of Contribution:	5. If over \$100.00 cumulative, please provide:		
Address   Type of Contribution:   Direct   Loan from a person   Direct   Solution   Direct   Loan from a person   Direct   Doblet   Dobl	OccupationEmployer		
3. Contribution # 131 PAC Receipt? □ YES			
Name: Dominic Abbate  Address: 2500 Royal View Drive  Oakland MI 48363  5. If over \$100.00 cumulative, please provide:  Occupation Employer			
Name: Dominic Abbate       Address: 2500 Royal View Drive         Oakland MI	3. Contribution # 131 PAC Receipt? ☐ YES 4. Date of Receipt 05/12/2015	20.00	00.00
Dakland MI		30.00	60.00
5. If over \$100.00 cumulative, please provide:  OccupationEmployer	Address: 2500 Royal View Drive		
Business Address  Type of Contribution:  Direct			
Business Address  Type of Contribution:  Direct	Occupation Employer		
Type of Contribution:	Business		
3. Contribution # 132 PAC Receipt? □ YES			
Name: Edward Bruley Address:38157 Radde  Clinton Township MI 48036 5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer Retired  Business Address Home MI 00000 Type of Contribution: Direct Loan from a person Fund Raiser  Page Subtotal 580.00  Grand Total of All Schedules 1A			
Clinton Township MI 48036  5. If over \$100.00 cumulative, please provide:  Occupation RETIRED Employer Retired  Business Same as home Address Home MI 00000  Type of Contribution: Direct Loan from a person Fund Raiser  Page Subtotal 580.00  Grand Total of All Schedules 1A	Name: Edward Bruley	400.00	400.00
5. If over \$100.00 cumulative, please provide:  Occupation RETIRED Employer Retired  Business Address Home MI 00000  Type of Contribution: Direct Loan from a person Fund Raiser  Page Subtotal 580.00  Grand Total of All Schedules 1A			
Business Address Same as home  Home MI 00000  Type of Contribution: Direct Duan from a person Fund Raiser  Page Subtotal 580.00  Grand Total of All Schedules 1A	5. If over \$100.00 cumulative, please provide:		
Address Home MI 00000  Type of Contribution:  Direct	Occupation RETIRED Employer Retired		
Address Home MI 00000 Type of Contribution: Direct Duan from a person Fund Raiser  Page Subtotal 580.00  Grand Total of All Schedules 1A	Business Same as home		
Page Subtotal 580.00  Grand Total of All Schedules 1A	A.d.l.		
Grand Total of All Schedules 1A	Type of Contribution:  Direct		
	Page Subtotal	580.00	
• • • • • • • • • • • • • • • • • • • •			]

1. Committee I.D. Nun	nber _	138559-5	
2 Committee Name	Frier	nds of Fred Miller	

	1	T
Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 133 PAC Receipt? ☐ YES 4. Date of Receipt 05/14/2015	100.00	500.00
Name: Joyce Lalonde Address:24801 Rosalind	100.00	500.00
Eastpointe MI 48021 5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer Retired		
Business Same as home Address Home MI 00000		
Type of Contribution:   Direct   Loan from a person   Fund Raiser		
3. Contribution # 134 PAC Receipt? ☐ YES 4. Date of Receipt 05/15/2015	20.00	20.00
Name: Evelyn Baron Address: 24061 Majestic Blvd		
Oak Park MI 48237  5. If over \$100.00 cumulative, please provide:  Occupation Employer		
OccupationEmployer		
Business Address		
Type of Contribution: Direct		
3. Contribution # 135 PAC Receipt? ☐ YES 4. Date of Receipt 05/15/2015	150.00	300.00
Name: Michelle DeBeaussaert		
Address: 39856 Brylor Ct.		
Clinton Twp MI 48038 5. If over \$100.00 cumulative, please provide:		
Occupation Retired Employer Retired		
Business Same as home Address Home MI 00000		
Type of Contribution:  Direct		
3. Contribution # 136 PAC Receipt? ☐ YES 4. Date of Receipt 05/21/2015		
Name: Rick Flynn Address:43225 Chardonnay Drive	100.00	200.00
Sterling Heights MI 48314		
5. If over \$100.00 cumulative, please provide:  Occupation Uniserve Director Employer MEA Local 1		
00550 O-4-14		
Business 38550 Garrierd Address Clinton Township MI 48038		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
Page Subtotal	370.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)		J

1. Committee I.D. Number _		138559-5	
2. Committee Name	Frien	ds of Fred Miller	r

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 137 PAC Receipt? ☐ YES 4. Date of Receipt 05/21/2015  Name: Michael R Kramer	100.00	200.00
Address: 2600 Big Beaver Road Suite 300 Troy MI 48084 5. If over \$100.00 cumulative, please provide:		
Occupation Attorney Employer Crestmark Bank		
Business 5480 Corporate Drive Address Troy MI 48098	ļ	
Type of Contribution:  Direct		
3. Contribution # 138 PAC Receipt? ☐ YES 4. Date of Receipt 05/24/2015  Name: Judy Timpner	30.00	130.00
Address: 28811 Glenbrook		
Farmington Hills MI 48331 5. If over \$100.00 cumulative, please provide:		
Occupation Court Administrator Employer 17th District Court		
Business 15111 Beech Daly Address Redford ML 48239		
Type of Contribution:  Direct		,
3. Contribution # 139 PAC Receipt? X YES 4. Date of Receipt 05/27/2015	1000.00	2000.00
Name: MRCC MI Reg Coun of Carpenters		
Address: 400 Tower, Ren Cen Suite 1010 Detroit MI 48243 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution:   Direct Loan from a person Fund Raiser		
3. Contribution # 140 PAC Receipt?   YES 4. Date of Receipt 05/28/2015	100.00	200.00
Name: John Axe Address:21 Kercheval, Suite 360	100.00	200.00
Grosse Pointe Farms MI 48236  5. If over \$100.00 cumulative, please provide:		
Occupation Attorney Employer Axe & Eckland		
Business 21 Kercheval		
Address Grosse Pointe Farms MI 48236		
Type of Contribution:   Direct Loan from a person Fund Raiser	-	
Page Subtotal	1230.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Number	г 138559-5	
2 Committee Name F	iends of Fred Miller	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 141 PAC Receipt? ☐ YES 4. Date of Receipt 05/28/2015	400.00	100.00
Name: Brian Brdak Address:51696 Promenade Circle	100.00	100.00
New Baltimore MI 48047  5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct   Loan from a person   Fund Raiser		
3. Contribution # 142 PAC Receipt? ☐ YES 4. Date of Receipt 05/28/2015	30.00	30.00
Name: Nancy Duemling	30.00	30.00
Address: 20776 Moxon Drive		
Clinton Township MI 48036 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 143 PAC Receipt?  YES 4. Date of Receipt 05/28/2015	100.00	200.00
Name: Eugene Gargaro, Jr.		255.55
Address: 22 Renaud Road		
Grosse Pointe Shores MI 48236 5. If over \$100.00 cumulative, please provide:		
Occupation Director Employer Masco Tech		
Business 10769 Plaza Drive		
Address Whitmre Lake MI 48189  Type of Contribution:  Direct  Loan from a person  Fund Raiser		
3. Contribution # 144 PAC Receipt? 21 YES 4. Date of Receipt 05/28/2015		
Name: Local #1 MEA PAC	200.00	700.00
Address:38550 Garfield, Suite B		
Clinton Township MI 48038 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: 🛛 Direct 🔲 Loan from a person 🔯 Fund Raiser		
Page Subtotal	430.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Num	ber138559-5
2 Committee Name	Friends of Fred Miller

		T
Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 145 PAC Receipt? X YES 4. Date of Receipt 05/28/2015	500.00	1000.00
Name: Pipefitter's Loc 636 PAC St Address: 30100 Northwestern	300.00	1000.00
Farmington Hills MI 48334 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: 🛛 Direct 🔲 Loan from a person 🔯 Fund Raiser		
3. Contribution # 146 PAC Receipt?   ✓ YES 4. Date of Receipt 05/28/2015	100.00	200.00
Name: Plumber's Local 98 Address: 531 E SEVEN MILE RD	100.00	200.00
Detroit MI 48203 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct Loan from a person Fund Raiser		
3. Contribution # 147 PAC Receipt? ☑ YES 4. Date of Receipt 05/28/2015	100.00	200.00
Name: Sheet Metal Worker's Loc 80 Address: 17255 W 10 Mile	700.00	200.00
Southfield MI 48075 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: 🗵 Direct 🔲 Loan from a person 🔯 Fund Raiser		
3. Contribution # 148 PAC Receipt? ☐ YES 4. Date of Receipt 05/29/2015	50.00	350.00
Name: Michelle DeBeaussaert Address: 39856 Brylor Ct.		
Clinton Twp MI 48038 5. If over \$100.00 cumulative, please provide:		
Occupation Retired Employer Retired		
Business Same as home		
Address Home MI 00000  Type of Contribution:   D Loan from a person  Fund Raiser		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
Page Subtotal	750.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Number		138559-5	
2 Committee Name	Frier	nds of Fred Miller	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 149 PAC Receipt?   YES 4. Date of Receipt 05/30/2015	50.00	250.00
Name: Debra Dorosh		
Address:44188 Rina Lane		
Clinton Twp. MI 48038 5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer RETIRED		
Business Same as Home Address Home MI 00000	, ,	
Address Home MI 00000  Type of Contribution:  Direct		
3. Contribution # 150 PAC Receipt? 🛘 YES 4. Date of Receipt 05/30/2015	400.00	400.00
Name: Jennifer McKernan	100.00	100.00
Address: 19750 E. Kings Court		
Grosse Pointe Woods MI 48236		
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Rusinasa		
Business Address		
Type of Contribution:  Direct		
3. Contribution # 151 PAC Receipt? ☐ YES 4. Date of Receipt 05/31/2015	210,00	210.00
Name: Robert Allison	270.00	0.00
Address:2445 Cummings		
Apt B20 Berkley MI 48072		
5. If over \$100.00 cumulative, please provide:		
Occupation <u>Executive Director</u> Employer <u>SEIU Michigan State Council</u>		
Business 201 N. Washington		
Address Lansing MI 48909		·
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser  3. Contribution # 152 PAC Receipt? ☐ YES 4. Date of Receipt 05/31/2015		
C. Contabadon in 102 The resemble in 120	25.00	25.00
Name: Millicent Berry		
Address:25435 Wareham		
Huntington Woods MI 48070		
5. If over \$100.00 cumulative, please provide:  Occupation Employer		
Cocupation		
Business Address		
Type of Contribution:  Direct	-	
Page Subtotal	385.00	
Grand Total of All Schedules 1A	333.00	
(Complete on last page of Schedule)		

1. Committee I.D. Number _		138559-5	
2. Committee Name _	Frier	nds of Fred Miller	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 153 PAC Receipt?   YES 4. Date of Receipt 05/31/2015  Name: Mark Brewer	100.00	430.00
Address: 37414 Stonegate Circle	!	
Clinton Township MI 48036 5. If over \$100.00 cumulative, please provide:		
Occupation Attorney Employer Goodman & Acker		
Business 17000 W. 10 Mile Road Address Southfield MI 48075		
Type of Contribution:  Direct		
3. Contribution # 154 PAC Receipt? ☐ YES 4. Date of Receipt 05/31/2015  Name: Lisa Brown	30.00	30.00
Address:4480 Strathdale Lane		
West Bloomfield MI 48323 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:  Direct		
3. Contribution # 155 PAC Receipt? ☐ YES 4. Date of Receipt 05/31/2015	30.00	30.00
Name: Daniel Cherrin		
Address: 3786 Tyler Ave		
Berkley MI 48072 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:  Direct		
3. Contribution # 156 PAC Receipt? ☐ YES 4. Date of Receipt 05/31/2015	100.00	350.00
Name: Nick Ciaramitaro Address:19473 Candlelight		1
Roseville MI 48066 5. If over \$100.00 cumulative, please provide:		
Occupation Legislative Director Employer AFSCME Council 25		
Business 600 Lafayette Address Detroit MI 48235		
Type of Contribution:  Direct		
Page Subtotal	260.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
(complete on last page of contradity)		•

1. Committee I.D. Numb	er 138559-5
2 Committee Name F	riends of Fred Miller

**************************************	· · · · · · · · · · · · · · · · · · ·	
Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 157 PAC Receipt? ☐ YES 4. Date of Receipt 05/31/2015	30.00	60.00
Name: Nancy Falcone Address:63308 Ashbury Drive	30.00	60.00
Washington MI 48095 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:  Direct		
3. Contribution # 158 PAC Receipt? ☐ YES 4. Date of Receipt 05/31/2015  Name: John Freeman	100.00	100.00
Address: 28342 Dartmouth		
Madison Heights MI 48071 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct	<u> </u>	
3. Contribution # 159 PAC Receipt? ☐ YES 4. Date of Receipt 05/31/2015	40.00	40.00
Name: August Gitschlag		
Address: 22101 Francis Street		
St. Clair Shores MI 48082 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution:  Direct		
3. Contribution # 160 PAC Receipt?   YES 4. Date of Receipt 05/31/2015	30.00	30.00
Name: Charles Goedert		
Address: 821 W. Breckenridge		
Ferndale MI 48220 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution:   Direct  Loan from a person  Fund Raiser		
Page Subtotal	200.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
/		

1. Committee I.D. Nur	nber138559-5	
2 Committee Name	Friends of Fred Miller	

		T
Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 161 PAC Receipt? ☐ YES 4. Date of Receipt 05/31/2015	50.00	50.00
Name: David Green Address: 28282 Harwich	50.00	50.00
Farmington Hills MI 48334 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution # 162 PAC Receipt?   YES 4. Date of Receipt 05/31/2015	100.00	100.00
Name: Tim Greimel  Address: 2640 Greenstone Blvd.  Apt. 1704 Auburn Hills MI 48326	,	100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:  Direct		
3. Contribution # 163 PAC Receipt? ☐ YES 4. Date of Receipt 05/31/2015	30.00	30.00
Name: Richard Herbst Address:15509 Birwood		
Beverly Hills MI 48025 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:  Direct		
3. Contribution # 164 PAC Receipt? ☐ YES 4. Date of Receipt 05/31/2015	30.00	30.00
Name: Kevin Hrit		
Address:2937 Wakefield		
Berkley MI 48072 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution:   Direct    Loan from a person    Fund Raiser		
Page Subtotal	210.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		]

1. Committee I.D. Nur	mber _	138559-5	
2 Committee Name	Friend	ds of Fred Miller	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 165 PAC Receipt?   YES 4. Date of Receipt 05/31/2015	30.00	30.00
Name: Liz Lenhard Address: 208 S. Minerva		
Royal Oak MI 48067 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:  Direct		
3. Contribution # 166 PAC Receipt?   YES 4. Date of Receipt 05/31/2015	50.00	50.00
Name: Barry Lepler		
Address: 13159 Nadine		
Huntington Woods MI 48070 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address	·	
Type of Contribution:  Direct		
3. Contribution # 167 PAC Receipt? D YES 4. Date of Receipt 05/31/2015	60.00	60.00
Name: Hugh Madden		
Address: 2650 Edgemont		
Trenton MI 48183 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct    Loan from a person    Fund Raiser		
3. Contribution # 168 PAC Receipt?   YES 4. Date of Receipt 05/31/2015	25.00	25.00
Name: Jeremy Mahrle	20.00	_5.55
Address: 3905 Devon Road		
Apt. 5 Royal Oak MI 48073  5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: 🗵 Direct 🔲 Loan from a person 🖾 Fund Raiser		
Page Subtotal	165.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Nu	mber _	138559-5	
2. Committee Name _	Frien	ds of Fred Miller	

	·	
Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 169 PAC Receipt? ☐ YES 4. Date of Receipt 05/31/2015	F0 00	50.00
Name: Marian McClellan Address:14100 Balfour	50.00	50.00
Oak Park MI 48237  5. If over \$100.00 cumulative, please provide:  Occupation Employer		
criployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser		
3. Contribution # 170 PAC Receipt?   YES 4. Date of Receipt 05/31/2015	500.00	500.00
Name: James Miller		
Address: 26105 LaMuera		
Farmington Hills MI 48334 5. If over \$100.00 cumulative, please provide:		
Occupation Retired Employer James Miller		
Business 26105 LaMuera Address Farmington Hills MI 48334		
Address Farmington Hills MI 48334  Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 171 PAC Receipt? X YES 4. Date of Receipt 05/31/2015		
Name: Miller Canfield PAC	500.00	1500.00
Address: 150 W Jefferson		
Detroit MI 48226 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct   Loan from a person   Fund Raiser		
3. Contribution # 172 PAC Receipt? ☐ YES 4. Date of Receipt 05/31/2015	100.00	100.00
Name: Kay D Nowaczok Address: 40430 Pritts	100.00	100.00
Clinton Township MI 48038 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
Page Subtotal	1150.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	,,,,,,,	
(44[4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4		

1. Committee I.D. Num	nber _	138559-5	
2 Committee Name	Frier	nds of Fred Miller	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 173 PAC Receipt? ☐ YES 4. Date of Receipt 05/31/2015	100.00	200.00
Name: Eliza Parkinson		
Address: 406 Waverley AVe		,
Royal Oak MI 48067  5. If over \$100.00 cumulative, please provide:		
Occupation President Employer Utica Education Assoc		
Business 13969 Plumbrook Address Sterling Heights MI 48312		
Type of Contribution:  Direct		
3. Contribution # 174 PAC Receipt?   YES 4. Date of Receipt 05/31/2015	20.00	20.00
Name: Cynthia Reid	30.00	30.00
Address: 6050 Shappie Road		
Clarkston Mi 48348		
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Pusinasa		
Business Address		
Type of Contribution:   Direct Loan from a person Fund Raiser		
3. Contribution # 175 PAC Receipt?  YES 4. Date of Receipt 05/31/2015	50.00	80.00
Name: Ronald Robinson Address: 39801 Moravian	30.00	00.00
Clinton Township MI 48036		
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:  Direct  Loan from a person  Fund Raiser		
3. Contribution # 176 PAC Receipt?   YES 4. Date of Receipt 05/31/2015		
Name: Patrick Rorai	500.00	500.00
Address: 357 McKinley		
Grosse Pointe Farms MI 48236  5. If over \$100.00 cumulative, please provide:		
Occupation Attorney Employer McKnight et.al. PLLP		
Business 400 Galleria		
Address Southfield MI 48034  Type of Contribution:   Direct Dan from a person D Fund Raiser		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
Page Subtotal	680.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
(Complete on last page of Confedure)	<del></del>	•

1. Committee I.D. Num	nber _	138559-5	
2 Committee Name	Frier	nds of Fred Miller	

	1	η
Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 177 PAC Receipt? ☐ YES 4. Date of Receipt 05/31/2015	100.00	100.00
Name: Graham Shullman Address:17138 Kirkshire	100.00	100.00
Beverly Hills MI 48025		
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct  Loan from a person  Fund Raiser	<u> </u>	
3. Contribution # 178 PAC Receipt? ☐ YES 4. Date of Receipt 05/31/2015	30.00	30.00
Name: Michael Wasielewski		
Address: 801 W. Long Lake Road, D2		
Bloomfield Hills MI 48302 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct    Loan from a person    Fund Raiser		
3. Contribution # 179 PAC Receipt? ☐ YES 4. Date of Receipt 05/31/2015	100.00	100.00
Name: Jody Weissler DeFoe		
Address: 23470 Riverview		
Southfield MI 48034 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: 🗵 Direct 🔲 Loan from a person 🔯 Fund Raiser		
3. Contribution # 180 PAC Receipt?   YES 4. Date of Receipt 05/31/2015	30.00	30.00
Name: Eric Woody	30.00	30.00
Address:43139 Coralbean Court		
Sterling Heights MI 48314 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:  Direct		
Page Subtotal	260.00	,
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Nun	nber 138559-5
2 Committee Name	Friends of Fred Miller

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 181 PAC Receipt?   ✓ YES 4. Date of Receipt 06/01/2015	050.00	050.00
Name: Friends of Macomb Address: 39856 Brylor Court	250.00	250.00
Clinton Township MI 48038 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: 🗵 Direct 🔲 Loan from a person 🔯 Fund Raiser		
3. Contribution # 182 PAC Receipt? D YES 4. Date of Receipt 06/02/2015	50.00	50.00
Name: Robert Wittenberg Address:26131 Harding	50.00	50.00
Oak Park MI 48237 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:  Direct		
3. Contribution # 183 PAC Receipt? ☐ YES 4. Date of Receipt 06/09/2015	60.00	90.00
Name: Michael Labuhn	00.00	90.00
Address: 57248 White Oaks		
Washington MI 48094 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution # 184 PAC Receipt? ☐ YES 4. Date of Receipt 06/11/2015	100.00	400.00
Name: Andy Meisner for Treasurer Address: PO Box 2197	100.00	100.00
Royal Oak MI 48068 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Coodpation		
Business Address		
Type of Contribution:  Direct		
Page Subtotal	460.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Num	nber	138559-5		_
2 Committee Name	Frie	nds of Fred Miller		

		γ=-
Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 185 PAC Receipt? ☐ YES 4. Date of Receipt 06/11/2015	100.00	100.00
Name: Evelyn Baran  Address: One Beach Drive SE  #1809 St. Petersburg FL 33701  5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 186 PAC Receipt? ☐ YES 4. Date of Receipt 06/11/2015  Name: Bruce Burton	100.00	100.00
Address:3513 Lady Anne Court		
Alexandria VA 22310 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser  3. Contribution # 187 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 06/11/2015		
· · · · · · · · · · · · · · · · · · ·	250.00	250.00
Name: Michael Hacker Address: 924 P Street NW		
Washington DC 20001  5. If over \$100.00 cumulative, please provide:  Occupation Policy Analyst Employer Quinn, Gillespie & Assoc		
Business 1133 Connecticut Ave NW		
Address Washington DC 20036  Type of Contribution:  Direct		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser  3. Contribution # 188 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 06/11/2015		
Name: Dean Petitpren Address:415 Lake Shore Drivew	1000.00	1000.00
Grosse Pointe Farms MI 48236 5. If over \$100.00 cumulative, please provide:		
Occupation Owner Employer Pettipren Distributors		
Business 44500 Groesbeck		
Address Clinton Twp MI 48036  Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
Page Subtotal	1450.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	1130.03	

1. Committee I.D. Nur	mber 138559-5	
2. Committee Name_	Friends of Fred Miller	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 189 PAC Receipt? ☐ YES 4. Date of Receipt 06/11/2015		
Name: Diane Petitpren	1000.00	1000.00
Address:415 Lake Shore		
Grosse Pointe Farms MI 48236 5. If over \$100.00 cumulative, please provide:		
Occupation Retired Employer RETIRED		
Business Same as Home Address Home All 20000		
Lighte Wi Grado		
Type of Contribution:     ☑ Direct     ☐ Loan from a person     ☐ Fund Raiser       3. Contribution # 190     PAC Receipt?     ☐ YES     4. Date of Receipt     06/11/2015		
	150.00	150.00
Name: John Quinn Address: 19 1/2 Robin Road		
Richmond VA 23226		
5. If over \$100.00 cumulative, please provide:  Occupation		
Occupation Employer St. Catherine's School		
Business 6001 Grove		
Address Richmond VA 23226		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 191 PAC Receipt? II YES 4. Date of Receipt 06/17/2015	100.00	100.00
Name: Andrew Meisner	100.00	100.00
Address: 12786 Talbot Lane		
Huntington Woods MI 48070 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:  Direct		
3. Contribution # 192 PAC Receipt? X YES 4. Date of Receipt 06/26/2015		
Name: Ind MI PAC Council Teachers	1500.00	1500.00
Address: 13969 Plumbrook Road		
Suite B Sterling Heights MI 48312		
Sterling Heights MI 48312  5. If over \$100.00 cumulative, please provide:		ì
OccupationEmployer		
Business Address		
Type of Contribution:  Direct		
Page Subtotal	2750.00	
Grand Total of All Schedules 1A	2.00.00	
(Complete on last page of Schedule)		

1. Committee I.D. Num	nber _	138559-5	
	Erion	nds of Fred Miller	
2 Committee Name	Frier	ias of Frea Willer	

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
3. Contribution # 193 PAC Receipt? ☐ YES 4. Date of Receipt 06/29/2015	100.00	100.00
Name: Pamela Kellar Address:60426 Miriam	100.00	700.00
Washington Township MI 48094 5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		!
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 194 PAC Receipt? ☐ YES 4. Date of Receipt 07/09/2015	100.00	350.00
Name: Debra Dorosh Address: 44188 Rina Lane		
Clinton Twp. MI 48038		
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer RETIRED		
Business Same as Home All 00000		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 195 PAC Receipt? ☐ YES 4. Date of Receipt 07/09/2015	100.00	600.00
Name: Joyce Lalonde Address: 24801 Rosalind		
Eastpointe MI 48021		
5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer Retired		
Business Same as home		
Address Home MI 00000		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser  3. Contribution # 196 PAC Receipt? ☐ YES 4. Date of Receipt ☐ 07/09/2015		
Name: Leo Lalonde	100.00	600.00
Address: 24801 Rosalind		
Eastpointe MI 48021 5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer Retired		
Business Same as home		
Address Home MI 00000		
Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser		
Page Subtotal	400.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

1. Committee I.D. Num	ber_	138559-5	
2 Committee Name	Frier	nds of Fred Miller	

3. Contribution # 197 PAC Receipt   YES   4. Date of Receipt   07/10/2015   210.00   560.00    Name: Michelle DeBeaussaert	Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt )
Name: Michelle DeBeaussaert  Address: 39856 Brylor Ct.  Clinton Twp MI 48038  5. If over \$100.00 cumulative, please provide:  Occupation Retired Employer Retired  Business Same as home  Address Home MI 00000	3. Contribution # 197 PAC Receipt? ☐ YES 4. Date of Receipt 07/10/2015	210.00	560.00
Clinton Twp MI 48038  5. If over \$100.00 cumulative, please provide:  Occupation Retired Employer Retired  Business Address Home MI 00000		210.00	300.00
5. If over \$100.00 cumulative, please provide:  Occupation Retired Employer Retired  Business Address Home MI 00000	Address: 39856 Brylor Ct.		
Business Same as home Address Home MI 00000			
Address Home MI 00000	Occupation Retired Employer Retired		
	Dualite39		
			:
			:
			!
			:
· · · · · · · · · · · · · · · · · · ·			

Page Subtotal

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

210.00 25880.00

Enter this total on

line 3a of Summary Page

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

1. Committee I.D. Number	138559-5	

2. Committee Name Friends of Fred Miller

3. Name &	Address From Whom Received	Date of Receipt	5.Type of Receipt	6. Amount
Receipt # 1 Name:	Talmer Bank and Trust	Date of Receipt <u>11/25/2014</u>	☐ Loan from a Lending Institution ☐ Interest	4.55
Address:	2301 West Big Beaver		Refund \ Rebate	
	Troy MI 48084	☐ Fund Raiser	Other (Specify) Interest	
Receipt # 2 Name:	Talmer Bank and Trust	Date of Receipt12/24/2014	☐ Loan from a Lending Institution ☐ Interest	4.50
Address:	2301 West Big Beaver		☐ Refund \ Rebate	
	Troy MI 48084	☐ Fund Raiser	Other (Specify)	
Receipt # 3 Name: Address:	Talmer Bank and Trust  2301 West Big Beaver	Date of Receipt <u>01/23/2015</u>	□ Loan from a Lending Institution □ Interest □ Refund \ Rebate	4.91
	Troy MI 48084	☐ Fund Raiser	Other (Specify)	
Receipt # 4 Name:	Talmer Bank and Trust	Date of Receipt <u>02/25/2015</u>	☐ Loan from a Lending Institution ☐ Interest	5.43
Address:	2301 West Big Beaver		☐ Refund \ Rebate	
	Troy MI 48084	☐ Fund Raiser	☐ Other (Specify) Interest	
Receipt # 5 Name:	Talmer Bank and Trust	Date of Receipt 03/25/2015	☐ Loan from a Lending Institution ☑ Interest	4.91
Address:	2301 West Big Beaver		☐ Refund \ Rebate	į
	Troy MI 48084	☐ Fund Raiser	☐ Other (Specify) Interest	
Receipt # 6 Name:	Talmer Bank and Trust	Date of Receipt <u>04/24/2015</u>	☐ Loan from a Lending Institution ☐ Interest	5.76
Address:	2301 West Big Beaver		☐ Refund \ Rebate	
	Troy MI 48084	☐ Fund Raiser	☐ Other (Specify) Interest	
Receipt # 7 Name:	Talmer Bank and Trust	Date of Receipt05/22/2015	☐ Loan from a Lending Institution ☐ Interest	5.42
Address:	2301 West Big Beaver		☐ Refund \ Rebate	
	Troy MI 48084	☐ Fund Raiser	Other (Specify) Interest	
			Page Subtotal	35.48
			Grand Total of All Schedules 1A-1 (Complete on last page of Schedule)	algorithma.

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

2. Committee Name	Friends of Fred Miller	

(Complete on last page of Schedule)

3. Name &	Address From Whom Received	4. Date of Receipt	5.Type of Receipt	6. Amount
Receipt # 8 Name:	Talmer Bank and Trust	Date of Receipt <u>06/25/2015</u>	☐ Loan from a Lending Institution ☐ Interest	6.98
Address:	2301 West Big Beaver		☐ Refund \ Rebate	
	Troy MI 48084	☐ Fund Raiser	Other (Specify) Interest	
			•	
			Page Subtotal	6.98
			Grand Total of All Schedules 1A-1	42.46



### SCHEDULE 1-IK

1. Committee I. D. Number 138559-5

С	Α	N	ID	H	D	Α	T	E	C	O	٨	1	V	II	T	r	E	F
_			_		-	, .	•	_	•	~				•			-	_

2. Committee Name Friends of Fred Miller

CANDIDA I E COMIN	VIII   EE 2. Committee Name	
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). Report all in-kind contributions.	Type of In-Kind Contribution (Check applicable box)     Date of Receipt     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)
Contribution # 1 PAC Receipt? Yes Name & Address: Barbara Pyden  Clinton Township, MI 48036  If over \$100.00 cumulative, please provide: Occupation: Retired Employer Name & Business Address:	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description FOOd  Date Of Receipt: 03/21/15  Vendor Name & Address:	29.87 \$ 1437.95
Contribution # 2 PAC Receipt? Yes Name & Address  Barbara Pyden  Clinton Township, MI 48036  If over \$100.00 cumulative, please provide: Occupation: Retired  Employer 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  Description Food  Date Of Receipt: 11/02/14  6. Vendor Name & Address:	14.60 \$ 1452.55
✓ Fund Raiser Contribution	Value Center Marketplace ci 37155 Harper Clinton Township, MI 48036	ick Here for Memo Itemization
Contribution #3 PAC Receipt? Yes Name & Address: Fred Miller 162 Riverside Mount Clemens If over \$100.00 cumulative, please provide: Occupation: County Commissioner	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description Fundraiser Refreshments	1.95 <sub>\$_</sub> 1504.50
Employer Name & Address:  Macomb County Board of Commissioners 10 S. Main Street Mount Clemens, MI 48043  Fund Raiser Contribution	5. Date Of Receipt: 03/21/15 6. Vendor Name & Address: Gordon Food Service 34300 Gratiot Clinton Township, MI 48035	ick Here for Memo Itemization
	Page Subtota  Grand Total of all Schedules 1-II	ψ50. <del>1</del> 2
	(Complete on last page of Schedule	)



SCHEDULE 1-IK

1. Committee I. D. Number 138559-5

1	38	355	9-5
---	----	-----	-----

$\sim$	٨	A.		ar.	٠.۸	TE	$\sim$	$\sim$ 1	l A	×	A I	7		
U.	м	IN	u	'IL	Ж	\ I E		Ui	v	n	Ш		ı⊏	

Friends of Fred Miller

CANDIDATE COMN	ATTEE 2. Committee Name	
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). Report all in-kind contributions.	Type of In-Kind Contribution (Check applicable box)     Date of Receipt     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)
Contribution # 1 PAC Receipt? Yes Name & Address: Fred Miller 162 Riverside Drive Mount Clemens, MI 48043 If over \$100.00 cumulative, please provide: Occupation: County Commissioner Employer Name & Business 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 Description Fundraiser Refreshments  5. Date Of Receipt: 03/21/05	115.15 <sub>\$</sub> 1619.65
Macomb County Board of Commissioners 10 S. Main Street Mount Clemens, MI 48043  Fund Raiser Contribution	6. Vendor Name & Address:	lick for Memo Itemization Type
Contribution # 2 PAC Receipt? Yes Name & Address  Fred Miller 162 Riverside Drive Mount Clemens, MI 48043	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 ☐ Description Fundraiser Food	29.34
If over \$100.00 cumulative, please provide: Occupation: County Commissioner Employer Name & Address: Macomb County Board of Commissioners 10 S. Main Street Mount Clemens, MI 48043  Fund Raiser Contribution	5. Date Of Receipt: 03/21/15 6. Vendor Name & Address:	ick Here for Memo Itemization
Contribution #3 PAC Receipt? Yes Name & Address:  Fred Miller 162 Riverside Mount Clemens If over \$100.00 cumulative, please provide:	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated \$ 7! ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN ☐ Description Fundraiser Supplies	9.32 <sub>\$ 1728.31</sub>
Occupation: County Commissioner Employer Name & Address:  Macomb County Board of Commissioners 10 S. Main Street Mount Clemens, MI 48043  Fund Raiser Contribution	<ul> <li>5. Date Of Receipt: 05/31/15</li> <li>6. Vendor Name &amp; Address:</li> </ul>	ick Here for Memo Itemization
	Page Subtota Grand Total of all Schedules 1-l (Complete on last page of Schedule	Κ

on line 6 of Summary Page



SCHEDULE 1-IK

1. Committee I. D. Number 138559-5

Friends of Fred Miller

CANDIDATE COM	AITTEE 2. Committee Name Theritas of Fred	AIIIIQI	
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). Report all in-kind contributions.	<ul><li>4. Type of In-Kind Contribution (Check applicable box)</li><li>5. Date of Receipt</li><li>6. Name &amp; Address of Vendor from whom goods or services were purchased</li></ul>	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: Fred Miller 162 Riverside Drive Mount Clemens, MI 48043 If over \$100.00 cumulative, please provide: Occupation: County Commissioner Employer Name & Business Address: Macomb County Board of Commissioners 10 S. Main Street Mount Clemens, MI 48043  Fund Raiser Contribution	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description Fundraiser Refreshments  Date Of Receipt: 03/21/05  Vendor Name & Address:	49.50	\$ 1777.81 zation Type
Contribution # 2 PAC Receipt? Yes Name & Address  Fred Miller 162 Riverside Drive Mount Clemens, MI 48043  If over \$100.00 cumulative, please provide: Occupation: County Commissioner	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 Description Fundraiser Food  5. Date Of Receipt: 03/21/15	8.27	s 1786.08
Employer Name & Address:  Macomb County Board of Commissioners 10 S. Main Street Mount Clemens, MI 48043	6. Vendor Name & Address:	ick Here for Memo	Itemization
Contribution #3 PAC Receipt? Yes Name & Address:  Fred Miller 162 Riverside Mount Clemens	4.	6.92	1873.00
If over \$100.00 cumulative, please provide: Occupation: County Commissioner Employer Name & Address: Macomb County Board of Commissioners 10 S. Main Street Mount Clemens, MI 48043  Fund Raiser Contribution	Description Fundraiser Supplies  5. Date Of Receipt: 03/21/15  6. Vendor Name & Address:	ick Here for Memo	Itemization
	Page Subtota Grand Total of all Schedules 1-I (Complete on last page of Schedule	ψ144.03 <	



**SCHEDULE 1-IK** 

1. Committee I. D. Number 138559-5

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

2 Committee Name Friends of Fred Miller

CANDIDA LE COMIN	MITTEE 2. Committee Name		
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). Report all in-kind contributions.	<ul><li>4. Type of In-Kind Contribution (Check applicable box)</li><li>5. Date of Receipt</li><li>6. Name &amp; Address of Vendor from whom goods or services were purchased</li></ul>	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: Fred Miller 162 Riverside Drive Mount Clemens, MI 48043 If over \$100.00 cumulative, please provide: Occupation: County Commissioner Employer Name & Business Address: Macomb County Board of Commissioners 10 S. Main Street Mount Clemens, MI 48043  Fund Raiser Contribution	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN  Description Office Supplies  5. Date Of Receipt: 06/05/15  6. Vendor Name & Address:	33.90	\$ 1906.90
Contribution # 2 PAC Receipt? Yes Name & Address Fred Miller 162 Riverside Drive Mount Clemens, MI 48043  If over \$100.00 cumulative, please provide: Occupation: County Commissioner Employer Name & Address: Macomb County Board of Commissioners 10 S. Main Street Mount Clemens, MI 48043  Fund Raiser Contribution	Goods of Services Purchased by Candidate or Others-LOAN  Description Volunteer Meeting Refreshments  5. Date Of Receipt: 01/10/15  6. Vendor Name & Address:	160.23	\$ 2067.13
Contribution #3 PAC Receipt? Yes Name & Address:  Fred Miller 162 Riverside Mount Clemens If over \$100.00 cumulative, please provide: Occupation: County Commissioner Employer Name & Address: Macomb County Board of Commissioners 10 S. Main Street Mount Clemens, MI 48043  Fund Raiser Contribution	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN  Description Postage  5. Date Of Receipt: 11/26/14  6. Vendor Name & Address:	90.00	2557.13
	Page Subtota  Grand Total of all Schedules 1-II	φοσ <del>4.13</del>	
	(Complete on last page of Schedule	Enter this total	

on line 6 of Summary Page



SCHEDULE 1-IK

1. Committee I. D. Number

1	3	8	5	5	9	-5
---	---	---	---	---	---	----

CANDIDATE COMM	ITTEE
----------------	-------

## 2. Committee Name Friends of Fred Miller

OANDIDA I E CONIN		
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).  Report all 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 were purchased	7. Amount or Fair Market for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: Fred Miller 162 Riverside Drive Mount Clemens, MI 48043 If over \$100.00 cumulative, please provide: Occupation: County Commissioner Employer Name & Business Address: Macomb County Board of Commissioners 10 S. Main Street	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description Fundraiser Supplies  5. Date Of Receipt: 01/31/15  6. Vendor Name & Address:	31.46 \$ 2588.59
Mount Clemens, MI 48043  Fund Raiser Contribution	Party City 12220 Hal Road Sterling Heights, MI 48313	•
Contribution # 2 PAC Receipt? Yes Name & Address Fred Miller 162 Riverside Drive Mount Clemens, MI 48043	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	24.44 \$ 2613.03
If over \$100.00 cumulative, please provide: Occupation: County Commissioner Employer Name & Address: Macomb County Board of Commissioners 10 S. Main Street Mount Clemens, MI 48043  Fund Raiser Contribution	Description Volunteer Meeting Refreshments  5. Date Of Receipt: 04/11/15  6. Vendor Name & Address:  Tim Hortons 1085 S. Gratiot Mount Clemens, MI 48043	ilick Here for Memo Itemization
Contribution #3 Name & Address:  Fred Miller 162 Riverside Mount Clemens If over \$100.00 cumulative, please provide: Occupation: County Commissioner Employer Name & Address:  Macomb County Board of Commissioners 10 S. Main Street Mount Clemens, MI 48043	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description Fundraiser Supplies  5. Date Of Receipt: 05/29/15  6. Vendor Name & Address:	4.95 <sub>\$</sub> 2707.98
	Page Subtota	\$150.85
	Grand Total of all Schedules 1- (Complete on last page of Schedule	1 1



SCHEDULE 1-IK

1. Committee I. D. Number 138559-5

Friends of Fred Miller

CANDIDATE COM	AITTEE 2. Committee Name Therius Of Fred	1 Milliel	
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). Report all in-kind contributions.	Type of In-Kind Contribution (Check applicable box)     Date of Receipt     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: Fred Miller 162 Riverside Drive Mount Clemens, MI 48043  If over \$100.00 cumulative, please provide: Occupation: County Commissioner Employer Name & Business Address: Macomb County Board of Commissioners 10 S. Main Street Mount Clemens, MI 48043  Fund Raiser Contribution	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-LOA Description Fundraiser Supplies  5. Date Of Receipt: 05/31/15 6. Vendor Name & Address: Al Walaem Restaurant 36862 Ryan Road Sterling Heights, MI 48310	\$ 126.67  N  Click for Memo Item	\$ 2834.64
Contribution # 2 PAC Receipt? Yes Name & Address  Fred Miller 162 Riverside Drive Mount Clemens, MI 48043  If over \$100.00 cumulative, please provide: Occupation: County Commissioner	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-LOA Description Fundraiser Refreshments  5. Date Of Receipt: 05/29/15	\$ 3.96 \n	\$ 2838.61
Employer Name & Address:  Macomb County Board of Commissioners 10 S. Main Street  Mount Clemens, MI 48043  Fund Raiser Contribution	6. Vendor Name & Address: Babylon Fruit Market 36886 Ryan Road Sterling Heights, MI 48310	Click Here for Memo	o Itemization
Contribution #3 PAC Receipt? Yes Name & Address:  Fred Miller 162 Riverside Mount Clemens If over \$100.00 cumulative, please provide: Occupation: County Commissioner Employer Name & Address: Macomb County Board of Commissioners	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAI Description Fundraiser Supplies  5. Date Of Receipt: 03/21/15  6. Vendor Name & Address:	21.18 N Click Here for Memo	2859.79
10 S. Main Street Mount Clemens, MI 48043  Fund Raiser Contribution	Party City 32469 Gratiot Roseville, MI 48066	otal \$151.81	
	Grand Total of all Schedules (Complete on last page of Sched	1-IK	



SCHEDULE 1-IK

1. Committee I. D. Number 138559-5

CANDIDATE COM	VITTEE 2. Committee Name Friends of Fred	Miller	
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). Report all 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 were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: Fred Miller	4.	\$ 52.00	\$ 2911.79
162 Riverside Drive Mount Clemens, MI 48043 If over \$100.00 cumulative, please provide: Occupation: County Commissioner	Goods or Services Purchased by Candidate or Others-LOAN  Description Fundraiser Supplies		
Employer Name & Business Address: Macomb County Board of Commissioners 10 S. Main Street Mount Clemens, MI 48043	3605 15 Mile Road	Click for Memo Itemiz	zation Type
Fund Raiser Contribution  Contribution # 2 PAC Receipt? Yes Name & Address  Fred Miller 162 Riverside Drive Mount Clemens, MI 48043  If over \$100.00 cumulative, please provide:	Sterling Heights, MI 48310  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 Description Fundraiser Food	<del></del>	s 2922.38
Occupation: County Commisioner Employer Name & Address: Macomb County Board of Commissioners 10 S. Main Street Mount Clemens, MI 48043  Fund Raiser Contribution	5. Date Of Receipt: 05/31/15 6. Vendor Name & Address:	Click Here for Memo I	Itemization
Contribution #3 PAC Receipt? Yes Name & Address:  Fred Miller 162 Riverside Drive Mount Clemens, MI 48043	Goods or Services Purchased by Candidate or Others	29.20 \$	3051.58
If over \$100.00 cumulative, please provide:  Occupation: County Commissioner  Employer Name & Address:  Macomb County Board of Commissioners 10 S. Main Street  Mount Clemens, MI 48043	Goods or Services Purchased by Candidate or Others- LOAN  Description Fundraiser Food  5. Date Of Receipt: 05/30/15  6. Vendor Name & Address:  Steve's Backroom 24317 Jefferson St. Clair Shores, MI 48080	lick Here for Memo l	temization
	Page Subtota	\$191.79	\$3,051.58
	Grand Total of all Schedules 1-I (Complete on last page of Schedule	- 1 % 1 M/L 4 M/L 1	

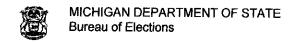


1. Committee I.D. Number 138559-5

100000

2. Committee Name	Friends of Fred Miller
-------------------	------------------------

Expenditure # 1  Name: New Baltimore Goodfellows Purpose: Ad Book  Address: PO Box  Respenditure Code  New Baltimore MI 48047  Check box if this expenditure is payment of debt or obligation reported on previous statement  Expenditure # 2  Name: Chad Cyrowski  Address: 29768 Citation Circle Apt. 32102 Farmington Hills MI 48331  Fund Raiser  Fund Raiser  Fund Raiser  Fund Raiser  Fund Raiser  Fund Raiser  Respenditure Code  Expenditure Code  Expenditure Code  Expenditure Code  Check box if this expenditure is payment of debt or obligation reported on previous statement  Expenditure Code  Check box if this expenditure is payment of debt or obligation reported on previous statement
Name: New Baltimore Goodfellows  Address: PO Box    Expenditure Code
New Baltimore MI 48047  ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement  Expenditure # 2  Name: Chad Cyrowski  Address: 29768 Citation Circle Apt. 32102 Farmington Hills MI 48331  ☐ Check box if this expenditure is payment of debt or obligation reported on previous  Expenditure Code  Purpose: Website Design  Expenditure Code  Expenditure Code  Check box if this expenditure is payment of debt or obligation reported on previous
New Baltimore  MI 48047  Check box if this expenditure is payment of debt or obligation reported on previous statement  Expenditure # 2  Name: Chad Cyrowski  Address: 29768 Citation Circle Apt. 32102 Farmington Hills  MI 48331  Check box if this expenditure is payment of debt or obligation reported on previous  Expenditure Code  Check box if this expenditure is payment of debt or obligation reported on previous
Expenditure # 2  Name: Chad Cyrowski  Address: 29768 Citation Circle Apt. 32102 Farmington Hills  MI 48331  Check box if this expenditure is payment of debt or obligation reported on previous  Of debt or obligation reported on previous  12/03/2014  484.00  Expenditure Code  Check box if this expenditure is payment of debt or obligation reported on previous
Expenditure # 2  Name: Chad Cyrowski Purpose: Website Design  Address: 29768 Citation Circle     Apt. 32102     Farmington Hills MI 48331  Check box if this expenditure is payment of debt or obligation reported on previous
Name: Chad Cyrowski  Address: 29768 Citation Circle Apt. 32102 Farmington Hills  MI 48331  Check box if this expenditure is payment of debt or obligation reported on previous
Name: Chad Cyrowski  Address: 29768 Citation Circle Apt. 32102 Farmington Hills  MI 48331  Check box if this expenditure is payment of debt or obligation reported on previous
Apt. 32102 Farmington Hills  MI 48331  Check box if this expenditure is payment of debt or obligation reported on previous
Farmington Hills MI 48331  Check box if this expenditure is payment of debt or obligation reported on previous
☐ Check box if this expenditure is payment of debt or obligation reported on previous
Expenditure # 3 12/11/2014 100.00
Name: Jonathon Switalski Purpose: Returned Contribution 12/11/2014 100.00
Address: 11364 Hanover
Warren MI 48093
☐ Check box if this expenditure is payment
☐ Fund Raiser of debt or obligation reported on previous statement
Expenditure # 4 12/18/2014 250.00
Name: Mt. Clemens DDA Purpose: Event Sponsor
Address: 49 Macomb Place
Mount Clemens MI 48043
☐ Check box if this expenditure is payment
☐ Fund Raiser of debt or obligation reported on previous statement
Expenditure # 5 01/15/2015 56.00
Name: Postmaster Purpose: Post Office Box Fee 36.00
Address: Mount Clemens MPO
Mount Clemens MI 48046 Expenditure Code
☐ Check box if this expenditure is payment
☐ Fund Raiser of debt or obligation reported on previous statement
Subtotal this page 980.00
Grand Total of all Schedules 1B (Complete on last page of Schedule)



1. Committee I.D. Number 138559-5

2. Committee Name Friends of Fred Miller

					····
3. Name a	and address of person or ver	ndor to whom paid	Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditu	re # 6				
Name:	Mini Maxi Storage		Purpose: Storage	03/01/2015	90.00
Address:	43 S. Rose				
			Expenditure Code	ļ	
	Moutn Clemens	MI 48043			
_			Check box if this expenditure is payment of debt or obligation reported on previous		
☐ Fund F	Raiser		statement		
Expenditu	re # 7			00/05/0045	00.40
Name:	AT&T		Purpose: Phone Service	03/05/2015	98.10
Address:	20 Main				
, 100.000.	E-0 IFIGHT		Expenditure Code		
	Mount Clemens	MI 48043			
			Check box if this expenditure is payment of debt or obligation reported on previous		
☐ Fund F	Raiser		statement		
Expenditu	re # 8				
Name:	Mark Hemelsberg		Purpose: Hall Rental Fee	03/18/2015	150.00
Address:	34540 Utica Road				
	0.0000000000000000000000000000000000000		Expenditure Code		
	Fraser	Mi 48026			
-			Check box if this expenditure is payment of debt or obligation reported on previous		
☐ Fund R	taiser		statement		
Expenditu	re # 9			00/05/0045	1506.00
Name:	American Graphics Prin	ting Co.	Purpose: Letterhead/Envelopes	03/25/2015	1586.82
Address:	34895 Groesbeck				
	Clinton Township	MI 48035	Expenditure Code		
	Omnor Township	WI 40035	☐ Check box if this expenditure is payment		
☐ Fund R	aiser		of debt or obligation reported on previous		,
Expenditu			statement		
Exhauding				03/25/2015	66.93
Name:	AT&T		Purpose: Phone Service		:
Address:	20 Main				
	Marrat Clausers	MI 40040	Expenditure Code		
	Mount Clemens	MI 48043	☐ Check box if this expenditure is payment	-	
☐ Fund R	oicor		of debt or obligation reported on previous		
- , and N	uiooi		statement		
			Subtotal this p	page	1991.85
			Grand Total of all Schedule		1991.00
			(Complete on last page of Sched		



1. Committee I.D. Number 138559-5

2. Committee Name

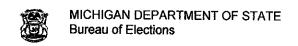
Friends of Fred Miller

3. Name a	and address of person or vendor	to whom paid	Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 11		, and a second	00/05/0045	100.00	
Name:	Chaldean American Cham	ber	Purpose: Annual Membership	03/25/2015	100.00
Address:	•	II 48025	Expenditure Code  Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditu	re # 12				
Name:	ICRJ-MLK Celebration		Purpose: Annual Dinner Ticket/Ad	03/25/2015	400.00
Address:	28640 Campbell				
	Warren M	I 48093	Expenditure Code		
☐ Fund F		1 40093	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditu	re # 13	· · · · · · · · · · · · · · · · · · ·			0.40.00
Name:	Postmaster		Purpose: Stamps	05/15/2015	340.00
Address:	Mount Clemens MPO				
	Mount Clemens M	I 48046	Expenditure Code		
☐ Fund F		1 10010	☐ Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditu	re # 14			06/02/2015	292.25
Name:	Jennifer Miller		Purpose: Reimbursement	00/02/2015	292.23
Address:	162 Riverside				
	Mt. Clemens MI	I 48043	Expenditure Code		
☐ Fund R	aiser		Check box if this expenditure is payment of debt or obligation reported on previous statement	Memo - i	emization below
Expenditure # 15					(000.05)
Name:	United States Flag Store		Purpose: American Flags	05/20/2015	(292.25)
Address:		A 15672	Expenditure Code  Check box if this expenditure is payment of debt or obligation reported on previous		
☐ Fund R	aiser		statement	Memo - i	emization
			Subtotal this	page	1132.25
			Grand Total of all Schedule (Complete on last page of Schedule		

1. Committee I.D. Number 138559-5

2. Committee Name	Friends of Fred Miller
<del></del>	

3. Name	and address of person or ve	ndor to whom paid	4. Purpose (Describe specific purpose and you	5. Date	6. Amount
Expenditu	ure # 16	· · · · · · · · · · · · · · · · · · ·	may assign an Expenditure Code)	<u> </u>	
Name:	NCNW		Purpose: Dinner Ticket/Ad Book	06/02/2015	165.00
Address:	PO Box 463066			Ī	
	Mount Clemens	MI 48046	Expenditure Code		
☐ Fund F	Raiser		Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditu	ıre # 17				
Name:	American Graphics Pri	nting Co.	Purpose: Postcards	06/09/2015	527.88
Address:	34895 Groesbeck				
	Clinton Township	MI 48035	Expenditure Code		
	Omitor Township	WII 40000	Check box if this expenditure is payment		
☐ Fund F			of debt or obligation reported on previous statement		<u> </u>
Expenditu	re # 18			00,000,0045	40.00
Name:	CTE Kenneth Pearl		Purpose: Fundraiser Ticket	06/09/2015	40.00
Address:	38316 Santa Barbara				
	Clinton Twp	MI 48036	Expenditure Code		
_			Check box if this expenditure is payment of debt or obligation reported on previous		:
☐ Fund F	Raiser		statement statement		
Expenditu	re # 19				05.00
Name:	Jennifer Miller		Purpose: Reimbursement	06/19/2015	65.00
Address:	162 Riverside		Europeditura Codo		
	Mt. Clemens	MI 48043	Expenditure Code		
☐ Fund R	Raiser		Check box if this expenditure is payment of debt or obligation reported on previous	Memo - i	temization below
Expenditu	re # 20		statement		omeanon below
Name:	American Flags 4 Less		Purpose: American Flags	06/25/2015	(65.00)
Address:	PO Box 813				
, 1001000.			Expenditure Code		
	Robinson	IL 62454	☐ Check box if this expenditure is payment		
☐ Fund R	aiser		of debt or obligation reported on previous statement	Memo - i	temization
			Subtotal this	page	797.88
			Grand Total of all Schedule (Complete on last page of Schedule		



1. Committee I.D. Number 138559-5

2. Committee Name Friends of Fred Miller

	CANDIDATE COMMITTEE	2. Committee Name Friends of Fred Miller		w
	and address of person or vendor to whom paid	Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditu	re # 21		3=10010045	700.04
Name:	American Graphics Printing Co.	Purpose: Brochure	07/09/2015	799.24
Address:	34895 Groesbeck	Expenditure Code		
	Clinton Township MI 48035	☐ Check box if this expenditure is payment		
☐ Fund F	Raiser	of debt or obligation reported on previous statement		  - 
1				
	·			
				:

Subtotal this page

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

799.24

5701.22



1. Committee I.D. Number

1	38	55	9-	5
---	----	----	----	---

<b>CANDIDATE COMMITTEE</b>
----------------------------

Friends of Fred Miller

OVER THE COMMENT LIFE	Committee Name			
This Schedule itemizes:				
Debts and obligations owed by or forgiven the cor	mmittee OR b. Debi	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: Paper Products	\$		
Fred Miller 162 Riverside Drive Mount Clemens, MI 48043	5. <u>Date Debt Was Incurred:</u> 02/03/14	\$		04.95
, , , , , , , , , , , , , , , , , , , ,	6. Original Amount of Debt:	\$	\$ 0.00	\$ 94.85
If bank loan, name of endorser or guarantor:		\$Am	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: Fundraiser Food	\$		
Fred Miller 162 Riverside Drive	5. <u>Date Debt Was Incurred</u> : 3/7/14	\$		
Mount Clemens, MI 48043	6. Original Amount of Debt	\$	\$ 0.00	\$ <u>24.75</u>
	\$_24.75	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Δr	nount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type: Fundraiser Food	\$	Little Control of the	
Fred Miller 162 Riverside Drive	5. <u>Date Debt Was Incurred</u> :	\$		
Mount Clemens, MI 48043	3/8/14 6. Original Amount of Debt:	\$ \$	\$_0.00	\$ 90.98
		\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Ar	mount Endorsed: \$	
		Page Subtotal	(Outstanding debt)	\$210.58
(Ce	omplete on last page of Schedule st	Grand Total nowing amounts owed by o	of all Schedules 1E r to the committee)	Enter this tetal
				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



1. Committee I.D. Number \_

1	1	3	8	5	5	9-	5
---	---	---	---	---	---	----	---

CAND	IDATE	COMM	NITTEE

2. Committee Name Friends of Fred Miller

This Schedule itemizes:			•	
a Debts and obligations owed by or forgiven the con (Che	nmittee <b>OR</b> b. Debts eck either a or b. Use only for the pu	and obligations owed <u>to</u> rpose checked.)	or forgiven by the con	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 guarantors, if any.	incurred 6. Indicate original amount of debt		date on debt	(Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: Fundraiser Food	\$		
Fred Miller	5. Date Debt Was Incurred:	\$		
162 Riverside Drive	03/08/14	\$		
Mount Clemens, MI 48043	6. Original Amount of Debt		\$ 0.00	\$ <u>42.75</u>
	42.75	<u> </u>		FORGIVEN
	Ψ	\$	ı	
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: Fundraiser Food	\$		
Fred Miller 162 Riverside Drive	5. <u>Date Debt Was Incurred</u> : 3/8/14	\$		
Mount Clemens, MI 48043	6. Original Amount of Debt:	\$	\$ 0.00	<sub>\$</sub> 14.25
,	s 14.25	\$	. Ψ	
	Ψ	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type: Fundralser Decorations	\$		
Fred Miller	5. Date Debt Was Incurred:	\$		
162 Riverside Drive	3/8/14	s		
Mount Clemens, MI 48043	6. Original Amount of Debt:	<u> </u>	\$_0.00	\$_74.20
	<sub>\$_</sub> 74.20	J		FORGIVEN
		\$		
If bank loan, name of endorser or guarantor:		/	Amount Endorsed: \$_	<u> </u>
		Page Subtota	al (Outstanding debt)	\$131.20
(1	Complete on last page of Schedule s		of all Schedules 1E or 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.

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



1. Committee I.D. Number

138559-5

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

2. Committee Name Friends of Fred Miller

CANDIDATE COMMITTEE			~	
This Schedule itemizes:	***			
a Debts and obligations owed by or forgiven the com (Che	nmittee OR b. Debt	ts and obligations owed <u>to</u> curpose 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: Postage	\$		
Fred Miller 162 Riverside Drive Mount Clemens, MI 48043	5. <u>Date Debt Was Incurred:</u> 04/24/14	\$ \$	\$ 0.00	¢ 47.04
	6. Original Amount of Debt:	\$	\$ 0.00	FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: Computer	\$		
Fred Miller 162 Riverside Drive	5. <u>Date Debt Was Incurred</u> : 3/8/14	\$		
Mount Clemens, MI 48043	6. Original Amount of Debt:	\$	\$ 0.00	\$_265.00
	\$_200.00	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type: Fundraiser Food	\$		
Fred Miller 162 Riverside Drive	5. <u>Date Debt Was Incurred</u> :	\$	}	
Mount Clemens, MI 48043	8/1/14 6. Original Amount of Debt: \$ 32.00	\$	\$_0.00	\$ 32.00 FORGIVEN
If bank loan, name of endorser or guarantor:		<u> </u>		
in bank loan, name of endotser of guarantor.		Ar	nount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	\$344.04
(Co	omplete on last page of Schedule s	Grand Total howing amounts owed by c	of all Schedules 1E or to the committee)	Enter this total
				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



1. Committee I.D. Number

138559-5

<b>CANDIDATE</b>	COMMITTEE
------------------	-----------

Friends of Fred Miller

CANDIDATE COMMITTEE	Committee Name			
This Schedule itemizes:				
	mmittee OR b. Debt leck either a or b. Use only for the pu	s and obligations owed <u>to</u> c irpose checked.)	or forgiven <u>by</u> the co	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	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: Fundraiser Expenses	\$		
Fred Miller 162 Riverside Drive Mount Clemens, MI 48043	5. <u>Date Debt Was Incurred</u> : 08/01/14 6. <u>Original Amount of Debt</u> : 30.00	\$ \$ \$	\$ 0.00	\$_30.00
If bank loan, name of endorser or guarantor:		Ame	ount Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by:	4. Type: Fundraiser Expenses	\$		
Fred Miller 162 Riverside Drive	5. <u>Date Debt Was Incurred</u> : 8/1/14	\$		_
Mount Clemens, MI 48043	6. Original Amount of Debt:	\$	\$ 0.00	\$ 30.20
If bank loan, name of endorser or guarantor:		\$ An	nount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by: Fred Miller	4. Type: Fundraiser Food 5. Date Debt Was Incurred:	\$		
162 Riverside Drive Mount Clemens, MI 48043	8/1/14 6. Original Amount of Debt:	\$ \$ \$	\$_0.00	\$ 18.00 FORGIVEN
If bank loan, name of endorser or guarantor:			nount Endorsed: \$_	
(0	Complete on last page of Schedule s	Grand Total	(Outstanding debt) of all Schedules 1E r to the committee)	\$78.20 Enter this total on line 123 "owed
				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.

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



1. Committee I.D. Number 1385

138559-5

<b>CANDIDAT</b>	E COMMITTEE
-----------------	-------------

2. Committee Name Friends of Fred Miller

CANDIDATE COMMINITIES				
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 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 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: Fundraiser Expenses	\$		
Fred Miller	5. Date Debt Was Incurred:	\$		
162 Riverside Drive	08/01/14	\$		
Mount Clemens, MI 48043		<b>3</b>	\$ 0.00	\$ <u>32.86</u>
	6. Original Amount of Debt:	\$		
	\$_32.86	<b> </b> \$	ļ	FORGIVEN
If bank loan, name of endorser or guarantor:			ount Endorsed: \$	<u>.</u>
Debt #2 Corp? Yes Owed to or by:	4. Type: Fundraiser Expenses	\$		
Fred Miller	5. Date Debt Was Incurred:	¢		
162 Riverside Drive	8/1/14	<b>5</b>		
Mount Clemens, MI 48043	6. Original Amount of Debt:	\$	s 0.00	<sub>\$</sub> _123.46
	<sub>\$</sub> 123.46	\$	*	
	<del>.</del>	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type: Fundraiser Food	\$		
Fred Miller	5. Date Debt Was Incurred:			
162 Riverside Drive	8/1/14	\$		
Mount Clemens, MI 48043	6. Original Amount of Debt:	\$	0.00	s 66.01
	s 66.01	\$	\$_0.00	\$
	\$	\$		FORGIVEN
If honk long name of anderson as accounts				
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	\$222.33
(Co	omplete on last page of Schedule s	Grand Total ohowing amounts owed by o	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



1. Committee I.D. Number

138559-5

CΔ	וחא	ΠΔΤ	F C	OMN	HTT	EE
C.	MADI				11 1 1	

Friends of Fred Miller

CANDIDATE COMMITTEE 2. C	ommittee Name	1100 11111101		<u> </u>
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the come (Chec	mittee OR b. Debtsck either a or b. Use only for the pu	s and obligations owed <u>to</u> or rpose checked.)	forgiven <u>by</u> 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 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:	4. Type: Fundraiser Expenses	\$		
Fred Miller 162 Riverside Drive Mount Clemens, MI 48043	5. <u>Date Debt Was Incurred</u> :  08/01/14  6. <u>Original Amount of Debt</u> :  \$ 80.79	\$ \$ \$	\$ 0.00	\$ 80.79
If bank loan, name of endorser or guarantor:		\$Amc	ount Endorsed: \$	<del></del>
Debt #2 Corp? Yes Owed to or by:	4. Type: Election Day Food	\$		
Fred Miller 162 Riverside Drive Mount Clemens, MI 48043	5. <u>Date Debt Was Incurred</u> : 11/4/14 6. <u>Original Amount of Debt</u> :  \$_78.50	\$ \$ \$	\$_0.00	\$_78.50
If bank loan, name of endorser or guarantor:		\$Am	ount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by: Fred Miller 162 Riverside Drive Mount Clemens, MI 48043	4. Type: Office Supplies 5. Date Debt Was Incurred: 11/1/14 6. Original Amount of Debt: \$ 42.40	\$ \$ \$	\$_0.00	\$_42.40
If bank loan, name of endorser or guarantor:		\$An	nount Endorsed: \$_	
(Cc	omplete on last page of Schedule s	Grand Total o	(Outstanding debt) of all Schedules 1E r to the committee)	\$201.69  Enter this total on line 12a "owed by" or line 12h

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.

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



1. Committee I.D. Number

138559-5

CAND	IDATE	COMMI	TTEE

Friends of Fred Miller

CANDIDATE COMMITTEE 2.	Committee Name	T TEG TVIIIIE)		-				
This Schedule itemizes:								
a 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.)								
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:	4. Type: Volunteer Refreshments	\$						
Fred Miller 162 Riverside Drive Mount Clemens, MI 48043	5. <u>Date Debt Was Incurred</u> : 11/02/14 6. <u>Original Amount of Debt</u> : 37.00	\$ 	\$ 0.00	\$_37.00				
If bank loan, name of endorser or guarantor:			ount Endorsed: \$					
Debt #2 Corp? Yes Owed to or by:	4. Type: Office Supplies	\$	Lindorsed. \$					
Fred Miller 162 Riverside Drive Mount Clemens, MI 48043	5. <u>Date Debt Was Incurred</u> : 11/11/14 6. <u>Original Amount of Debt</u> : \$ 51.47	\$ \$ \$ \$	\$_0.00	\$ 51.47				
If bank loan, name of endorser or guarantor:			ount Endorsed: \$					
Debt #3 Corp? Yes Owed to or by: Fred Miller 162 Riverside Drive Mount Clemens, MI 418043	4. Type: Loan 5. <u>Date Debt Was Incurred</u> : 11/3/14 6. <u>Original Amount of Debt</u> : \$ 3,750.00	\$ \$ \$ \$ \$	\$	\$_3,750.00				
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_					
u	Complete on last page of Schedules	Grand Total	(Outstanding debt)	\$3,838.47				
(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.

Summary Page

Page 7 of 14



1. Committee I.D. Number

38	55	9-5
	38	3855

CA	ND	IDA	TE	COI	MMI	TTI	EE
•		, , ,		~~	****		

Friends of Fred Miller

CANDIDATE COMMITTEE 2. Co	ommittee Name				
This Schedule itemizes:					
a Debts and obligations owed by or forgiven the comment	nittee OR b. Debt k either a or b. Use only for the pu	s and obligations owed <u>to</u> ( irpose checked.)	or forgiven <u>by</u> 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 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: Fundraiser Refreshments	\$			
Fred Miller 162 Riverside Drive Mount Clemens, MI 48043	5. <u>Date Debt Was Incurred</u> : 03/21/15	<u> </u>		<b>51</b> 05	
Mount Clemens, wii 46043	6. Original Amount of Debt: \$_51.95	\$	\$ 0.00	\$_51.95	
If bank loan, name of endorser or guarantor:		\$Am	ount Endorsed: \$		
Debt #2 Corp? Yes Owed to or by:	4. Type: Fundraiser Refreshments	\$			
Fred Miller 162 Riverside Drive	5. <u>Date Debt Was Incurred</u> : 3/21/15	\$			
Mount Clemens, MI 48043	6. Original Amount of Debt	\$	\$ 0.00	\$ 115.15	
	<u>\$_115.15</u>	\$		FORGIVEN	
If bank loan, name of endorser or guarantor:		Ar	mount Endorsed: \$_		
Debt #3 Corp? Yes Owed to or by:	4. Type: Fundraiser Refreshments	\$			
Fred Miller	5. Date Debt Was Incurred:	<u> </u>			
162 Riverside Drive Mount Clemens, MI 418043	3/21/15	<u> </u>	0.00	s 29.34	
Modrie Giornoria, Wii 4 10040	6. Original Amount of Debt:	\$	\$_0.00	' <del>'                                  </del>	
	\$	<u> </u>		FORGIVEN	
If bank loan, name of endorser or guarantor:		A	mount 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.

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



1. Committee I.D. Number

138559-5

Friends of Fred Miller

CANDIDATE COMMITTEE 2.0	Committee Name	T TEG IVIIIIEI		
This Schedule itemizes:				
a ✓ Debts and obligations owed by or forgiven the con (Che	nmittee OR b. Debt ock 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 cor	nmittee.
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:	4. Type: Fundraiser Refreshments	s		
Fred Miller 162 Riverside Drive Mount Clemens, MI 48043	5. <u>Date Debt Was Incurred</u> 03/21/15 6. <u>Original Amount of Debt</u>	\$ \$	\$ 0.00	\$ <u>8.27</u>
	\$_8.27	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by:	4. Type: Fundraiser Refreshments	<u> </u>		
Fred Miller 162 Riverside Drive	5. Date Debt Was Incurred: 3/21/15	\$		
Mount Clemens, MI 48043	6. Original Amount of Debt:	\$	\$ 0.00	\$ 86.92 FORGIVEN
If bank loan, name of endorser or guarantor:		\$Arr	ount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type: Fundraiser Refreshments	\$		
Fred Miller 162 Riverside Drive	5. Date Debt Was Incurred:	\$		
Mount Clemens, Mi 418043	3/21/15 6. Original Amount of Debt:	\$	s	s 21.18
	\$ 21.18	\$	Ψ	FORGIVEN
If bank loan, name of endorser or guarantor:		\$An	nount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	\$116.37
(C	omplete on last page of Schedule s	Grand Total on the control of the co	of all Schedules 1E r to the committee)	Enter this total
A dahka				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

138559-5

<b>CANDIDA</b>	TE CO	<b>MMIT</b>	TEE
----------------	-------	-------------	-----

3 Committee Name Friends of Fred Miller

CANDIDATE COMMITTEE 2	Committee Name			
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the cor (Ch	nmittee OR b. Debt eck 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 cor	nmittee.
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:	4. Type: Fundraiser Refreshments	\$		
Fred Miller 162 Riverside Drive Mount Clemens, MI 48043	5. Date Debt Was Incurred: 03/21/15	\$	s 0.00	\$ 49.50
	6. Original Amount of Debt:	\$ \$		FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: Office Supplies	\$		
Fred Miller 162 Riverside Drive	5. <u>Date Debt Was Incurred</u> : 6/5/15	\$		
Mount Clemens, MI 48043	6. Original Amount of Debt	<u>\$</u>	\$ 0.00	\$ 33.90
	\$ 33.90	<u> </u>		FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type: Vokunteer Meeting Refreshernments	\$	Land Endoroda. \$\pi\$	
Fred Miller	5. <u>Date Debt Was Incurred</u> :	\$		
162 Riverside Drive Mount Clemens, MI 418043	1/10/15 6. Original Amount of Debt:	\$	\$	\$_160.23
	\$	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Ar	nount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	\$243.63
0)	Complete on last page of Schedule s	Grand Total of the Grand Total o	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



1. Committee I.D. Number

138559-5

CAN	IDIDA	TE	COM	AIT.	TEE
W/11		• -	O O I I I I		-

2. Committee Name Friends of Fred Miller

CANDIDATE COMMITTEE					
This Schedule itemizes:				· <del>-</del> -	
a ✓ Debts and obligations owed by or forgiven the com (Che	nmittee OR b. Debt	s and obligations owed <u>to</u> our or one of the contract of the	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: Postage	\$			
Fred Miller 162 Riverside Drive Mount Clemens, MI 48043  If bank loan, name of endorser or guarantor:	5. <u>Date Debt Was Incurred</u> : 11/26/14 6. <u>Original Amount of Debt</u> : \$ 490.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$ 0.00	\$_490.00	
Debt #2 Corp? Yes	4. Type: Fundraiser Supplies				
Owed to or by:		\$			
Fred Miller 162 Riverside Drive	5. Date Debt Was Incurred:	\$	ŧ		
Mount Clemens, MI 48043	4/11/15	\$	0.00	e 24.44	
Hourt Olemens, Wi 40043	6. Original Amount of Debt:	\$	\$ 0.00	\$ 24.44	
	<u>\$ 24.44 </u>	\$		FORGIVEN	
If bank loan, name of endorser or guarantor:			nount Endorsed: \$		
Debt #3 Corp? Yes	4. Type: Volunteer Meeting Refreshemments	7.0	Tourit Engolsea. u.		
Owed to or by:		\$			
Fred Miller	5. Date Debt Was Incurred:	\$			
162 Riverside Drive	1/31/15	\$ \$			
Mount Clemens, MI 418043	6. Original Amount of Debt:	   \$	\$_0.00	\$ 31.46	
	<sub>\$</sub> 31.46			FORGIVEN	
		\$			
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$_		
Page Subtotal (Outstanding debt)					
(C	omplete on last page of Schedule s	Grand Total	of all Schedules 1E		
\-				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



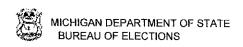
1. Committee I.D. Number

138559-5

SCHEDULE 1E		Frad Millan		
CANDIDATE COMMITTEE 2. C	committee Name Frierius Oi	Fred Miller		
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the com (Che	mittee OR b. Debt	s and obligations owed <u>to</u> o urpose checked.)	r forgiven <u>by</u> 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 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	9. 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: Fundraiser Refreshments	s		
Fred Miller 162 Riverside Drive Mount Clemens, MI 48043	5. Date Debt Was Incurred: 05/29/15 6. Original Amount of Debt: \$ 94.95	\$ \$ \$ \$	\$ 0.00	\$_94.95
If bank loan, name of endorser or guarantor:			ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by: Fred Miller 162 Riverside Drive Mount Clemens, MI 48043	4. Type: Fundraiser Refreshments 5. Date Debt Was Incurred: 5/31/15 6. Original Amount of Debt:  \$ 126.67	\$ \$ \$	\$ 0.00	\$ 126.67
If bank loan, name of endorser or guarantor:		\$ An	nount Endorsed: \$_	FORGIVEN
Debt #3 Corp? Yes Owed to or by: Fred Miller 162 Riverside Drive Mount Clemens, MI 418043	4. Type: Fundraiser Refreshemments  5. Date Debt Was Incurred:  5/29/15  6. Original Amount of Debt:  \$ 3.96	\$ \$ \$ \$	\$_0.00	\$_3.96 FORGIVEN
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	\$225.58
(Co	omplete on last page of Schedule s	Grand Total or showing amounts owed by o	of 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

138559-5

CΔ	NDI	DΔ.	TF	വ	MM	HTT	FE
$\nabla \nabla$			1 🗀	CU.	IAIIA	11 I I	

2. Committee Name Friends of Fred Miller

This Schedule itemizes:		·····						
ļ <sub> </sub>	<u></u>							
a ✓ Debts and obligations owed by or forgiven the committee OR b. Debts and obligations owed to or forgiven by the committee.								
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.	A. Type of Obligation     (Description)     S. Indicate date debt was incurred     Indicate original amount of debt	rpose checked.)  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:	Fundraiser Refreshments	s						
Fred Miller		Ψ ,,,						
162 Riverside Drive	5. Date Debt Was Incurred:	\$						
Mount Clemens, MI 48043	05/29/15	\$	0.00	e 52.00				
indent diamond, im 100 fo	6. Original Amount of Debt	\$	\$ _0.00	\$_02.00				
	\$_52.00			FORGIVEN				
If hook loop, name of andorses or avarantes.	·	<u> </u>	F	, <del></del>				
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$					
Debt #2 Corp? Yes Owed to or by:	4. Type: Fundraiser Refreshments	\$	:					
Fred Miller	5. Date Debt Was Incurred:	\$						
162 Riverside Drive	5/31/15							
Mount Clemens, MI 48043	6. Original Amount of Debt:	\$	\$ 0.00	\$_10.59				
	<sub>\$</sub> 10.59	\$		FORGIVEN				
		\$		FORGIVEN				
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$					
Debt #3 Corp? Yes	4. Type: Fundraiser Refreshemments							
Owed to or by:	4. Type:	\$						
Fred Miller	5. Date Debt Was Incurred:	\$						
162 Riverside Drive	5/30/15	\$		400.00				
Mount Clemens, MI 48043	6. Original Amount of Debt:	\$	\$_0.00	\$_129.20				
	\$ <u>129.20</u>			FORGIVEN				
		\$						
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_	·				
		· · · · · · · · · · · · · · · · · · ·		¢104.70				
		Page Subtotal	(Outstanding debt)	\$191.79				
.~	and the surface of th	Grand Total of	of all Schedules 1E					
(Co	emplete on last page of Schedule si	nowing amounts owed by o	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.

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



1. Committee I.D. Number

138559-5

	CANDIDA	TE CO	MMIT	TEE
--	---------	-------	------	-----

2. Committee Name Friends of Fred Miller

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 <u>to</u> ourpose checked.)	or forgiven <u>by</u> the co	mmittee.
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	9. 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 guarantors, if any.	incurred 6. Indicate original amount of debt			(Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: Fundraiser Refreshments	\$		
Fred Miller	5. Date Debt Was Incurred:	\$		
162 Riverside Drive	05/31/15			
Mount Clemens, MI 48043		\$	\$ 0.00	s 79.32
	6. Original Amount of Debt	\$	\$ <u></u>	
	\$_79.32			FORGIVEN
If bank loan, name of endorser or guarantor:		\$		
Debt #2 Corp? Yes		Am	ount Endorsed: \$ _	1
Owed to or by:	4. Type: Fundraiser Refreshments	\$		
	5. Date Debt Was Incurred:	\$		
	6. Original Amount of Debt:	\$	\$ 0.00	\$
	\$	<u> </u>		
		\$		FORGIVEN
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$	
Debt #3 Corp? Yes	4. Type: Fundraiser Refreshemments	7110	louin Επισοίσσα, φ.Ξ	1
Owed to or by:	4. Type:	\$		
	5. Date Debt Was Incurred:	\$		
		\$		
	6. Original Amount of Debt:	•	\$ 0.00	<b>\$</b>
	\$	\$		FORGIVEN
		\$		L1 OKGIVEN
If bank loan, name of endorser or guarantor:		Ar	mount Endorsed: \$_	
	, =	Page Subtotal	(Outstanding debt)	\$79.32
(Co	omplete on last page of Schedule s	Grand Total howing amounts owed by c	of all Schedules 1E or to the committee)	\$6,625.54
		•	/*	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



## FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number 138559-5

2. Committee Name	Friends	of Fred	Miller	

	- USE /	A SEPARATE SH	EET FOR EACH	EVENT -	
3. Date Event Was Held		r of Individuals Attending ating (whichever is	5. Type of Fund Raisin	g Activity	6. Address and Name (If any) of t place where the activity was held.
03/17/15	g	130	2015 Macomb	Brunch	Home of Elizabeth Pyden 37504 Camellia Lane Clinton Township, MI 48036  Private Residence
7. Total Contributions		\$10,550.00			
8. Other Receipts		\$0.00			
9. Gross Receipts (Add lines 7 a	and 8)	\$10,550.00			
10. Total Cost of Event (Total Cost includes In-Kind Cor	ŕ	\$438.24	Made For the Event	-	
11. Check if event was a joi				,	
Co-Sponsor(s)		Contribution S (%)	plit		Expenditure Split (%)
			<del></del>		
		P\$ 1			
	•		·		
		****			

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

Page	1	of .2
•		



## **FUND RAISER SCHEDULE 1F**

138559-5

CANDIDATE CO	2. Con	mittee Name Friends of Fred	Miller
	- USE A SEPARATE SH	EET FOR EACH EVENT -	
3. Date Event Was Held	Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (If any) of place where the activity was held Home of L. Canada and D. Radke 25455 Dundee
05/31/15	50	Spring Luncheon	Royal Oak, MI 48072  Private Residence
7. Total Contributions	\$4,950.00		
3. Other Receipts	\$0.00		
9. Gross Receipts (Add lines 7	and 8) \$4,950.00		
10. Total Cost of Event (Total Cost includes In-Kind Co	\$496.69 ntributions and All Expenditures	s Made For the Event)	
	int fund raiser and complete the		
Co-Sponsor(s)	Contribution 5 (%)	Split	Expenditure Split (%)
	<u> </u>		
	_	<del></del>	
<ul> <li>period covered by the 0</li> <li>Receipts and expendit</li> </ul>	Campaign Statement. ures listed on a Fund Raiser Sc	ser Schedule for each fund raisir hedule must also be reported or le (1-IK), Itemized Expenditures	the Itemized Contributions

Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

1. Committee I.D. Number

Summary Page.