



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

FILED

CANDIDATE COMMITTEE  
COVER PAGE

08 JAN 31 AM 9:47

FOR OFFICIAL USE ONLY

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

<p>1. Committee I.D. Number <b>69133</b></p> <p>2. Committee Name <b>FRIENDS OF STEVE RILE</b></p>		<p>3. This Statement covers From: <b>01 01 2007</b> To: <b>12 31 2007</b> Mo Day Year</p>	
<p>5. Committee's Mailing Address <b>5427 SOUTHLAND</b> <b>S.H. MI 48310</b> Area Code and Phone <b>586 939-6726</b></p> <p>If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.</p>		<p>4. Candidate Last Name <b>RILE</b> First Name <b>STEVE</b> M.I. <b>M</b></p> <p>4a. Office Sought Including District # or Community Served (If applicable) <b>CITY COUNCIL</b></p> <p>4b. County of Residence <b>MACOMB</b> Driver License # (Optional)</p>	
<p>7. Treasurer's Business Address</p> <p>Area Code and Phone ( )</p>		<p>6. Treasurer's Name &amp; Residential Address <b>STEVE RILE</b> <b>2653 SERRA - S.H.S MI 48310</b> Area Code &amp; Phone ( ) Driver License # (Optional)</p>	
<p>9. TYPE OF STATEMENT</p> <p>9a. <input type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> School <input type="checkbox"/> Special <input type="checkbox"/> Caucus</p> <p>Date of Election, Convention or Caucus Month Day Year</p>		<p>9c. <input checked="" type="checkbox"/> Annual Statement <b>2007</b> Coverage Year</p> <p>9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)</p> <p>9e. <input checked="" type="checkbox"/> Dissolution of Candidate Committee</p> <p>Effective Date of Dissolution <b>01 01 2008</b> Month Day Year</p> <p>By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.</p>	
<p>A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.</p>			
<p>10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.</p>			
<p>Current Treasurer or Designated Record Keeper <b>STEPHEN RILE</b> Type or Print Name</p>		<p><b>[Signature]</b> Signature</p>	
<p>Candidate <b>STEVE RILE</b> Type or Print Name</p>		<p><b>[Signature]</b> Signature</p>	
<p>Date <b>01 30 2008</b> Mo Day Year</p>		<p>Date <b>01 30 2008</b> Mo Day Year</p>	



MICHIGAN DEPARTMENT OF STATE  
Bureau of Elections

1. Committee I.D. Number

69133

2. Committee Name

FRIENDS OF STEVE RICE

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

**RECEIPTS**

**3. Contributions**

a. Itemized (Schedule 1A - Column 6)

(3a.) \$

b. Unitemized (less than \$20.01 each - no Schedule)

(3b.) \$ NOT APPLICABLE

c. Subtotal of "Contributions"

(3c.) \$

**4. Other Receipts (Schedule 1A -1, Column 6)**

(4.) \$

**5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS**  
(Add Line 3c + Line 4)

(5.) \$

Column I  
This Period

Column II  
Cumulative this election cycle

(18.) \$

(19.) \$

(20.) \$

**IN-KIND CONTRIBUTIONS & EXPENDITURES**

**6. In-Kind Contributions (Schedule 1-IK, Column 7)**

(6.) \$

**7. In-Kind Expenditures (Schedule 1B-IK, Column 6)**

(7.) \$

(21.) \$

(22.) \$

**EXPENDITURES**

**8. Expenditures**

a. Itemized (Schedule 1B, Column 6)

(8a.) \$

b. Itemized Get-Out-the-Vote (Schedule 1B-G)

(8b.) \$

c. Unitemized (less than \$50.01 each - no Schedule)

(8c.) \$

**9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)**

(9.) \$

(23.) \$

**INCIDENTAL EXPENSE DISBURSEMENTS**  
(Officeholders Only)

**10. Disbursements**

a. Itemized (Schedule 1C, Column 6)

(10a.) \$

b. Unitemized (less than \$50.01 each - no Schedule)

(10b.) \$

**11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS**  
(Add Line 10a + Line 10b)

(11.) \$

(24.) \$

**DEBTS AND OBLIGATIONS**

**12. Debts and Obligations**

a. Owed by the Committee (Schedule 1E)

(12a.) \$

b. Owed to the Committee (Schedule 1E)

(12b.) \$

**BALANCE STATEMENT**

**13. Ending Balance of last report filed**  
(Enter zero if no previous reports have been filed.)

(13.) \$

**14. Amount received during reporting period**  
(Line 5, Total Contributions & Other Receipts)

(14.) + \$

(15.) = \$

**15. SUBTOTAL Add lines 13 and 14**

**16. Amount expended during reporting period**  
(Add lines 9 and 11)

(16.) - \$

**17. ENDING BALANCE**

(17.) \$

(Subtract line 16 from line 15)

NOTE: Direct contributions, in-kind contributions, loans, expenditures and outstanding debts count against the \$1,000.00 Reporting Waiver threshold.  
All required schedules must be included with this statement. \*If your ending balance is negative, please recheck your math.