



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

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

| | | | |
|--|--|---|--|
| 1. Committee I.D. Number 138470 | | 3. This Statement covers From: <u>05/15/09</u> to <u>11/23/09</u> | |
| 2. Committee Name James Nicholas Hunt Election Committee | | 4. Candidate Last Name Hunt First Name James M.I. N 4a. Office Sought Including District # or Community Served (If applicable) Sterling Heights City Council 4b. County of Residence Macomb | |
| 5. Committee's Mailing Address 36416 Arlene Drive Sterling Heights, MI 48310 Area Code and Phone <u>(586) 822-1766</u> If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official. | | 6. Treasurer's Name & Residential Address James Hunt 36416 Arlene Drive Sterling Heights, MI 48310 Area Code & Phone <u>(586) 822-1766</u> | |
| 7. Treasurer's Business Address James Hunt 36416 Arlene Drive Sterling Heights, MI 48310 Area Code and Phone <u>(586) 822-1766</u> | | 8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) James Hunt 36416 Arlene Drive Sterling Heights, MI 48310 Area Code and Phone <u>(586) 822-1766</u> | |

| | | |
|---|--|--|
| 9. TYPE OF STATEMENT 9a. <input type="checkbox"/> Pre-Election OR 9b. <input checked="" type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> School <input type="checkbox"/> Special <input type="checkbox"/> Caucus Date of Election, Convention or Caucus <u>11/03/09</u> | | 9c. <input type="checkbox"/> Annual Statement (_____ Coverage Year) 9d. <input checked="" type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended) 9e. <input type="checkbox"/> Dissolution of Candidate Committee Effective Date of Dissolution _____ By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page. |
|---|--|--|

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.

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.

| | | | | | |
|---|-----------------------------|-----------|----------------------------|------|-------------------|
| Current Treasurer or Designated Record keeper | James Nicholas Hunt, | Signature | <i>James Hunt</i> | Date | 03/09/2010 |
| Candidate | James Nicholas Hunt | Signature | <i>James Nicholas Hunt</i> | Date | 03/09/2010 |

FILED
 10 MAR -9 PM 4:29
 CARNELL A SABAUGH
 MACOMB COUNTY CLERK
 MT. CLEMENS, MICHIGAN



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 138470

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name James Nicholas Hunt Election Committee

| RECEIPTS | Column I This Period | Column II Cumulative this election cycle |
|--|--------------------------------|---|
| 3. Contributions | | |
| a. Itemized (Schedule 1A - Column 6) | (3a.) \$ <u>290.00</u> | |
| b. Unitemized (less than \$20.01 each - no Schedule) | (3b.) \$ <u>NOT APPLICABLE</u> | |
| c. Subtotal of "Contributions" | (3c.) \$ <u>\$290.00</u> | (18.) \$ <u>\$290.00</u> |
| 4. Other Receipts (Schedule 1A -1, Column 6) | (4.) \$ <u>\$0.00</u> | (19.) \$ <u>\$0.00</u> |
| 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) | (5.) \$ <u>\$290.00</u> | (20.) \$ <u>\$290.00</u> |
| IN-KIND CONTRIBUTIONS & EXPENDITURES | | |
| 6. In-Kind Contributions (Schedule 1-IK, Column 7) | (6.) \$ <u>\$100.00</u> | (21.) \$ <u>\$100.00</u> |
| 7. In-Kind Expenditures (Schedule 1B-IK, Column 8) | (7.) \$ <u>\$1,756.00</u> | (22.) \$ <u>\$1,756.00</u> |
| EXPENDITURES | | |
| 8. Expenditures | | |
| a. Itemized (Schedule 1B, Column 6) | (8a.) \$ <u>\$1,756.00</u> | |
| b. Itemized Get-Out-the-Vote (Schedule 1B-G) | (8b.) \$ <u>\$0.00</u> | |
| c. Unitemized (less than \$50.01 each - no Schedule) | (8c.) \$ <u>\$0.00</u> | |
| 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) | (9.) \$ <u>\$1,756.00</u> | (23.) \$ <u>\$1,756.00</u> |
| INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) | | |
| 10. Disbursements | | |
| a. Itemized (Schedule 1C, Column 6) | (10a.) \$ <u>\$0.00</u> | |
| b. Unitemized (less than \$50.01 each - no Schedule) | (10b.) \$ <u>\$0.00</u> | |
| 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) | (11.) \$ <u>\$0.00</u> | (24.) \$ <u>\$0.00</u> |
| DEBTS AND OBLIGATIONS | | |
| 12. Debts and Obligations | | |
| a. Owed by the Committee (Schedule 1E) | (12a.) \$ <u>\$1,756.00</u> | |
| b. Owed to the Committee (Schedule 1E) | (12b.) \$ <u>\$0.00</u> | |
| BALANCE STATEMENT | | |
| 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) | (13.) \$ <u>\$0.00</u> | |
| 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) | (14.) + \$ <u>\$290.00</u> | |
| | (15.) = \$ <u>\$290.00</u> | |
| 15. SUBTOTAL Add lines 13 and 14 | (15.) \$ <u>\$290.00</u> | |
| 16. Amount expended during reporting period (Add lines 9 and 11) | (16.) - \$ <u>\$0.00</u> | |
| 17. ENDING BALANCE (Subtract line 16 from line 15) | (17.) \$ <u>\$290.00</u> | |



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 138470

2. Committee Name James Nicholas Hunt Election Committee

CANDIDATE COMMITTEE

| 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:

James Hunt
36416 Arlene Drive
Sterling Heights, MI 48310

If over \$100.00 cumulative, please provide:

Occupation: Engineer

Employer Name & Business Address:

800 Chrysler Drive
Auburn Hills, MI 48326

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 Campaign Loan for James Hunt 2009

5. Date Of Receipt: 05/15/09

6. Vendor Name & Address:

Memo Itemization Below

\$ 2000

\$ 2000

☐ Fund Raiser Contribution

Contribution # 2 PAC Receipt? ☐ Yes

Name & Address:

Black Finn
530 South Main Street
Royal Oak, MI 48067

If over \$100.00 cumulative, please provide:

Occupation:

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 for Fundraiser

5. Date Of Receipt: 09/24/09

6. Vendor Name & Address:

Click Here for Memo Itemization

\$ 50

\$ 50

2H
3/9/10

☒ Fund Raiser Contribution

Contribution #3 PAC Receipt? ☐ Yes

Name & Address:

Black Finn
530 South Main Street
Royal Oak, MI 48067

If over \$100.00 cumulative, please provide:

Occupation:

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 for Fundraiser

5. Date Of Receipt: 10/14/09

6. Vendor Name & Address:

Click Here for Memo Itemization

\$ 50

\$ 50

2H
3/9/10

☒ Fund Raiser Contribution

Page Subtotal \$2,100.00

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

\$2,100.00

Enter this total
on line 6 of Summary
Page