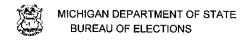
CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement covers From: 11 1 2 11
Committee I.D. Number	11-1-2011 to 10-23-2011
138470	4a. Office Sought Including District # or Community Served (If applicable)
2. Committee Name	Sterling Hts City (aweil
James Nicholas Hut election Committee	The City Comer!
	4b. County of Residence MACOMB
5. Committee's Mailing Address JAMES HUNC	6. Treasurer's Name & Residential Address
36416 Arlowe	James Hunt
	36416 Arlowe 語言
Sterling Hts MI 48340	Sterme His MI 483/0 000 SI
Area Code and Phone	27 H
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.	Area Code & Phone
7. Treasurer's Business Address	Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)
JAMES HUNT	JAMES HUNT
36416 Arlene	· ·
Storling HAS MI 483/0	36416 Arlene
	Sterling Hos MI 48310
504 922 17(I	1
Area Code and Phone S86 822 . / 744	Area Code and Phone
9. TYPE OF STATEMENT	
9a. Pre-Election OR 9b. Post-	t-Election 9c. Annual Statement (ZOIL Coverage Year)
	9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c
Pre-Election or Post-Election Statement relates to:	or 9e to indicate which Statement is being amended)
Primary	9e. Dissolution of Candidate Committee
	Effective Date of Dissolution
Convention	100l
Special	
Cauc	By checking this item, I/We certify that the committee has no assets or
Date of Election, Convention or Caucus	outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for
Nov 8, 2011	the Reporting Walver. 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 rec Schedules. Direct contributions, in-kind contributions, loans, expen	equired Campaign Statements. The Campaign Statements must include all applicable inditures, 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 change amendment to the Statement of Organization should accompany the	ed since the information was shown on the committee's Statement of Organization, an his Campaign Statement. If a request for a Reporting Waiver is not received on or hat campaign statement cannot be waived.
10. Verification: I/We certify that all reasonable dilinance was used in	nat campaign statement cannot be waived.
my\our knowledge and belief the contents are true, accurate and cor	in the preparation of this statement and attached schedules (if any) and to the best of omplete.
Current Treasurer or Designated Record keeper 3 AMES HUNT	1 James Hat 10/27/2011
Designated Record keeper	Date
<u> </u>	\sim 11
Candidate SaMES HUNT	1 Jan Hunt Date 10/27, 2011
Type or Print Name	Signature



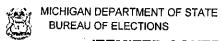
SUMMA	ARY PAGE
CANDIDATE	COMMITTEE

2. Committee Name James Nicholas Hunt election Committee

DECEMPTS		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		Surridiants the discillative
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 555 , 00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ <u>555.00</u>	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>\$55.00</u>	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$845.00	
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.) \$ <u></u>	(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)		
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(10b.) \$	
DEBTS AND OBLIGATIONS	(11.) \$	(24.) \$
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ 1980.95	
b. Owed to the Committee (Schedule 1E)	(10)	
	(12b.) \$BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$290.00	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$ 555,00	
(Line 5, Total Contributions & Other Receipts)	211 00	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
 Amount expended during reporting period (Add lines 9 and 11) 	(16.) - \$ <u>845, ∞</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$*	

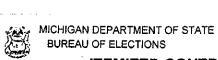


ITEMIZED CONTRIBUTIONS	120	2477	ე		
SCHEDULE 1A 1. Committee I.D. Number		3710	/		-
		11cholas	Hut	Election Co.	mmit
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amoun	nt)	7. Cumula Election (Contribute date of re	Cycle for Each tor (Through	
3. Contribution # 1 Name & Address: PAC Receipt? YES 4. Date of Receipt 8/20/2011 Lisa Ringler	_		be transp	COLPY	-
164 Amys walk Aubur Hills, MI 48326 5. If over \$100.00 cumulative, please provide:	\$ <u> </u>	30	\$	20	
Occupation Employer	Click	: Here for		temization	
Business Address	•		æ⁴. :		
Type of Contribution: Direct Loan from a person Fund Raiser			•		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/25/2011 Name & Address Kristi Daniels YI ROSEBUD WH. Clemens, MI 48043	\$	10	\$	10	
5. If over \$100.00 cumulative, please provide:	Click '	Here for	Memo ite	omization	
Occupation Employer	-	Here	MIGHTO	HIIZGUOLL	
Business Address					
Type of Contribution: Direct Loan from a person Fund Raiser					
3. Contribution #3 Name & Address: A 4/2 by Meadows 3 D 149 Avoidable Mad 150w Hts, M1 4 9071 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	-	20_ Here for M	\$ Memo Iter	20 mization	
3. Contribution #4 Name & Address Crace /Vaseef 3110 N Nermout Royal Oak, M1 48073 5. If over \$100.00 cumulative, please provide: Occupation Employer	\$ ZO	····	\$	ZO	
Type of Contribution: Direct Loan from a person Fund Raiser					ı
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	70	tal on			



1. Committee I.D. Number

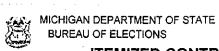
CANDIDATE COMMITTEE 2. Committee Name	JAMES Nicholas Hut Election (c
Enter contributor's name and address. If contribution is from an individual, enter last name, first name middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	ne, 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 8/20/201 Name & Address: MIKE Saulind SS18 Ambanwood Dr Apt 202 Sterling Hts, MI 48310 5. If over \$100.00 cumulative, please provide:	<u>\$ 10</u> <u>\$ 10</u>
OccupationEmpleyer	Click Here for Memo Itemization
Name & Address TOM Gottsman 1658 Snowberry Ridge Ann Arbor, MI 48/03 5. If over \$100.00 cumulative, please provide: Occupation Employer	\$ / D \$ / D Click Here for Memo Itemization
Type of Contribution: Direct Loan from a person X Fund Raiser 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8/20/20/ Cathy Dish 494 E Breckerids apt 104 Ferndale, MI 48220 5. If over \$100.00 cumulative, please provide:	\$ 70 \$ 20 Click Here for Memo Itemization
Occupation Employer	
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 8/20/2011 Saig Laura Whyne, Mi 48/84 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	\$\frac{10}{5} \frac{10}{5}\$ Click Here for Memo Itemization
Page Subt Grand Total of All Schedules (Complete on last page of Schedules) Page	1A



CANDIDATE COMMITTEE

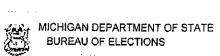
1. Committee I.D. Nu	mber/	<u> 58470</u>) 		
2. Committee Name	JAMES	Nicholas	Hut	Bation	Committee

		ntribution is from a Political Committee or an Independent regardless of amount.	120	Contributor (The date of receipt)
3. Contribution # 1 Name & Address:	PAC Receipt?		-	
And Bir R 5. If over \$100.00 cur	1814 Banb Minghan Mi	ury 4 9 009	s_ 20_	\$ 20
Occupation			Click Here for	or Memo Itemiz
Business Address	•			Age.
Type of Contribution:	Direct	Loan from a person X Fund Raiser		
3. Contribution #2	PAC Receipt?			
Name & Address		<u> </u>		
27 9	d Demepr 335 Marsh	e n//	s 10	
, ,	Southfield.	MI 48076	\$	\$ /T
5. If over \$100.00 cum		· • • =	Click Here fo	or Memo Itemiza
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Business Address		-		
Type of Contribution:	Direct	Loan from a person X Fund Raiser		
Name & Address:	or Cohen	YES 4. Date of Receipt 8/25/25//		
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25. If over \$100.00 cum	301 Scoti	DS, M1 48070 vide:		¥
5. If over \$100.00 cum Occupation Business Address	301 Scoti Ugtow Woo ulative, please pro	PS, MI 48070 vide: Employer		¥
25. If over \$100.00 cum	301 Scoti	vide: Employer		¥
5. If over \$100.00 cum Occupation Business Address Type of Contribution: 3. Contribution #4 Name & Address	SOI Scot, Vy to Av. Wood ulative, please pro Direct PAC Receipt?	vide: Employer Loan from a person YES 4. Date of Receipt 8/20/201/		<u> </u>
5. If over \$100.00 cum Occupation Business Address Type of Contribution: 3. Contribution #4 Name & Address	Direct PAC Receipt?	Loan from a person Fund Raiser YES 4. Date of Receipt 8/20/201/		Memo Itemizat
5. If over \$100.00 cum Occupation Business Address Type of Contribution: 3. Contribution # 4 Name & Address	BOI Scoting to As Wood ulative, please pro Direct PAC Receipt? ASON GOMOLANGIO MIDLANGION, MIDLANGI	DS, MI 48070 vide: Employer Loan from a person YES 4. Date of Receipt 8/20/201/ AAN 10 148073	Click Here for	<u> </u>
5. If over \$100.00 cum Occupation Business Address Type of Contribution: 3. Contribution #4 Name & Address	BOI Scoting to As Wood ulative, please pro Direct PAC Receipt? ASON GOMOLANGIO MIDLANGION, MIDLANGI	DS, MI 48070 vide: Employer Loan from a person YES 4. Date of Receipt 8/20/201/ AAA 10 148073	Click Here for	Memo Itemizat
5. If over \$100.00 cum Occupation Business Address Type of Contribution: 3. Contribution #4 Name & Address 13.1 20.5 5. If over \$100.00 cum Occupation	BOI Scoting to As Wood ulative, please pro Direct PAC Receipt? ASON GOMOLANGIO MIDLANGION, MIDLANGI	Loan from a person Fund Raiser YES 4. Date of Receipt 8/20/201/ AND 1 48073 vide:	Click Here for	Memo Itemizat
5. If over \$100.00 cum Occupation Business Address Type of Contribution: 3. Contribution # 4 Name & Address 13/ 20 5. If over \$100.00 cume	BOI Scoting to As Wood ulative, please pro Direct PAC Receipt? ASON GOMOLANGIO MIDLANGION, MIDLANGI	Loan from a person Fund Raiser YES 4. Date of Receipt 8/20/201/ AND 1 48073 vide:	Click Here for	Memo Itemizat
5. If over \$100.00 cum Occupation Business Address Type of Contribution: [3. Contribution # 4 Name & Address 137 Contribution # 5. If over \$100.00 cum Occupation Business Address	BOI Scot, US to AN WOOD ulative, please pro PAC Receipt? ASON GOM O MIDLAY 491 09K, M ulative, please prov	vide: Employer Loan from a person YES 4. Date of Receipt 9/20/201/ AAN D 1 48073 vide: Employer	Click Here for	Memo Itemizat



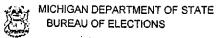
Committee I.D. Number	1589	170	

SCHEDULE 1A 1. Committee I.D.	D. Number
CANDIDATE COMMITTEE 2. Committee No.	ame James Nicholas Hut Election Comm
Enter contributor's name and address. If contribution is from an individual, enter last name, first middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 8/20/2 Name & Address:	
Davre Pascale 1/38 N. Comptell # 2/0 20 YAL DAK MI 18067 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person X Fund Raiser	\$
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/25/25 Name & Address Tony Fahr 2955 RAUINEWOOD Commerce M1, 48382 5. If over \$100.00 cumulative, please provide:	\$\$/\(\rightarrow\) Click Here for Memo Itemization
OccupationEmployer	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8/20/. Name & Address: VINCENTA VAN EVY 2261 DUNSTOSIE BIMING LAM MI 48007 5. If over \$100.00 cumulative, please provide:	\$ 10 \$ 10 Click Here for Memo Itemization
Business Address Type of Contribution: Direct Loan from a person X Fund Raiser	
Alan La 2 ar 2780 5 Adlor Warrer Mi U8088 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Direct Loan from a person Fund Raiser	201/ \$



CANDIDATE COMMITTEE

CANDIDATE COMMITTEE 2. Committee Name	MINI TO I CAME	S TOOL CACHON
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Ea Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 8/20/2011 Name & Address: Monica Strzynski 23590 Courc Center Dr #124 Soothfield, MI 48033 5. If over \$100.00 cumulative, please provide: Occupation Empibyer Business Address	\$ <i> O</i>	s // or Memo Itemization
Type of Contribution: Direct . Loan from a person X Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/25/2011 Name & Address MIKE DRE 4/80 Charlet Lawe Water for 1 M 1 48320	s20	<u>\$</u> 20
5. If over \$100.00 cumulative, please provide:	Click Horo fo	or Memo Itemization
Occupation Employer	Click Here it	i Memo Remization
Type of Contribution: Direct Loan from a person X Fund Raiser		
DANA Laskowsky 868 N. Adams #8 Biran No 48009 5. If over \$100.00 cumulative, please provide: Occupation Employer	\$/DClick Here for	\$ / D Memo Itemization
Business Address		
2 Contribute #12		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 8/20/2011 Name & Address Samh Bostel, tw., N 169 Maple field Rd Pleasont RIDGE my 48069 5. If over \$100.00 cumulative, please provide:	\$ 20	\$2O
Occupation Employer		omo temization
Business Address		
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CANDIDATE COMMITTEE

. Committee I.D. Nu	mber/	<u> 58470</u>)		
Committee Name	JAMES	Nicholas	Hut	Election	Committee

	MIDIOMIL	2. Committee Name	MWED INICIONAL	TODE CHETOL
middle initial. Check b	ox to indicate if co	contribution is from an individual, enter last name, first name, ntribution is from a Political Committee or an Independent a regardless of amount.	6. Amount 220	7. Cumulative for Election Cycle for E Contributor (Throug
3. Contribution # 1	PAC Receipt	VEC 4 Date of Possist C. La 4 a	220	date of receipt)
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5. If over \$100.00 cum	ROY MI	ovide:		*
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Business Address	<u> </u>			
Type of Contribution:	Direct	Loan from a person Fund Raiser		
3. Contribution #2	PAC Receipt?	YES 4. Date of Receipt 8/25/25/1		
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Business Address				•
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Business Address				
Type of Contribution:	Direct	Loan from a person X Fund Raiser		
3. Contribution # 4	PAC Receipt?		1	
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		Park mi 48146	\$ 10	\$
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Occupation		Employer	Click Here for N	Memo Itemization
Business Address				
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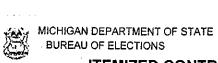


CANDIDATE COMMITTEE

1. Committee I.D. Number 138470

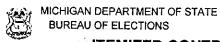
2. Committee Name James Nicholas Hut Electron Committee

Committee (PAC) Report <u>all</u> contributions	contribution is from an individual, enter last name, first name, tribution is from a Political Committee or an Independent regardless of amount.	6. Amount 270	7. Cumulative for Election Cycle for Contributor (Throu date of receipt)
3. Contribution # 1 PAC Receipt? Name & Address: Kyle 1247 Tulber	· York		
	M1 48506	s 20	s 70
5. If over \$100.00 cumulative, please pro	vide:		
Occupation	Empibyer	Click Here fo	r Memo Itemizat
Business Address			British.
	Loan from a person X Fund Raiser		. '
3. Contribution #2 PAC Receipt? Name & Address	YES 4. Date of Receipt 8/25/2011		
George Sch	11-m to 12-		
ucas I T	01	s 10	. /0
49881Jo	<i>y Ka</i>	\$.s
5. If over \$100.00 cumulative, please prov	W1 48187	Oliale I I ama d	
İ		Click Here for	Memo Itemization
Occupation	Employer		
Business Address			
Type of Contribution: Direct	Loan from a person X Fund Raiser		
Mark Dagen 264 Alban- Ferndak M 5. If over \$100.00 cumulative, please provi	49250	\$ ZO	\$ 20
Occupation	Employer		
Business Address	Chipioyei		
Type of Contribution: Direct	Loan from a person X Fund Raiser		
3. Contribution #4 PAC Receipt?			
Name & Address James, Hust 36416 Anlew C Stulms Hts		s 20	s_ Z0
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Business Address Type of Contribution: Direct	Loan from a person Fund Raiser		
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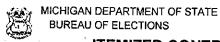
. Committee I.D. Number	<u> 138470</u>

5. If over \$100.00 cumulative, please provide: Occupation Employer Click Here for Memo Itemization Business Address Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal Z O	SCHEDULE 1A 1. Committee 1.1	D. Number 700 / 70
Finded in Initial Check hox to indicate if contribution is from a Political Committee or an Independent Committee of Political Report and Contribution Pegariates of amount. 3. Contribution # 1	CANDIDATE COMMITTEE 2. Committee N	ame James Nicholas Hut Election
3. Contribution # 1 Name & Address DAVI Hart leg 2 Y19 Ax 2e TROM M1 URORY 5. Hover \$100.00 cumulative, please provide: Cocupation Employer Suiness Address Type of Contribution: Direct Loan from a person Employer Business Address Type of Contribution: Suiness Address Type of Contribution: Direct Loan from a person Employer Business Address Type of Contribution: Suiness Address Type of Contribution: Direct Loan from a person Fund Raiser Click Here for Memo Itemization Click Here for Memo Itemization Click Here for Memo Itemization Cocupation Employer Suiness Address: Type of Contribution: Suiness Address Type of Contribution: Suiness Address Type of Contribution: Suiness Address Type of Contribution: Cocupation Employer Click Here for Memo Itemization Click Here for Memo Itemization Cocupation Employer Suiness Address Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal Complete on last page of Schedules 1A Co	middle initial. Check box to indicate if contribution is from a Political Committee or an Independent	dent Election Cycle for E.
DAVI Hartley 2 419 Axtel TROY MI USD81 5. If over \$100.00 cumulative, please provide: Click Here for Margo itemization Fund Raiser 3. Contribution #2 Name & Address Type of Contribution: Direct Loan from a person Fund Raiser 5. If over \$100.00 cumulative, please provide: Click Here for Memo itemization Cocupation Employer Business Address: S. Contribution: Direct Loan from a person Fund Raiser 5. If over \$100.00 cumulative, please provide: Cocupation Employer Business Address: 5. If over \$100.00 cumulative, please provide: Cocupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution: Direct Loan from a person Fund Raiser 5. If over \$100.00 cumulative, please provide: Cocupation Employer Business Address FAC Receipt? YES 4. Date of Receipt \$2/20 / 20 / 1. S. If over \$100.00 cumulative, please provide: Click Here for Memo itemization Cocupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser Click Here for Memo itemization Cocupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser Click Here for Memo itemization		
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Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9/26/2011 S. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Cocupation		Click Here for Memo Itemizatio
Type of Contribution: Direct Loan from a person Fund Raiser		- Agric
A. Date of Receipt \$\frac{9}{20} / 2011 S. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Cocupation Employer Business Address Type of Contribution: Direct Direct Loan from a person Employer S. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization S. Click Here for Memo Itemization Cocupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser S. Click Here for Memo Itemization Figure \$\frac{1}{20}\$ \frac{1}{20}\$		
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CocupationEmployer		\$ <u>\$</u>
Business Address Type of Contribution: Direct	5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 3 Name & Address: \$	Occupation Employer	<u>.</u>
3. Contribution # 3 Name & Address: S	Business Address	
3. Contribution # 3 Name & Address: YES 4. Date of Receipt 8 26 261	Type of Contribution: Direct Loan from a person X Fund Raiser	
Occupation Employer	Tvarie & Address.	\$\$
Business Address Type of Contribution: Direct Loan from a person X Fund Raiser 3. Contribution #4 Name & Address PAC Receipt? YES 4. Date of Receipt 8/20/20!/ 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal Click Here for Memo Itemization Fixe a grand Total of All Schedules 1A (Complete on last page of Schedule) Fixe a grand Total on Loan from this total on Loan from a person Fixe this total	5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Type of Contribution: Direct Loan from a person X Fund Raiser 3. Contribution #4 Name & Address PAC Receipt? YES 4. Date of Receipt 8/20/20// \$ \$ 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal ZO Grand Total of All Schedules 1A (Complete on last page of Schedule) First this total on First this total on First Instituted On First Ins	Occupation Employer	
3. Contribution #4 Name & Address PAC Receipt? YES 4. Date of Receipt 8/20/2011 \$ \$ Click Here for Memo Itemization Cupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal ZO Grand Total of All Schedules 1A (Complete on last page of Schedule) Enter this total on FR. =		
Name & Address 5. If over \$100.00 cumulative, please provide: Occupation Employer Click Here for Memo Itemization Business Address Type of Contribution: Direct	Type of Contribution: Direct Loan from a person X Fund Raiser	
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Occupation Employer Click Here for Memo Itemization Business Address Type of Contribution: Direct		\$
Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal ZO Grand Total of All Schedules 1A (Complete on last page of Schedule) Enter this total on		Click Here for Memo Itemization
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Grand Total of All Schedules 1A (Complete on last page of Schedule) Finter this total on		
Grand Total of All Schedules 1A (Complete on last page of Schedule) Enter this total on	Page	Subtotal ZO
(Complete on last page of Schedule)	Grand Total of All School	dules 1A
line 3a of Summary		Schedule) FR# =
	Page & of \	



CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from a prison is from an Individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount. 7. Cumulative for Encounting Contributions regardless of amount. 8. Contribution #1 PAC Receipt? YES 4. Date of Receipt 9/\$5/2011 8. To Receipt 9/\$5/2011 8. To Start Name & Address: 8. Type of Contribution: Direct
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 9/30/2011 Name & Address: Mariana M
Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9/30/2011 Suppose Para Chern 8/466 Pershing 5. If over \$100.00 cumulative, please provide: Cick Here for Memo Itemization Cocupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 9/30/2011 Marti Certification Suppose Fund Raiser 52/131 Deferrer lave Chester Fell Mil 490 47 5. If over \$100.00 cumulative, please provide: Cocupation Employer Suppose Fund Raiser Chester Fell Mil 490 47 5. If over \$100.00 cumulative, please provide: Cocupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 9/20/2014
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9/30/2011 8 466 Pershing Subscripts S
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9/30/2011 8 Yes 4. Date of Receipt 9/30/2011 8 Yes 4. Date of Receipt 9/30/2011 5. If over \$100.00 cumulative, please provide: Cick Here for Memo Itemization Ciccupation Employer Business Address
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S 466 Perships 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Cocupation
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Cupation
OccupationEmployer
OccupationEmployer
Business Address Type of Contribution: Direct Loan from a person X Fund Raiser 3. Contribution # 3 Name & Address: Mart. Cr. ftg \$ 15 Deferrer lave Chester fell m1 47047 5. If over \$100.00 cumulative, please provide: Cocupation Employer Business Address Type of Contribution: Direct Loan from a person X Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 9 /20/2014
Type of Contribution: Direct Loan from a person
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 9/20/2011 Mart. Cr.fta \$2131 Deferrer lave Charter field m1 40047 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person X Fund Raiser 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 9/20/2014
Name & Address: Mart. Gr.ftq S2131 Deferrer lave S 15
Business Address Type of Contribution: Direct Loan from a person X Fund Raiser 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 9/20/201/
Type of Contribution: Direct Loan from a person X Fund Raiser 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 9/20/2014
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Rich Do-Ney
3219 WILSON Are \$ 20 . 20
loyal oak M1 48077
5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization
Occupation Employer
Business Address
Type of Contribution: Direct Loan from a person Fund Raiser
D 0 44444
Grand Total of All Schedules 1A (Complete on last page of Schedule) Enter this total on line 3a of Summary Page.

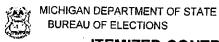


CANDIDATE COMMITTEE

Committee I.D. Number 138470

Committee Name James Nicholas Hut Electron Committee

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 9/50/2011 Bry Au Hallman 123 Berchire 5 ter/ing [HS M1 483/9] 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person X Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9/30/2011	\$ // S // S // Click Here for Memo Itemization
Kelly Sprague 7230 n. Entan BILMING han MI 5. If over \$100.00 cumulative, please provide:	\$
OccupationEmployer	
3. Contribution #3 Name & Address: Chvis Hartsock 2 4585 Petersburg East Pende mil 48021 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person X Fund Raiser	s 70 s 20 Click Here for Memo Itemization
3. Contribution #4 Name & Address JON DILLON 37/56 This bar WATHE MI 48/84 5. If over \$100.00 cumulative, please provide: Occupation Employer	S
Business Address	60
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page	Enter this total on line 3a of Summary Page.



CANDIDATE COMMITTEE

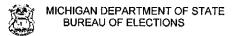
1. Committee I.D. Number 158470

2. Committee Name James Nicholas Hut Elation Committee

 $Q_{\pm,\mathcal{O}}$

Enter this total on line 3a of Summary Page.

			2: Committee Traine	CHING INCIDIA	3 1000 00000
j middle initial. Check b	ox to indicate if co	ntribution is from a Politica	dividual, enter last name, first name, al Committee or an Independent	6. Amount	7. Cumulative for
Committee (PAC) Rep	ort all contribution	s regardless of amount.	ar deminimos of all mospendera	45	Election Cycle for Each Contributor (Through
3. Contribution # 1	PAC Receipt	? YES 4. Date	of Receipt 9/30/2011	1	date of receipt)
Name & Address:	Missin A	u lette			,
	1272 2	ulette anons arh Mi. 480	_		
	1-tage 1 0	197 h MI, 480	30	\$ ZO	<u>\$ 2ఎ</u>
5. If over \$100.00 cum	ulative, please pi	rovide:		Oliala I I a sa 6	
Occupation		Employer		Click mere to	or Memo Itemization
Business Address	- <u>:-</u>				•
Type of Contribution:	Direct	Loan from a person	X Fund Raiser		
Contribution #2 Name & Address	PAC Receipt?	YES 4. Date of	of Receipt 9/30/2011		
				\$	\$
5. If over \$100.00 cum	Jlative, please pro	ovide:		Click Hara fo	r Memo Itemization
Occupation				Olick Here Io	i wemo nemization
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YES 4. Date of	of Receipt 9/30/2011		
				s .	
•					\$
5. If over \$100.00 cumu	lative, please pro	vide:		Click Here for	Memo Itemization
Occupation		Employer			
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
Contribution #4 lame & Address	PAC Receipt?	YES 4. Date of	of Receipt 9/30/2011		
				\$	\$
i. If over \$100.00 cumu	lative, please pro	vide:			
Occupation				Click Here for	Memo Itemization
		_ Employer			
Business Address	<u> </u>				
Type of Contribution:	Direct	Loan from a person	Fund Raiser	** ***********************************	
			Page Subtota	20	
		(Grand Total of All Schedules 1A (Complete on last page of Schedule)		145



Occupation:

ITEMIZED IN-KIND CON

ITEMIZED IN-KIND CONTI	RIBUTIONS	1384	70	
SCHEDULE 1-II				
CANDIDATE COMM	AITTEE 2. Committee Name James 1	licholas	Hunt Election	W COMMITTE
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 service purchased	ces were	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 PAC Receipt? Yes Name & Address: James Hant 36416 Arlanc Sterling 1413 MI 48326 If over \$100.00 cumulative, please provide: Occupation:	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 Description KINKOS - Pape & T.N.	- LOAN	47.23 s	47.23
Employer Name & Business Address:	5. Date Of Receipt: 8-2-2011 6. Vendor Name & Address: KINKOS 4193 Baldwin Auburn Hills m/ 48324	– Click	k Here for Memo Ite	mization
Contribution #2 PAC Receipt? Yes Name & Address James Hunt 36416 Arlene Sterling His 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		8 ∂3.°' \$	87 0 , ²⁴
If over \$100.00 cumulative, please provide: Occupation: ENSINEER Employer Name & Address: 800 Chrysla Dr Auburn Hills MI 48376 Chryslar LCC Fund Raiser Contribution	Description MAILERS w Postage 5. Date Of Receipt: Sept 22, 2011 6. Vendor Name & Address: Graphics East 16005 Sturgeon Roseville MI 48066		< Here for Memo Ite	emization
Contribution #3 PAC Receipt? Yes Name & Address: JAMES HUNT 36416 Anlove Stering 1445 M1 483/0	4.		19.87 s	89 9 . 11
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: Fund Raiser Contribution	Description Business Carek 5. Date Of Receipt: June 13, 2011 6. Vendor Name & Address: Vista Print 100 Hayden Aue Cernston MA 02421	Click	k Here for Memo Ite	mization

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

> Enter this total on line 6 of Summary Page

Page __/ of __3



ITEMIZED IN-KIND CONT	RIBUTIONS /	20 (176
SCHEDULE 1-I		38 476
CANDIDATE COMM	NITTEE 2. Committee Name <u>Sames</u> Nic	chokas Hunt election Commi
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 purchased	7. Amount or Fair Market Value South of Election Cycle (Through date in Item 5)
Contribution #1 PAC Receipt? Yes Name & Address: James Hout 36416 Arbue Sterling Hts M I 483/4 If over \$100.00 cumulative, please provide:	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-Loane	s 67.0° s 67.0°
Occupation: Employer Name & Business Address: Fund Raiser Contribution	Description Beverages 5. Date Of Receipt: 8/20/701 6. Vendor Name & Address: RUSTY KEG- 3951 Metro Parkway Starring Has MI 48310	Click Here for Memo Itemization
Contribution #2 PAC Receipt? Yes Name & Address James Hunt 36416 Aylone Sterling H5 M1 483/5 If over \$100.00 cumulative, please provide: Occupation:	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-L Description	s 421 ¹³ s /09, ²⁰
Employer Name & Address: Fund Raiser Contribution	5. Date Of Receipt: 8/19/2011 6. Vendor Name & Address: 205TCO 30550 Stephenson Highway MADIYON HIS MI 48071	Click Here for Memo Itemization
Contribution #3 PAC Receipt? Yes Name & Address: James Hut 36416 Arlene Stevling HTS	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-Loane	s 41.50 s 152.70
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: Fund Raiser Contribution	Description Beverages 5. Date Of Receipt: 9/30/2011 6. Vendor Name & Address: RUSTY KEG 3951 Me tro Parkway Sterling H& MI 48310	Click Here for Memo Itemization
7 	Page S	ubtotal /50,7º

Grand Total of all Schedules 1-IK (Complete on last page of Schedule) Enter this total on line 6 of Summary Page

Page 2 of 3



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number /38470

CANDIDATE COMM	IITTEE 2. Committee Name	MUNI ELECTION COMMITTER
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: 26 416 Ar leve Stering #5 MI V \$ 310 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	(.0.3/11)	29,14 \$ 29,14
Fund Raiser Contribution #2	MADISON HTS MI 4807	
Contribution # 2 PAC Receipt? Yes Name & Address 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 5. Date Of Receipt: 6. Vendor Name & Address:	\$\$
Fund Raiser Contribution	CI	ick Here for Memo Itemization
Contribution #3 PAC Receipt? Yes Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN	\$
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description 5. Date Of Receipt: 6. Vendor Name & Address:	ick Here for Memo Itemization
Fund Raiser Contribution		
	Page Subtotal	29,14
	Grand Total of all Schedules 1-Ii (Complete on last page of Schedule	4010 ps

Enter this total on line 6 of Summary Page



ITEMIZED EXPENDITURES SCHEDULE 1B

CANDIDATE COMMITTEE	2. Committee Name James Nicholas Hunt	election Committee
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. D	Pate 6. Amount
Expenditure #1	,	
Name James Hunt	I IOAN t rise	16/201 \$ 845.00
Address 36416 Allene	Purpose: Click Here to	r Memo Itemization Type
Sterling Hts. MI 48310		^ 3
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	
Expenditure #2		
Name		\$
Address	Purpose:	ate
	Click Here for	r Memo Itemization Type
	Check box if this expenditure is payment of	
Fund Raiser	debt or obligation reported on previous statement	
Expenditure #3		
Name		· \$
Address	Purpose:	Pate
	Click Here for	Memo Itemization Type
[]	Check box if this expenditure is payment of debt or obligation reported on previous	
Fund Raiser	statement	
Expenditure #4	·	
Name		•
Address	Purpose:	ate \$
	Click Here for	Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	
Expenditure #5		-
Name		
Address	Purpose: Da	te \$
	Click Here fo	r Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	
<u></u>	Subtotal this	page 345.ºº
	Grand Total of all Schedu (Complete on last page of Sci	, ,,,,

Enter this total on line 8a of Summary Page



DEBTS AND OBLIGATIONS 1, Committee I.D. Number

138470

SCHEDULE 1E	lamas Ni	ala ala ala ala		_
CANDIDATE COMMITTEE 2.0	Committee Name James NI	cholas Hunt Elec	tion Commi	ltee
This Schedule itemizes;				
	mittee OR b. Deb ck either a or b. Use only for the p	ts and obligations owed <u>to</u> o urpose checked.)	r forgiven <u>by</u> the co	mmittee.
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 guaranters, 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 Balence at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: James Hunt 36416 Arlene Drive Sterling Heights, MI 48310	4. Type: Loan 5. Date Debt Was Incurred: 09/09/09 6. Original Amount of Debt: \$ 966.00	\$ 	\$	\$_966.00 FORGIVEN
if bank loan, name of endorser or guarantor:				•
Debt #2 Corp? Yes Owed to or by: James Hunt 36416 Arlene Drive Sterling Heights, MI 48310 If bank loan, name of endorser or guarantor: Debt #3 Corp? Yes Owed to or by: James Hunt 36416 Arlene Drive Sterling Heights, MI 48310	4. Type: Loan 5. Date Debt Was Incurred: 10/23/2009 6. Original Amount of Debt: \$ 375.00 4. Type: Loan 5. Date Debt Was Incurred: 10/26/2009 6. Original Amount of Debt: \$ 70.00	\$ \$ \$ \$ \$	\$	\$ 375.00 FORGIVEN \$ 70 FORGIVEN
If bank loan, name of endorser or guarantor.		Am	ount Endorsed: \$	
(Con A debt or obligation must be shown on this Schedule this Campaign Statement or it was forgiven during the Page	mplete on last page of Schedule si e if there was an outstanding an ee period covered by this Campa	Grand Total or howing amounts owed by or nount owed on it at the clo	•	\$1,411.00 Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page



DEBTS AND OBLIGATIONS	Committee L.D. Number 138	470		
SCHEDULE 1E	TO THE PERSON OF			
CANDIDATE COMMITTEE 2.	Committee Name James N	icholas Hunt Elec	tion Commi	ttee
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the cor	nmittee OR b. Det eck either a or b. Use only for the p	As and obligations owed to o	r forgiven <u>by</u> the co	ommittee.
Name and Mailing Address of person, veridor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an	4. Type of Obligation (Description) 5. Indicate data debt was incurred	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period
incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	Indicate original amount of debt			(Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by;	4, Type: Loan	\$		
James Hunt	5. Date Debt Was Incurred:			
36416 Arlene Drive	10/26/09	3		
Sterling Heights, MI 48310	6. Original Amount of Debt:	\$	S	s 270.00
	5 270.00	<u> </u>	·	
if bank loan, name of endorser or guarantor:		<u> </u>		FORGIVEN
Debt #2 Corp? Yes	Laon	Amo	unt Endorsed: \$	
Owed to or by:	4. Type: Loan	\$		
James Hunt 36416 Arlene Driye	5. Date Debt Was Incurred:	\$		
Sterling Heights, MI 48310	10/30/2009	\$		
	6. Original Amount of Debt:		\$	\$ 75.00
	<u>5 75.00</u>	4		FORGIVEN
If bank loan, name of endorser or guarantor;		\$		
Debt #3 Corp? Yes		Aino	unt Endorsed: \$-	
Owed to or by:	4. Type:	\$_		
	5. Date Debt Was Incurred:	s		
		\$		
:	6. Original Amount of Debt:		§	\$
	\$	3		FORGIVEN
f bank loan, name of endorser or guarantor:		\$		
The artificial of gadianion.		Amo	บกt Endorsed: \$	
		Page Subtotal (C	ntstanding dept)	\$345.00
(Con	mplete on last page of Schodule sh	Grand Total of cowing amounts owed by or to	all Schedules 1E o the committee)	\$ 434
debt or obligation must be shown on this Schedule	if there was an outebanding and			Enter this total on line 12a "owed by" or line 12b

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

Page 2 of 5

"owed to" of the Summary Page



DEBTS AND OBLIGATIONS SCHÉDULE 1E

1. Committee I.D. Number

SOULDOLL IL	+		t - 1 .f.	** 4
CANDIDATE COMMITTEE	2. Committee Name TaMES	Nicholas M	int election	COMMITTER
- Cabadala Manailas				

Inflancial institution to whom debt is owed. Check box to indicate whether 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. Debt #1 Corp? Yes James Hult 30NIb Ar leve Sterling Ats m I V890 6. Original Amount of Debt: \$ 4. Type: Loan Shall bank loan, name of endorser or guarantor: Amount Endorsed: \$ \$ 4. Type: Loan Shall bank loan, name of endorser or guarantor: Debt #2 Owed to or by: Shall bank loan, name of endorser or guarantor: Debt #2 Owed to or by: Shall bank loan, name of endorser or guarantor: Amount Endorsed: \$ \$ 97. Shall bank loan, name of endorser or guarantor: Amount Endorsed: \$ Shall bank loan, name of endorser or guarantor: Amount Endorsed: \$ \$ 38. \$ 50 Hi bank loan, name of endorser or guarantor: Amount Endorsed: \$ \$ 38.	This Colored to Service		·		
(Check either a or b. Use only for the purpose checked.) 3. Name and Malling Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether 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 debt is a bank loan, please of this peric (tem 6 min Item 8). Debt #1 Owed to or by: James Hunt 36 Nils Ar leve Sher ling Hts mi V89 b 4. Type: Loan 5. Date Debt Was Incurred: \$ -2 - 7011 6. Original Amount of Debt: \$ 4. Type: Loan The bank loan, name of endorser or guarantor: Debt #2 Owed to or by: James Hunt 36 Nils Ar leve Sher ling Hts Mi U89 b 4. Type: Loan 5. Date Debt Was Incurred: Sept 72, 2011 6. Original Amount of Debt: \$ 4. Type: Loan Sher ling Hts Mi U89 b Amount Endorsed: \$ FORGING Heart Sheriff Sh					
Check box to indicate whether 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. Corp? Yes 4. Type: Loan Section Sect	a <u>l X</u>]Debts and obligations owed <u>by</u> or forgiven the comm (Chec	mittee OR b. Debt ck either a or b. Use only for the pu	s and obligations owed <u>to</u> our prose checked.)	r forgiven <u>by</u> the co	mmittee.
Guarantors, if any. Debt #1 Corp? Yes 4. Type: LOAN \$ S Date Debt Was Incurred: \$ S S S S S S S S S	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	(Description) 5. Indicate date debt was incurred 6. Indicate original amount		payment to	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
A Type: LOAN \$		of debt			
36416 Ar leve Sterling Ats MI 1890 6. Original Amount of Debt: \$ 47.23 S If bank loan, name of endorser or guarantor: Debt #2 Corp? Yes Owed to or by: James Hunt 36416 Ar lene Sterling Hts MI 4830 6. Original Amount of Debt: \$ 4. Type: Lanu Sept 72, 2011 \$ 5. Date Debt Was Incurred: \$ 5. Date Debt Was Incurred: \$ 823, 01 \$ 923, 01 \$ FORGING FORGING Amount Endorsed: \$ Amount Endorsed: \$ Amount Endorsed: \$ \$ 4. Type: Lanu Sept 72, 2011 \$ 5. Debt #3 Owed to or by: \$ 4. Type: Lanu \$ 5. Debt #3 Owed to or by: \$ 4. Type: Lanu \$ 5. Debt #3 Owed to or by: \$ 5. Description of Poebt: \$ 5. Desc	Owed to or by:	4. Type: LOAN	\$		
Sterling Hts MIV8VD 6. Original Amount of Debt: \$ 47.23 If bank loan, name of endorser or guarantor: Debt #2 Corp? Yes Owed to or by: James Hunt Sept 72 2011 S. Manual Endorsed: \$ Sept 72 2011 S. Date Debt Was Incurred: S. Date Debt Was Incurre	· · · · · · · · · · · · · · · · · · ·	5. Date Debt Was Incurred:	\$		
Some of endorser or guarantor:	' '''	8-2-2011	•		117 23
If bank loan, name of endorser or guarantor: Debt #2	Sterling Hts MI 1830	6. Original Amount of Debt	•	\$	\$ 47, 5
Debt #2 Corp? Yes 4. Type: Land 10/16/201 \$ 795.00 Jame's Hout 5. Date Debt Was Incurred: \$ \$ \$ \$ \$ \$ \$ \$ \$,	s <u>47.23</u>	<u> </u>		FORGIVEN
Debt #2 Corp? Yes 4. Type: LOQN 10/16/201 \$ 795.00 Jame	If bank loan, name of endorser or guarantor:		\$	·	,
Owed to or by: 4. Type:	Dalutto O O		And	t ====================================	t
36416 Ar leve Sterling Hts M1 4830 Sept 72, 2011 \$ \$ \$ \$ \$ \$ \$ \$ \$		4. Type:	10/16/2018 795,00		
Sterling Hts M1 U83D 6. Original Amount of Debt: \$ \$ 923, 01 \$ FORGING	James Hunt	5. <u>Date Debt Was Incurred</u> :	\$		
\$ 823, 01 \$ FORGING If bank loan, name of endorser or guarantor:	36416 Arlene		•	7:6 c m	0001
FORGIN S Debt #3 Corp? Yes 4. Type: LOAN S S S S S S S S S	Sterling HISMI 4830		\$	\$ -195,=	1 s _ d 8. "
If bank loan, name of endorser or guarantor:		\$ 823,01	· · · · · · · · · · · · · · · · · · ·		FORGIVEN
Debt #3 Corp? Yes 4, Type: LOAN \$	If bank loan, name of endorser or quarantor				
Owed to or by: 4. Type: LOAN \$			Am	ount Endorsed: \$_	
	Owed to or by:	4. Type: <u>LOAN</u>	\$		
1000	James Hunt	5. <u>Date Debt Was Incurred</u> :	\$		
36416 Arlowe Jule 13, 2011 8	36416 Arlane				. 19.87
5 The state of the	Starling HAS MI		\$	\$	<u>\$/9, °/</u>
	9800	\$	\$		FORGIVEN
If bank loan, name of endorser or guarantor: Amount Endorsed: \$	If bank loan, name of endorser or quarantor:		Am	nount Endorsed: \$	i
/ who the choose control of the cont	· ·		7.01	.σ.σ. Επασίσου. φ_	
Page Subtotal (Outstanding debt)			Page Subtotal	(Outstanding debt)	95.11

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

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

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.



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 138 470

DEBTS AND OBLIGATIONS 1.C	ommittee I.D. Number	138 470		
COUEDIN E 4E			1 /	
CANDIDATE COMMITTEE 2.C	ommittee Name Saves N	icholas Hunt e	Plation co.	unitte
This Schedule itemizes:				
	mittee OR b. Debt ok either a or b. Use only for the pu	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 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: LOAN	10/16/2013 50		
James Hunt	5. <u>Date Debt Was Incurred</u> :	\$		
36416 Avlene Staling H1341 48310	8-70 - 201/ 6. Original Amount of Debt: \$ 67, 07	\$	s 50,00	\$
If bank loan, name of endorser or guarantor:		\$	1	
	T	Amo	ount Endorsed: \$	<u> </u>
Debt #2 Corp? Yes Owed to or by:	4. Type: <u>LONU</u>	\$		
James Hurt	5. Date Debt Was Incurred:	<u> </u>		
36416 Arlena	8 - 19 - 201 6. Original Amount of Debt:	\$	 	\$ 42.13
Stelling Ho Mi 48310	\$	\$		FORGIVEN
·		<u> </u>		
If bank loan, name of endorser or guarantor:	T	An	ount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type: <u>1090</u>	\$		
James Hunt	5. Date Debt Was Incurred:	\$		
	9-30-2011	\$. 41,50
36416 Allowe	6. Original Amount of Debt:	\$	\$	\$
Sterling HIS MI 4830	\$ 41,50	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Ar	nount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	100,70
(Co	mplete on last page of Schedule s	Grand Total of the following 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



DEBTS	AND	OBL	.IGA	TIONS
S	CHE	DUL	E 1E	

1. Committee I.D. Number / 38 470

OGITEDOET IF	_	11 1 / // /-	1 of a	
OVIADIDY IF COMMINITY	Committee Name James	MICHOLOS /TUNC	election con	<u>umittee</u>
This Schedule itemizes:				
a Debts and obligations owed <u>by</u> or forgiven the com (Che	mittee OR b. De	bts and obligations owed <u>to</u> purpose checked.)	or 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	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: James Hunt S6 Y16 Arcene Starling His MI 4830	4. Type: <u>LOG N</u> 5. <u>Date Debt Was Incurred</u> : 9-18-201 6. <u>Original Amount of Debt</u> \$	\$ \$ \$ \$ \$	\$	\$ 79, 14
If bank loan, name of endorser or guarantor:		.An	nount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by: If bank loan, name of endorser or guarantor:	4. Type:	\$\$\$	\$mount Endorsed: \$	\$FORGIVEN
Owed to or by: If bank loan, name of endorser or guarantor:	4. Type: 5. <u>Date Debt Was Incurred</u> : 6. <u>Original Amount of Debt</u> : \$	\$	\$smount Endorsed: \$_	\$FORGIVEN
		Page Subtota	l (Outstanding debt)	29,14
(Co	omplete on last page of Schedule	Grand Total showing amounts owed by	of all Schedules 1E or to the committee)	1980.95

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

Page <u>5</u> of <u>5</u>

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



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

2. Committee Name JOMES Nicholas Hust Election Committee - USE A SEPARATE SHEET FOR EACH EVENT -4. Number of Individuals Attending 3. Date Event Was Held 5. Type of Fund Raising Activity 6. Address and Name (If any) of the or Participating (whichever is place where the activity was held. greater) 36416 Arlene Sterling Hts MI 4830 33 Private Residence 7. Total Contributions 8. Other Receipts 9. Gross Receipts (Add lines 7 and 8) 10. Total Cost of Event (Total Cost includes In-Kind Contributions and All Expenditures Made For the Event) Check if event was a joint fund raiser and complete the following: Co-Sponsor(s) Contribution Split **Expenditure Split** (%) (%) 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. Committee I.D. Number



FUND RAISER SCHEDULE 1F

2. Committee Name James Nicholas Hout Election committee **CANDIDATE COMMITTEE** - USE A SEPARATE SHEET FOR EACH EVENT -4. Number of Individuals Attending 6. Address and Name (If any) of the 5. Type of Fund Raising Activity 3. Date Event Was Held place where the activity was held. or Participating (whichever is greater) JAMES HUNT 30416 Arland Sterling Hts MI 48310 Private Residence 7. Total Contributions 8. Other Receipts 9. Gross Receipts (Add lines 7 and 8) (IN KIND) 10. Total Cost of Event (Total Cost includes In-Kind Contributions and All Expenditures Made For the Event) Check if event was a joint fund raiser and complete the following: **Expenditure Split** Contribution Split Co-Sponsor(s) (%) (%) 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

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

1. Committee I.D. Number

Page Z of Z

Summary Page.