



**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: 07/18/16 to 08/22/16

1. Committee I.D. Number
77647

2. Committee Name
Michelle Bork for Trustee

4. Candidate Last Name **Bork** First Name **Michelle** M.I. **L**

4a. Office Sought Including District # or Community Served (If applicable)
Board Member - Local

4b. County of Residence **MONROE**

5. Committee's Mailing Address
**8153 Jackman Rd.
Temperance, MI 48182**

Area Code and Phone (419) 340-6151
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
**Michelle Bork
8153 Jackman Rd.
Temperance, MI 48182**

Area Code & Phone (419) 340-6151

7. Treasurer's Business Address
n/a

Area Code and Phone _____

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)
**Michelle Bork
8153 Jackman Rd.
Temperance, MI 48182**

Area Code and Phone (419) 340-6151

9. TYPE OF STATEMENT

9a. Pre-Election OR 9b. Post-Election

Pre-Election or Post-Election Statement relates to:

Primary
 General
 Convention
 Special
 School
 Caucus

Date of Election, Convention or Caucus
08/02/16

Required ONLY if candidate is not on the ballot

July Quarterly
 October Quarterly

9c. Annual Statement (_____) Coverage Year

9a. Amended

9. By _____, Secretary of the _____, effective to the _____, and no longer _____ the committee.

Effective date of dissolution

Note: The disposition of residual funds must be reported on _____ and the Summary Page.

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 Michelle Bork / _____ Date 08/22/2016
Type or Print Name Signature

Candidate Michelle Bork / _____ Date 08/22/2016
Type or Print Name Signature



1. Committee I.D. Number 77647

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Michelle Bork for Trustee

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>2,621.21</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$2,621.21</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>\$2,621.21</u>	(20.) \$ _____
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$171.00</u>	(21.) \$ _____
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ _____	(22.) \$ _____
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$1,761.71</u>	
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>\$1,761.71</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)	(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.) \$ <u>\$0.00</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$2,621.21</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$2,621.21</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$1,761.71</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$859.50</u> *	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77647
2. Committee Name Michelle Bork for Trustee

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 <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Mary Jo & Dave Swartz	\$ 320.00	\$ 320.00
5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate Agent</u> Employer <u>Self</u> Business Address <u>7701 Jackman Rd. Temperance, MI 48182</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Donna & Guy Schafer 1067 Stoneybrook Ln. Temperance, MI 48182	\$ 57.00	\$ 57.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Ron & Jewel Patton 1612 Huntcliffe Ct. Temperance, MI 48182	\$ 100.00	\$ 100.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Dan & Barb Nichols 2170 McMackin Rd. Madison, OH 44057	\$ 90.00	\$ 90.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization

Page Subtotal **\$567.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77647
2. Committee Name Michelle Bork for Trustee

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 <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Tom & Sandy Nichols 5843 Woodrow Dr. Sylvania, OH 43560	\$ <u>75.00</u>	\$ <u>75.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	Click Here for Memo Itemization <input type="button" value="v"/>	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Donovan Nichols 5205 Bridlington Dr. Toledo, OH 43623	\$ <u>175.00</u>	\$ <u>175.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Assistant Dean</u> Employer <u>University of Toledo</u> Business Address <u>Toledo, Ohio</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	Click Here for Memo Itemization <input type="button" value="v"/>	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Vicky Glenn 7725 Fir Dr. Temperance, MI 48182	\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	Click Here for Memo Itemization <input type="button" value="v"/>	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Mike Szyperski 4605 Weldwood Sylvania, OH 43560	\$ <u>95.00</u>	\$ <u>95.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	Click Here for Memo Itemization <input type="button" value="v"/>	

Page Subtotal **\$370.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77647
2. Committee Name Michelle Bork for Trustee

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 <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Gene Stock 9289 Crabb Rd. Temperance, MI 48182	\$ <u>98.00</u>	\$ <u>98.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
Click Here for Memo Itemization <input type="button" value="v"/>		
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Austin Mack 6388 Muirfield Dr. Temperance, MI 48182	\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
Click Here for Memo Itemization <input type="button" value="v"/>		
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Kristie Pudvan 1078 Mapleway Temperance, MI 48182	\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
Click Here for Memo Itemization <input type="button" value="v"/>		
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Rebecca Walters-Bardwell 8099 Jackman Rd. Temperance, MI 48182	\$ <u>380.00</u>	\$ <u>380.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>self employed</u> Employer <u>self</u> Business Address <u>8099 Jackman Rd.</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
Click Here for Memo Itemization <input type="button" value="v"/>		

Page Subtotal **\$528.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77647
2. Committee Name Michelle Bork for Trustee

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 <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Steve Lennex 7261 Forest Valley Rd. Lambertville, MI 48144	\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value="v"/>
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Mary Jo Save 2701 Meadowwood Toledo, OH 43606	\$ <u>43.00</u>	\$ <u>43.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value="v"/>
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Bob & Julie Hays 1078 Birchwood Dr. Temperance, MI 48182	\$ <u>70.00</u>	\$ <u>70.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value="v"/>
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Kimberly Bork 26765 Carronade #5105 Perrysburg, OH 43551	\$ <u>55.00</u>	\$ <u>55.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value="v"/>

Page Subtotal **\$193.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77647
2. Committee Name Michelle Bork for Trustee

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 <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Lauren Wuellner P843 County Rd. 8 Napoleon, OH 43545	\$ <u>70.00</u>	\$ <u>70.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	Click Here for Memo Itemization <input type="button" value="v"/>	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Bill & Bonnie Berry 11267 Jackman Rd. Samaria, MI 48177	\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	Click Here for Memo Itemization <input type="button" value="v"/>	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Brian & Michelle Rood 6846 Clearview St. Temperance, MI 48182	\$ <u>75.00</u>	\$ <u>75.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	Click Here for Memo Itemization <input type="button" value="v"/>	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Mike & Nathalie Jacobs 6698 Sandywell Dr. Temperance, MI 48182	\$ <u>75.00</u>	\$ <u>75.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	Click Here for Memo Itemization <input type="button" value="v"/>	

Page Subtotal **\$270.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77647
2. Committee Name Michelle Bork for Trustee

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 <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Debra Shinkle 9425 Secor Lambertville, MI 48144	\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value="v"/>
3. Contribution # 2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Shirley Bechtel 4430 Crystal Ridge Maumee, OH 43537	\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value="v"/>
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Kate Samento 23941 W. River Rd. Grand Rapids, OH 43522	\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value="v"/>
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: David & Sarah Dunnigan 354 W. Erie Rd. Temperance, MI 48182	\$ <u>95.00</u>	\$ <u>95.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value="v"/>

Page Subtotal **\$170.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77647
2. Committee Name Michelle Bork for Trustee

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 <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: James & Brenda Schuly 8220 Twin Creek Circle Temperance, MI 48182 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>25.00</u>	\$ <u>25.00</u>
Click Here for Memo Itemization <input type="button" value="v"/>		
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: John & Krisie Kortas 2420 W. Erie Rd. Temperance, MI 48182 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>None</u> Business Address <u>None</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>151.00</u>	\$ <u>151.00</u>
Click Here for Memo Itemization <input type="button" value="v"/>		
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Rich & Kelly Stewart 9014 Oakridge Dr. Temperance, MI 48182 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>
Click Here for Memo Itemization <input type="button" value="v"/>		
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Ronald & Cathleen McCutchen 4503 St. Anthony Rd. Temperance, MI 48182 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>
Click Here for Memo Itemization <input type="button" value="v"/>		

Page Subtotal **\$276.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77647
2. Committee Name Michelle Bork for Trustee

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 <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Carol Szyperski 2103 Woodmere Ct. Toledo, OH 43615	\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	Click Here for Memo Itemization <input type="button" value="v"/>	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Nicole Trimmer 1035 Hackman Rd. Temperance, MI 48182	\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	Click Here for Memo Itemization <input type="button" value="v"/>	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: David & Joanna Uhl 1355 Meanwell Rd. Dundee, MI 48131	\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	Click Here for Memo Itemization <input type="button" value="v"/>	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/25/16</u> Name & Address: Scott & Lauren Ruetz 2816 Sanibel Lambertville, MI 48144	\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	Click Here for Memo Itemization <input type="button" value="v"/>	

Page Subtotal **\$140.00**

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

Enter this total on
line 3a of Summary
Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 77647

CANDIDATE COMMITTEE

2. Committee Name Michelle Bork for Trustee

<p>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 <u>all</u> in-kind contributions.</p>	<p>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</p>	<p>7. Amount or Fair Market Value</p>	<p>8. Cumulative for Election Cycle (Through date in Item 5)</p>
---	---	---------------------------------------	--

Contribution # 1 PAC Receipt? Yes

Name & Address:
Stocks Sports Inc.
9289 Crabb Rd.
Temperance, MI 48182

If over \$100.00 cumulative, please provide:
Occupation: **shirt designer**
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 t-shirts

5. Date Of Receipt: 05/21/16

6. **Vendor Name & Address:**

Click Here for Memo Itemization

Fund Raiser Contribution

\$ 171.00 \$ 171.00

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:**

Click Here for Memo Itemization

Fund Raiser Contribution

Contribution #3 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:**

Click Here for Memo Itemization

Fund Raiser Contribution

Page Subtotal **\$171.00**

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) **\$171.00**

Enter this total
on line 6 of Summary
Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 77647
2. Committee Name Michelle Bork for Trustee

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Fundraiser Event Address <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/25/16</u> Date	<u>\$ 750.61</u> Click Here for Memo Itemization Type
Expenditure #2 Name Vistaprint Address Online <input type="checkbox"/> Fund Raiser	Purpose: <u>advertising literature</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/30/16</u> Date	<u>\$ 83.32</u> Click Here for Memo Itemization Type
Expenditure #3 Name Lambertville Hardware Address Secor Rd. Lambertville, MI 48144 <input type="checkbox"/> Fund Raiser	Purpose: <u>poles for signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/10/16</u> Date	<u>\$ 250.07</u> Click Here for Memo Itemization Type
Expenditure #4 Name Engraved Image Address Lewis Ave. Temperance, MI 48182 <input type="checkbox"/> Fund Raiser	Purpose: <u>name badge</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/01/16</u> Date	<u>\$ 12.56</u> Click Here for Memo Itemization Type
Expenditure #5 Name T-Wear Address P.O. Box 273 Temperance, MI 48182 <input type="checkbox"/> Fund Raiser	Purpose: <u>signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/14/16</u> Date	<u>\$ 665.15</u> Click Here for Memo Itemization Type

Subtotal this page **\$1,761.71**
Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$1,761.71**

Enter this total
on line 8a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77647
2. Committee Name Michelle Bork for Trustee

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 <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/03/16</u> Name & Address: Michelle Bork 8153 Jackman Rd. Temperance, MI 48182	\$ <u>159.89</u>	\$ <u>159.89</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Travel Agent</u> Employer <u>Travelmation LLC</u> Click Here for Memo Itemization Business Address <u>8153 Jackman Rd. Temperance, MI 48182</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address _____	\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Click Here for Memo Itemization Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address _____	\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Click Here for Memo Itemization Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address _____	\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Click Here for Memo Itemization Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		

Page Subtotal

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

--

Enter this total on
line 3a of Summary
Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 77647
2. Committee Name Michelle Bork for Trustee

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Colonial Sign & Display Address 5260 Lewis Ave. Toledo, OH 43612 <input type="checkbox"/> Fund Raiser	Purpose: <u>signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/03/16</u> Date	\$ <u>959.89</u>
Expenditure #2 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #3 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #4 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page **\$959.89**
Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$959.89**

Enter this total on line 8a of Summary Page



1. Committee I.D. Number 77647

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Michelle Bork for Trustee

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>159.89</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$159.89</u>	(18.) \$ <u>\$2,781.10</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _____	(19.) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>\$159.89</u>	(20.) \$ <u>\$2,781.10</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ _____	(21.) \$ <u>\$171.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ _____	(22.) \$ <u>\$171.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$959.89</u>	
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>\$959.89</u>	(23.) \$ <u>\$2,721.60</u>
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.) \$ <u>\$859.50</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$159.89</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$1,019.39</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$959.89</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$59.50</u> *	

COMPLETING THE CANDIDATE COMMITTEE COVER PAGE

ITEM 1: COMMITTEE I.D. NUMBER: Enter the committee's Campaign Finance Identification Number on each page. The committee's Identification Number appears on the receipt issued upon the submission of the committee's original Statement of Organization.

ITEM 2: COMMITTEE NAME: Enter the committee's official name as listed on the committee's Statement of Organization on each page.

ITEM 3: CAMPAIGN STATEMENT COVERAGE PERIOD: Enter the dates covered by this Campaign Statement.

ITEM 4: CANDIDATE NAME: Enter the candidate's full name (last name, first name, middle initial), the office sought by the candidate, the candidate's county of residence and the candidate's driver license number. If applicable, list the district or jurisdiction number or the name of the community served by the office.

ITEM 5: COMMITTEE MAILING ADDRESS: Enter the committee's mailing address and telephone number.

ITEM 6: TREASURER'S NAME AND ADDRESS: Enter the committee treasurer's full name, residential address and home phone number.

ITEM 7: TREASURER'S BUSINESS ADDRESS: Enter the committee treasurer's business address and phone number.

ITEM 8: DESIGNATED RECORD KEEPER: If the committee has a designated record keeper, enter his or her full name, mailing address and phone number.

ITEM 9: TYPE OF STATEMENT: Check the appropriate box to indicate the type of Campaign Statement being filed. If the committee is dissolving, o ctn\he'ej gen'idqz'"cpf "gpvt"cp"ghgevkxg"f cvg"qh'f kuqnlwkp0

ITEM 10: VERIFICATION: The candidate and the treasurer or designated record keeper must verify that all reasonable diligence was used in completion of the Campaign Statement and attached Schedules, and that the contents of the statement are true, accurate and complete to the best of their knowledge and belief. Enter the candidate's and the treasurer's names, or the candidate's and the designated record keeper's names where indicated. The Cover Page must be signed and dated by the candidate and the committee's treasurer or designated record keeper. If the candidate is serving as the committee's treasurer, the candidate signs once on the line for the candidate's signature.

P qvgr

ÉC"eqo o kvgg"vj cv'f qgu'pqvj cxg"c"Tr gr qt vpi "Y ckg't'o wuv'hkg'cmi'tgs wkt gf 'Eco r cki p"Ucvgo gpw0""
ÉVj g'Eco r cki p"Ucvgo gpw'o wuv'kpenwf g'cmi'cr r rkecdrg"Uej gf wgu0""
ÉF k'geve'epvt'kdwkqpu.'lp/nkpf "eqvt'kdwkqpu.'rqcpu."gZR gpf kwT gu."cpf "qwu'wcpf kpi 'f gdu'eqwpv'ci kpu'vj g"&3.222"
"Tr gr qt vpi "Y ckg't'vj tguj qrf 0"
ÉK'cp{"qh'vj g'kphqto cvkqp'rkugf 'lp'kgo u'4.'6.'7.'8.'9.'qt': 'j cu'ej cpi gf 'ukpeg'vj g'kphqto cvkqp'y cu'uj qy p'qp'vj g"
"eqo o kvgg'u"Ucvgo gpv'qh'Qti cpk cvkqp."cp"co gpf o gpv'q'vj g"Ucvgo gpv'qh'Qti cpk cvkqp'uj qwf "cee'qo r cp{"vj ku"
"Eco r cki p"Ucvgo gpw0""
ÉK'c'tgs wguv'ht'c"Tr gr qt vpi "Y ckg't'ku'pqvt'gegk'gf "qp"qt'dghqtg'vj g'hk'kpi 'f gcf nkg'qh'c'tgs wkt gf 'eco r cki p'ucvgo gpv'
vj cv'eco r cki p'ucvgo gpv'ecppqv'dg'y ckg'f 0"

COMPLETING THE CANDIDATE COMMITTEE SUMMARY PAGE

ITEM 3a: CONTRIBUTIONS: Enter in Column I, the grand total of direct contributions listed on the Itemized Contributions Schedule, 1A. Enter the cumulative amount of the direct contributions received for the election cycle on **Line 18** of Column II.

ITEM 4: OTHER RECEIPTS: Enter in Column I, the grand total of "other receipts" listed on the Itemized Other Receipts Schedule, 1A-1. Enter the cumulative amount of "other receipts" received for the election cycle on **Line 19** in Column II.

ITEM 5: TOTAL CONTRIBUTIONS AND OTHER RECEIPTS: Enter in Column I, the sum of column I, Lines 3c and 4. Enter in Column II, **Line 20**, the sum of Column II, Lines 18 and 19.

ITEM 6: IN-KIND CONTRIBUTIONS: Enter in Column I, the grand total of in-kind contributions reported in Column 7 of the Itemized In-kind Contributions Schedule, 1-IK. Enter the cumulative amount for this election cycle on **Line 21**, Column II.

ITEM 7: IN-KIND EXPENDITURES: Enter in Column I, the grand total of in-kind expenditures reported in Column 6 of the Itemized In-kind Expenditures Schedule, 1B-IK. Enter the cumulative amount for this election cycle on **Line 22**, Column II.

ITEM 8a: ITEMIZED EXPENDITURES: Enter in Column I, the grand total of expenditures listed on the Itemized Expenditures Schedule, 1B. **ITEM 8b: ITEMIZED GET-OUT-THE-VOTE ACTIVITIES:** Enter in Column I, the grand total of get-out-the-vote expenditures reported in Column 6 of Schedule B-G. **ITEM 8c: UNITEMIZED EXPENDITURES:** Enter in Column I, the grand total of expenditures of \$50.00 or less that were not itemized on Schedule 1B.

ITEM 9: TOTAL EXPENDITURES: Enter in Column I, the sum of Lines 8a, 8b and 8c. Enter the cumulative amount of expenditures made by the committee for the election cycle on **Line 23** in Column II.

ITEM 10a: ITEMIZED INCIDENTAL OFFICE EXPENSE DISBURSEMENTS: Enter in Column I, the total of incidental office expense disbursements reported on Schedule 1C.

ITEM 10b: UNITEMIZED INCIDENTAL OFFICE EXPENSE DISBURSEMENTS: Enter in Column I, the total of incidental office expense disbursements of \$50.00 or less that were not itemized on Schedule 1C.

ITEM 11: TOTAL INCIDENTAL OFFICE EXPENSE DISBURSEMENTS: Enter in Column I, the sum of Lines 10a and 10b. Enter the cumulative amount of incidental office expense disbursements made by the committee during this election cycle on **Line 24** in Column II.

ITEM 12a: DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE: Enter the grand total of debts and obligations owed by the committee at the closing date of the Campaign Statement which were listed on the Debts and Obligations Schedule, 1E.

ITEM 12b: DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE: Enter the grand total of the debts and obligations owed to the committee at the closing date of the Campaign Statement which were listed on the Debts and Obligations Schedule, 1E.

ITEM 13: ENDING BALANCE: Enter the "Ending Balance" from the last Campaign Statement filed by the committee. This is the "Beginning Balance" for the current reporting period. If this is the first Campaign Statement filed enter "Zero."

ITEM 14: TOTAL CONTRIBUTIONS AND OTHER RECEIPTS: Enter the "Total Contributions and Other Receipts" received during the period covered by the Campaign Statement being completed (Column I, line 5).

ITEM 15: SUB-TOTAL: Enter the sum of Lines 13 and 14.

ITEM 16: TOTAL EXPENDITURES: Add together the expenditure amount in Column I, line 9 and the disbursement amount in Column I, line 11.

ITEM 17: ENDING BALANCE: Subtract line 16 from line 15. The result should reflect the ending cash balance in the committee's checking account on the closing date of the Campaign Statement. If the ending balance is a negative amount, recheck the math on each Schedule. A negative balance indicates that the committee has reported spending money that is not reported as having been received.

COMPLETING CANDIDATE COMMITTEE SCHEDULE 1B, ITEMIZED EXPENDITURES

ITEM 3: NAME AND ADDRESS OF PERSON OR VENDOR PAID: Enter the name and address of :

- 1) Each individual or business to whom the committee made an expenditure of more than \$50.00 through a single expenditure or a series of expenditures made during the period covered by the Campaign Statement.
- 2) Each individual or business to whom the committee made an expenditure in any amount during the period covered by the Campaign Statement which was made to support or oppose a ballot question.
- 3) Each committee to whom the committee made an expenditure in any amount during the period covered by the Campaign Statement. If the expenditure was made to support or oppose a ballot proposal, it must be made to influence the nomination or election of the candidate whose committee is making the expenditure. In the purpose field, identify the proposal and indicate whether it is a statewide, multi-county or single county issue. If listing a single county issue, list the county involved. If listing a multi-county issue, list the county where the greatest number of electors eligible to vote on the issue reside.

Report additional detail information for this expenditure as a Memo Itemization as explained below.

- **MEMO ITEMIZATIONS.** Report the gross expenditure made by the committee with the notation “**Memo Itemization Below**” written above the name of the person, business or vendor to whom the payment was made by the committee, the date of the payment, and the total amount paid.
- In the space for the next expenditure record immediately following this entry, enter the notation “**Memo Itemization**” and indicate the ballot proposal involved. Check the applicable boxes for in-kind or independent, support or oppose and enter the date of the expenditure. Report the allocated amount for the proposal in parenthesis as a reminder that it is not to be added into the total again. Enter the cumulative expenditure amount for that proposal (for the election) through the date of the expenditure being itemized. Repeat until the itemization is completed for each proposal related to the expenditure being itemized.

ITEM 4: PURPOSE: Describe the purpose of the expenditure. Check the box if the expenditure was made as a payment on a debt or obligation owed by the committee that was reported on a previous Campaign Statement.

ITEM 5: DATE OF EXPENDITURE: Enter the date the expenditure was made.

ITEM 6: AMOUNT OF EXPENDITURE: Enter the amount of the expenditure.

COMPLETING CANDIDATE COMMITTEE SCHEDULE 1A, ITEMIZED CONTRIBUTIONS

ITEM 3: NAME AND ADDRESS: Enter the complete name and address of each individual, committee, group, business, firm or other type of organization that made a contribution in any amount during the period covered by the Campaign Statement. If the contribution is from an individual, enter last name, first name, and middle initial. If the contribution is from a committee (Candidate, Political, Independent or Political Party), enter the committee name and address; do not enter the name of the individual who signed the check. If the contribution is from a Political Committee or an Independent Committee, check the "PAC Receipt? Yes" box. If the contribution is from any source that is not a PAC, leave the box unmarked. If the contribution is from a partnership that has requested attribution to individual partners, the individuals' names and addresses are reported with their proportion of the contribution. Do not report the name of the partnership. If the contribution is from a person or group that is not an individual or a registered committee, or if the contribution is from an out-of-state committee, the name and address of the committee is reported on Schedule 1A with the notation "Memo Itemization Below" written above the name of the contributor. In the space for the next contribution record immediately following this entry enter the notation "Memo Itemization" and the name and address, date and amount for each person whose contribution was a part of the total contribution.

ITEM 4: DATE OF RECEIPT: Enter the date the contribution was actually received by the treasurer, designated record keeper or other agent designated by the treasurer. Do not enter the date the check was written or the date the contribution was deposited. Only report on the Schedule the contributions received during the period covered by the Campaign Statement.

ITEM 5: CONTRIBUTOR'S OCCUPATION, EMPLOYER, and BUSINESS ADDRESS: Complete if the contributor's cumulative contribution for the election cycle exceeds \$100.00. It applies only to individuals; do not make an entry in the item if the reported contribution is from a committee. If the contribution is from an unincorporated business, use this section to indicate "Not Incorporated."

TYPE OF CONTRIBUTION: There are only two types of contributions of money: DIRECT contributions and LOANS from a person (a person other than a financial institution in the ordinary course of business). Check the appropriate box for each contribution. If the contribution is a loan from a person, it must also be reflected on Schedule 1E, Debts and Obligations, as a debt if there is an outstanding balance on the closing date of the Campaign Statement. Check both the **Direct** box and the **Loan From a Person** box. If the contribution was received at a fund raiser or as the purchase price of a ticket to the recipient candidate's fund raising event, check both the **Direct** box and the **Fund Raiser** box.

ITEM 6: AMOUNT OF CONTRIBUTION: List each contribution separately by date, even if two or more contributions are received from the same person.

ITEM 7: CUMULATIVE FOR THE ELECTION CYCLE: Enter the cumulative amount of all contributions received from the contributor for the election cycle through the date of the contribution being reported. Also include the value of any in-kind contributions of goods or services received through this date from the contributor when calculating the cumulative amount.

COMPLETING CANDIDATE COMMITTEE SCHEDULE 1-IK,
ITEMIZED IN-KIND CONTRIBUTIONS

ITEM 3: CONTRIBUTOR'S NAME AND ADDRESS: If the in-kind contribution is from an individual, please enter last name first. If the contribution is from a Political Committee or an Independent Committee, check the "PAC Receipt? "Yes" box. If the contribution is from any other source, leave the box unmarked.
CONTRIBUTOR'S OCCUPATION, EMPLOYER, AND BUSINESS ADDRESS: Complete this item only if the cumulative value of in-kind and direct contributions from the contributor exceeds \$100.00 in a calendar year. If the in-kind contribution is received in relation to a fund raising event, check the "Fund Raiser" Box.

ITEM 4: TYPE OF IN-KIND CONTRIBUTION: Check one of the five indicated categories for each in-kind contribution. **DESCRIPTION:** Enter a brief description of each in-kind contribution that identifies the goods or services contributed.

ITEM 5: DATE OF RECEIPT: Enter the date the in-kind contribution was received. The date entered must be within the period covered by the Campaign Statement.

ITEM 6: VENDOR NAME AND ADDRESS: If the in-kind contribution consists of goods or services purchased on behalf of the committee by another person, enter the name and address of the vendor or person where the goods or services were purchased.

ITEM 7: AMOUNT: Enter the fair market value of the contribution; if the contribution was purchased, enter the purchase price.

ITEM 8: CUMULATIVE FOR ELECTION CYCLE: Add the value of the in-kind contribution to other contributions made by the same contributor during the election cycle. The contributions are cumulative in date order.