



**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: 6-1-2016 to 7-17-2016

<p>1. Committee I.D. Number</p> <p>2. Committee Name <u>COMMITTEE TO ELECT GEORGE WELLING</u></p>	<p>4. Candidate Last Name <u>WELLING</u> First Name <u>GEORGE</u> M.I.</p> <p>4a. Office Sought Including District # or Community Served (If applicable) <u>BEDFORD TOWNSHIP TRENSE BOARD TRUSTEE</u></p> <p>4b. County of Residence <u>MONROE</u></p>
<p>5. Committee's Mailing Address <u>8390 LAMBERT DR. LAMBERTVILLE, MI 48144</u></p> <p>Area Code and Phone <u>419-779-7246</u> If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.</p>	<p>6. Treasurer's Name & Residential Address <u>DALE BARTON 7836 SUMMERFIELD RD. LAMBERTVILLE, MI 48144</u></p> <p>Area Code & Phone <u>734 854 3825</u></p>
<p>7. Treasurer's Business Address</p> <p>Area Code and Phone _____</p>	<p>8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)</p> <p>Area Code and Phone _____</p>

16 JUL 22 2:14
RECEIVED
MONROE, MI 48131

<p>9. TYPE OF STATEMENT</p> <p>9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus</p> <p>Date of Election, Convention or Caucus <u>8-2-2016</u></p>	<p>Required ONLY if candidate is not on the ballot for the current year:</p> <p><input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly</p> <p>9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year</p> <p>9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)</p>	<p>9e. Dissolution of Candidate Committee</p> <p><input type="checkbox"/> By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no lates fees or has any outstanding debt.</p> <p>Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.</p> <p>Effective date of dissolution _____</p> <p>Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.</p>
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10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

<p>Current Treasurer or Designated Record keeper <u>DALE BARTON</u></p> <p>Type or Print Name</p>	<p><u>[Signature]</u></p> <p>Signature</p>	<p>Date <u>7/20/16</u></p>
<p>Candidate <u>GEORGE WELLING</u></p> <p>Type or Print Name</p>	<p><u>[Signature]</u></p> <p>Signature</p>	<p>Date <u>7/20/16</u></p>



1. Committee I.D. Number 80047

2. Committee Name: Committee to elect George Weeding

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>1500.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>1500.00</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>1500.00</u>	(20.) \$ _____
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>155.80</u>	(21.) \$ _____
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ _____	(22.) \$ _____
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>1630.66</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>1630.66</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.) \$ <u>721.30</u>	
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-</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>1655.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>1655.00</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>1630.66</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>24.34</u>	



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 80047
2. Committee Name COMMITTEE TO ELECT GEORGE WELLING

This Schedule itemizes:
a. Debts and obligations owed by or forgiven the committee OR b. Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. <small>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.</small>	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 5 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: <u>GEORGE WELLING</u> <u>8390 LAMBERT</u> <u>LAMBERTVILLE, MI</u> <u>48144</u>	4. Type: <u>PURCHASED OFFICE MATERIAL</u> 5. <u>Date Debt Was Incurred:</u> <u>7/16/16</u> 6. <u>Original Amount of Debt:</u> <u>\$ 47.39</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0</u>	\$ <u>47.39</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Page Subtotal (Outstanding debt)				<u>47.39</u>
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 80047
2. Committee Name COMMITTEE TO ELECT GEORGE WELLING

This Schedule itemizes:

a. Debts and obligations owed by or forgiven the committee OR b. Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser 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? <input type="checkbox"/> Yes Owed to or by: <u>GEORGE WELLING</u> <u>8390 LAMBERT</u> <u>LAMBERTVILLE MI</u> <u>48144</u>	4. Type: <u>PURCHASE</u> <u>OF NAME TIXS</u> 5. Date Debt Was Incurred: <u>6/28/16</u> 6. Original Amount of Debt: <u>\$ 27.45</u>	\$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0</u>	\$ <u>27.45</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <u>GEORGE WELLING</u> <u>8930 LAMBERT</u> <u>LAMBERTVILLE, MI</u> <u>48144</u>	4. Type: <u>PURCHASED</u> <u>SIGNS</u> 5. Date Debt Was Incurred: <u>6/30/16</u> 6. Original Amount of Debt: <u>\$ 491.46</u>	\$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0</u>	\$ <u>491.46</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: <u>GEORGE WELLING</u> <u>8930 LAMBERT</u> <u>LAMBERTVILLE, MI</u> <u>48144</u>	4. Type: <u>PAID FOR</u> <u>WEBSITE</u> 5. Date Debt Was Incurred: <u>7/3/16</u> 6. Original Amount of Debt: <u>\$ 155.00</u>	\$ _____ \$ _____ \$ _____ \$ _____	\$ <u>155.00</u>	\$ <u>0</u> <input checked="" type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) ~~673.41~~ 578.91
Grand Total of all Schedules 1E 721.30
(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.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 80047
2. Committee Name COMMITTEE TO ELECT GEORGE WELLING

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 Name & Address: <u>MIKE NELSON</u> <u>7663 DOUGLAS</u> <u>LAMBERTVILLE, MI 48144</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/8/16</u>	\$ <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 type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>GEORGE WELLING</u> <u>8390 LAMBERT DR.</u> <u>LAMBERTVILLE, MI 48144</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/9/16</u>	\$ <u>400.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>DRIVER</u> Employer <u>FINISH MASTER</u> Business Address <u>1803 ADAMS ST. TOLEDO, OH</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>GREG OBERIE</u> <u>7624 VERNA</u> <u>LAMBERTVILLE, MI 48144</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/6/16</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 type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>GARY LAMUNYON</u> <u>1126 FIRECREEK CT.</u> <u>TEMPERANCE, MI 48182</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/6/16</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 type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 460.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule) 1500.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 30047

2. Committee Name COMMITTEE TO ELECT GEORGE WELLING

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.

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 6/6/16

Name & Address: GEORGE LIND
404 HERMAN PL.
TOLEDO, OH 43612

6. Amount \$ 5.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 2 PAC Receipt? YES 4. Date of Receipt 6/20/16

Name & Address: DALE BARTON
7836 SUMMERFIELD RD.
LAMBERTVILLE, MI 48144

6. Amount \$ 50.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 6/20/16

Name & Address: TOM MEINHART
2025 STATELINE
TEMPERANCE, MI 48182

6. Amount \$ 250.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 6/20/16

Name & Address: GEORGE WELLING
8390 LAMBERT DR.
LAMBERTVILLE, MI 48144

6. Amount \$ 180.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

5. If over \$100.00 cumulative, please provide: Occupation DRIVER Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

Page Subtotal 485.00

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

Enter this total on _____



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 80047
2. Committee Name COMMITTEE TO ELECT GEORGE WEEM

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)
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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 7/1/16
Name & Address: DAVE BODETTE
7146 EAGLE POINT LANE
TEMPERANCE, MI 48182

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

6. Amount: \$ 50.00 \$ _____
7. Cumulative: \$ _____

[Click Here for Memo Itemization](#)

3. Contribution # 2 PAC Receipt? YES 4. Date of Receipt 7/1/16
Name & Address: DAWN BARTON
7836 SUMMERFIELD RD.
LAMBERTVILLE, MI 48144

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

6. Amount: \$ 5.00 \$ _____
7. Cumulative: \$ _____

[Click Here for Memo Itemization](#)

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 7/8/16
Name & Address: DR. DENNIS WARNER
8941 LEWIS AVE.
TEMPERANCE, MI 48182

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

6. Amount: \$ 100.00 \$ _____
7. Cumulative: \$ _____

[Click Here for Memo Itemization](#)

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7/12/16
Name & Address: TIM ZUCK
4231 LITTLE STREAMS
LAMBERTVILLE, MI 48144

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

6. Amount: \$ 50.00 \$ _____
7. Cumulative: \$ _____

[Click Here for Memo Itemization](#)

Page Subtotal 205.00
Grand Total of All Schedules 1A
(Complete on last page of Schedule)
Enter this total on _____



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 80047
2. Committee Name COMMITTEE TO ELECT GEORGE WELLING

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 7/6/16
Name & Address: KYLIE WELLING
3089 CHISHOLM TR.
CHELSEA, MI 48118

6. Amount: \$ 50.00 \$ _____

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

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/11/16
Name & Address: MARGERY COUSINO
7849 COMANCHE TR.
TEMPERANCE, MI 48182

6. Amount: \$ 50.00 \$ _____

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

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 7/7/16
Name & Address: AMY PANOZZO
1042 BEAR LAKE RD.
MUSKEGON, MI 49445

6. Amount: \$ 100.00 \$ _____

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

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7/11/16
Name & Address: DOUG POMPLI
3345 QUAIL HOLLOW
LAMBERTVILLE, MI 48144

6. Amount: \$ 50.00 \$ _____

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 250.00

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

Enter this total on _____



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 30047

2. Committee Name COMMITTEE TO ELECT GEORGE WELLS

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 7/6/16
Name & Address: RIKH SCHROEDER
6809 LOCKMILL RD.
TEMPERANCE, MI 48182

\$ 50.00 \$ _____

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/6/16
Name & Address: DENNIS OSWALT
3201 SPRING BROOK DR.
LAMBERTVILLE, MI 48144

\$ 50.00 \$ _____

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #3 PAC Receipt? YES 4. Date of Receipt _____
Name & Address: _____

\$ _____ \$ _____

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #4 PAC Receipt? YES 4. Date of Receipt _____
Name & Address: _____

\$ _____ \$ _____

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

Page Subtotal 100.00

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

Enter this total on _____



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 80047

2. Committee Name COMMITTEE TO ELECT GEORGE WELLER

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>HARLAND CLARKE</u> Address <u>15455 LA CANTERA PKWY.</u> <u>SAN ANTONIO, TX 78256</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>CHECKS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/22/16</u> Date	<u>24.05</u>
Expenditure #2 Name <u>H.E.L.P. PRINTERS, INC.</u> Address <u>9673 LEWIS AVE.</u> <u>TEMPERANCE, MI 48182</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>POST CARDS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/20/16</u> Date	<u>\$ 329.25</u>
Expenditure #3 Name <u>MAIL WORKS II</u> Address <u>2 N. WESTWOOD</u> <u>TOLEDO, OH 43607</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>POST CARD</u> <u>POSTAGE & SORTING</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/15/16</u> Date	<u>\$ 556.06</u>
Expenditure #4 Name <u>ENGRAVED IMAGE</u> Address <u>6906 LEWIS AVE.</u> <u>TEMPERANCE, MI 48182</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>NAME TAGS</u> <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/23/16</u> Date	<u>\$ 27.45</u>
Expenditure #5 Name <u>H.E.L.P. PRINTERS</u> Address <u>9673 LEWIS AVE</u> <u>TEMPERANCE, MI 48182</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>YARD SIGNS</u> <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/30/16</u> Date	<u>\$ 491.46</u>

Subtotal this page 1428.27

Grand Total of all Schedules 1B
(Complete on last page of Schedule) 1630.66

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 80047

2. Committee Name COMMITTEE TO ELECT GEORGE WELLING

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>WIX.COM</u> Address <u>PO BOX 40190 SAN FRANCISCO, CA</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>WEB PAGE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/3/16</u> Date	<u>\$ 155.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>OFFICE DEPOT STORE 6113</u> Address <u>845 W. ALEXIS RD. TOLEDO, OH 43612</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>OFFICE SUPPLIES</u> <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/16/16</u> Date	<u>\$ 47.39</u> Click Here for Memo Itemization Type
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	\$ _____ Click Here for Memo Itemization Type
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	\$ _____ Click Here for Memo Itemization Type
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	\$ _____ Click Here for Memo Itemization Type

Subtotal this page 202.39

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

Enter this total



ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK

1. Committee I. D. Number 20047
2. Committee Name COMMITTEE TO ELECT GEORGE WELLING

CANDIDATE COMMITTEE

3. Name and Address from whom received if contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: <u>DRIVER</u> Employer Name & Business Address: <u>FINISH MASTER</u> <u>1808 ADAM ST.</u> <u>TOLEDO, OH.</u> <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>WED PAGE</u> 5. Date Of Receipt: <u>7/3/2016</u> 6. Vendor Name & Address: <u>WIX.COM</u> <u>PO BOX 40190</u> <u>SAN FRANCISCO, CA</u>	\$ <u>155.00</u>	
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address:	\$ _____	
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address:	\$ _____	

Page Subtotal 155.00

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) 155.00

Enter this total
on line 6 of Summary
Page