MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

# CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 5/1/2012 to 7/27/12

1. Committee I.D. Number 7766

2. Committee Name
COMMITTEE TO ELECT PAUL FRANCIS BEDFORD TOWNSHIP TREASURER

4. Candidate Last Name FRANCIS First Name PAUL M.I. R.

4a. Office Sought Including District # or Community Served (If applicable)
BEDFORD TOWNSHIP TREASURER

4b. County of Residence MONROE

5. Committee's Mailing Address
3266 CHANSON VALLEY DRIVE
LAMBERTVILLE, MI 48144

Area Code and Phone (734) 854-3266

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
GARNET S. FRANCIS
3266 CHANSON VALLEY DR.
LAMBERTVILLE, MI 48144

Area Code & Phone (734) 854-3266

7. Treasurer's Business Address
3266 CHANSON VALLEY DRIVE
LAMBERTVILLE, MI 48144

Area Code and Phone (734) 854-3266

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)

Area Code and Phone

9. TYPE OF STATEMENT

9a. [X] Pre-Election OR 9b. [ ] Post-Election

Pre-Election or Post-Election Statement relates to:

[X] Primary [ ] General
[ ] Convention [ ] School
[ ] Special [ ] Caucus

Date of Election, Convention or Caucus
8/7/12

9c. [ ] Annual Statement (_____ Coverage Year)

9d. [ ] Amendment to Campaign Statement (Complete item 9a, 9b, 9c or 9e to indicate which Statement is being amended)

9e. [ ] Dissolution of Candidate Committee

Effective Date of Dissolution

By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the $1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.

10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Record keeper GARNET S. FRANCIS (Type or Print Name) Garnet Francis (Signature) Date 7/27/2012

Candidate PAUL R. FRANCIS (Type or Print Name) Paul Francis (Signature) Date 7/27/12

Authority granted under P.A. 388 of 1976

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 77661

# SUMMARY PAGE
# CANDIDATE COMMITTEE

2. Committee Name COMMITTEE TO ELECT PAUL FRANCIS ADOPTED TOWNSHIP TRUSTEE 2012

| RECEIPTS | | Column I This Period | Column II Cumulative this election cycle |
|---|---|---|---|
| 3. Contributions | | | |
| a. Itemized (Schedule 1A - Column 6) | (3a.) $ | 6,545.00 | |
| b. Unitemized (less than $20.01 each - no Schedule) | (3b.) $ | NOT APPLICABLE | |
| c. Subtotal of "Contributions" | (3c.) $ | 6,545.00 | (18.) $ 6,545.00 |
| 4. Other Receipts (Schedule 1A-I, Column 6) | (4.) $ | — | (19.) $ — |
| 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) | (5.) $ | 6,545.00 | (20.) $ 6,545.00 |
| **IN-KIND CONTRIBUTIONS & EXPENDITURES** | | | |
| 6. In-Kind Contributions (Schedule 1-IK, Column 7) | (6.) $ | 57.25 | (21.) $ 57.25 |
| 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) | (7.) $ | — | (22.) $ — |
| **EXPENDITURES** | | | |
| 8. Expenditures | | | |
| a. Itemized (Schedule 1B, Column 6) | (8a.) $ | 5,413.20 | |
| 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.) $ | 5,413.20 | (23.) $ 5,413.20 |
| **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.) $ | 0 |
| 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) | (14.) + $ | 6,545.00 |
| 15. SUBTOTAL Add lines 13 and 14 | (15.) = $ | 6,545.00 |
| 16. Amount expended during reporting period (Add lines 9 and 11) | (16.) - $ | 5413.20 |
| 17. ENDING BALANCE (Subtract line 16 from line 15) | (17.) $ | 1,131.80 |

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

# ITEMIZED CONTRIBUTIONS
## SCHEDULE 1A
## CANDIDATE COMMITTEE

1. Committee I.D. Number 77161

2. Committee Name COMMITTEE TO ELECT PAUL FRANCIS BEDFORD TOWNSHIP TREASURER

| 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 6/6/12
Name & Address:
JOHNSON, RONALD R.
7800 MONROE STREET, BLDG. A
SYLVANIA, OH 43560

$ 100.00 $ 100.00

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 6/19/12
Name & Address
O'DELL, LAWRENCE
7264 CINGEN ROAD
TEMPERANCE, MI 48182

$ 100.00 $ 100.00

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 7/7/12
Name & Address:
SAHOCKMAN, JOAN
1393 WINDING WAY
TEMPERANCE, MI 48182

$ 25.00 $ 25.00

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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7/7/12
Name & Address
ZEILER, JOHN
1131 BRANDYWINE ST.
TEMPERANCE, MI 48182

$ 20.00 $ 20.00

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

| | |
|---|---|
| Page Subtotal | 245.00 |
| Grand Total of All Schedules 1A (Complete on last page of Schedule) | |

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

# ITEMIZED CONTRIBUTIONS
## SCHEDULE 1A
## CANDIDATE COMMITTEE

1. Committee I.D. Number 77661

2. Committee Name COMMITTEE TO ELECT PAUL FRANCIS BEDFORD TOWNSHIP TREASURER

| 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 7/7/12
Name & Address:
BECKER, JOHN
7777 HIDDEN VALLEY DR.
LAMBERTVILLE, MI 48144

$ 100.00 $ 100.00

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 7/7/12
Name & Address
DELANEY, MICHELE
1857 BRAGDEN DR.
TEMPERANCE, MI. 48182

$ 25.00 $ 25.00

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 7/7/12
Name & Address:
HOOPER, KIM
1343 BRANDYWINE ST.
TEMPERANCE, MI 48182

$ 25.00 $ 25.00

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 # 4 PAC Receipt? ☒ YES 4. Date of Receipt 7/7/12
Name & Address
COMM. TO ELECT RICK STEINER BEDFORD TWP. TRUSTEE
6963 PHEASANT VIEW DR.
TEMPERANCE, MI 48182

$ 25.00 $ 25.00

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

Page Subtotal 175.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

# ITEMIZED CONTRIBUTIONS
## SCHEDULE 1A
## CANDIDATE COMMITTEE

1. Committee I.D. Number 77661
2. Committee Name COMMITTEE TO ELECT PAUL FRANCIS SYLVANIA TOWNSHIP TREASURER

| 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 7/9/12<br>Name & Address:<br>GREEN, PEARL ALBERT<br>5819 JACKMAN RD.<br>TEMPERANCE, MI 48182<br>5. If over $100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser | $ 25.00 | $ 25.00<br>Click Here for Memo Itemization |
| 3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7/30/12<br>Name & Address<br>FRANCIS, PAUL R.<br>3266 CHANSON VALLEY DR<br>LAMBERTVILLE, MI 48144<br>5. If over $100.00 cumulative, please provide:<br>Occupation _____ Employer _____<br>Business Address _____<br>Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser | $ 100.00 | $ 100.00<br>Click Here for Memo Itemization |
| 3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 8/14/12<br>Name & Address:<br>FRANCIS, PAUL R.<br>3266 CHANSON VALLEY DR<br>LAMBERTVILLE, MI 48158<br>5. If over $100.00 cumulative, please provide:<br>Occupation CPA Employer SELF-EMPLOYED<br>Business Address 5800 MONROE ST, BLDG A, SYLVANIA, OH 43560<br>Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser | $ 2000.00 | $ 2,100.00<br>Click Here for Memo Itemization |
| 3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 8/21/12<br>Name & Address<br>FRANCIS, PAUL R.<br>3266 CHANSON VALLEY DR<br>LAMBERTVILLE, MI 48144<br>5. If over $100.00 cumulative, please provide:<br>Occupation CPA Employer SELF-EMPLOYED<br>PAUL R. FRANCIS, CPA<br>5800 Monroe St. — Sylvania, Ohio 43560<br>Business Address _____<br>Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser | $ 2000.00 | $ 4,100.00<br>Click Here for Memo Itemization |

Page Subtotal $ 4,125.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

# ITEMIZED CONTRIBUTIONS
## SCHEDULE 1A
## CANDIDATE COMMITTEE

1. Committee I.D. Number 77641
2. Committee Name COMMITTEE TO ELECT PAUL FRANCIS BERRIEN TOWNSHIP TREASURER

| 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 6/29/12
Name & Address:
FRANCIS, PAUL R.
3166 CHANSON VALLEY DR.
CANADONVILLE, MI 48144

$ 2,000.00 $ 6,100.00

5. If over $100.00 cumulative, please provide:
Occupation CPA Employer SELF EMPLOYED
PAUL R. FRANCIS, CPA
Business Address 6800 Monroe St. -- Sylvania, Ohio 43560
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
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 # 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 | 2000.00 |
| Grand Total of All Schedules 1A (Complete on last page of Schedule) | 6345.00 |

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

# ITEMIZED IN-KIND CONTRIBUTIONS

## SCHEDULE 1-IK

## CANDIDATE COMMITTEE

1. Committee I. D. Number 77661

2. Committee Name COMMITTEE TO ELECT PAUL FRANCIS DEPUTY TOWNSHIP TREASURER

| 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 6) |
|---|---|---|---|
| Contribution # 1 PAC Receipt? ☐ Yes<br>Name & Address:<br>FRANCIS, PAUL<br>3266 CHANNON VALLEY DR<br>CANTON, MI 48187<br>If over $100.00 cumulative, please provide:<br>Occupation:<br>Employer Name & Business Address:<br>☐ Fund Raiser Contribution | 4. ☐ Endorsement or Guarantee of Bank Loan<br>☐ Goods Donated or Loaned ☐ Services Donated<br>☒ Goods or Services Purchased by Candidate or Others<br>☐ Goods or Services Purchased by Candidate or Others- LOAN<br>Description MISC. OFFICE SUPPLIES<br>5. Date Of Receipt: 5/11/12<br>6. Vendor Name & Address:<br>OFFICE MAX<br>5111 MONROE ST<br>TOLEDO, OH 43623<br>Click Here for Memo Itemization | $ 28.16 | $ 28.16 |
| Contribution # 2 PAC Receipt? ☐ Yes<br>Name & Address<br>FRANCIS, PAUL<br>3266 CHANNON VALLEY DR<br>CANTON, MI 48187<br>If over $100.00 cumulative, please provide:<br>Occupation:<br>Employer Name & Address:<br>☐ Fund Raiser Contribution | 4. ☐ Endorsement or Guarantee of Bank Loan<br>☐ Goods Donated or Loaned ☐ Services Donated<br>☒ Goods or Services Purchased by Candidate or Others<br>☐ Goods or Services Purchased by Candidate or Others- LOAN<br>Description MISC. OFFICE SUPPLIES<br>5. Date Of Receipt: 6/11/12<br>6. Vendor Name & Address:<br>OFFICE MAX<br>5111 MONROE ST.<br>TOLEDO, OH 43623<br>Click Here for Memo Itemization | $ 29.09 | $ 57.25 |
| Contribution #3 PAC Receipt? ☐ Yes<br>Name & Address:<br>If over $100.00 cumulative, please provide:<br>Occupation:<br>Employer Name & Address:<br>☐ Fund Raiser Contribution | 4. ☐ Endorsement or Guarantee of Bank Loan<br>☐ Goods Donated or Loaned ☐ Services Donated<br>☐ Goods or Services Purchased by Candidate or Others<br>☐ Goods or Services Purchased by Candidate or Others- LOAN<br>Description _____<br>5. Date Of Receipt: _____<br>6. Vendor Name & Address:<br>Click Here for Memo Itemization | $ | $ |

| | | |
|---|---|---|
| Page Subtotal | 57.25 | 57.25 |
| Grand Total of all Schedules 1-IK (Complete on last page of Schedule) | 57.25 | |

Enter this total on line 6 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

# ITEMIZED EXPENDITURES
## SCHEDULE 1B
## CANDIDATE COMMITTEE

1. Committee I. D. Number 77661

2. Committee Name COMMITTEE TO ELECT PAUL FRANCIS BEAUPRE FOR SENATE 18TH DISTRICT

| 3. Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
|---|---|---|---|
| Expenditure #1<br>Name HELP PRINTERS<br>Address 9173 LEWIS AVENUE<br>TEMPERANCE, MI 48182<br>☐ Fund Raiser | Purpose: COLOR POSTCARDS<br>Click Here for Memo Itemization Type<br>☐ Check box if this expenditure is payment of debt or obligation reported on previous statement | 6/11/12 | $ 395.70 |
| Expenditure #2<br>Name HARLAND CLARKE<br>Address UNKNOWN<br>- BANK CHARGE<br>☐ Fund Raiser | Purpose: CHECK PRINTING<br>Click Here for Memo Itemization Type<br>☐ Check box if this expenditure is payment of debt or obligation reported on previous statement | 6/13/12 | $ 23.18 |
| Expenditure #3<br>Name GRAPHIC SIGNS<br>Address 10931 SUMMERFIELD RD<br>TEMPERANCE, MI 48182<br>☐ Fund Raiser | Purpose: MAGNETIC SIGNS<br>Click Here for Memo Itemization Type<br>☐ Check box if this expenditure is payment of debt or obligation reported on previous statement | 6/18/12 | $ 68.90 |
| Expenditure #4<br>Name GORDON FOOD SERVICE<br>Address 609 W. ALEXIS RD<br>TOLEDO, OH 43612<br>☐ Fund Raiser | Purpose: PARADE SUPPLIES (CANDY)<br>Click Here for Memo Itemization Type<br>☐ Check box if this expenditure is payment of debt or obligation reported on previous statement | 6/18/12 | $ 107.86 |
| Expenditure #5<br>Name BEAFORD PRESS<br>Address 3363 HEMINGWAY LANE<br>LAMBERTVILLE, MI 48144<br>☐ Fund Raiser | Purpose: NEWSPAPER ADV<br>Click Here for Memo Itemization Type<br>☐ Check box if this expenditure is payment of debt or obligation reported on previous statement | 6/19/12 | $ 440.00 |

Subtotal this page 1035.64

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

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

# ITEMIZED EXPENDITURES
## SCHEDULE 1B
## CANDIDATE COMMITTEE

1. Committee I. D. Number 77661

2. Committee Name COMMITTEE TO ELECT PAUL FRANCIS FOR BERLIN TOWNSHIP TREASURER

| 3. Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
|---|---|---|---|
| Expenditure #1<br>Name MAIL WORKS II, LLC<br>Address 5270 TRACTOR RD. STE. J TOLEDO, OH 43614<br>☐ Fund Raiser | Purpose: CAMPAIGN LITERATURE MAILING<br>☐ Check box if this expenditure is payment of debt or obligation reported on previous statement | 6/11/12 | $ 612.96 |
| Expenditure #2<br>Name FEDEX OFFICE<br>Address 1300 MONROE ST TOLEDO, OH 43604<br>☐ Fund Raiser | Purpose: CAMPAIGN FLYERS/POSTERS<br>☐ Check box if this expenditure is payment of debt or obligation reported on previous statement | 6/11/12 | $ 199.14 |
| Expenditure #3<br>Name STOCK SPORTS, INC<br>Address 9289 CRAIG RD. TEMPERANCE, MI 48182<br>☐ Fund Raiser | Purpose: PARADE T-SHIRTS<br>☐ Check box if this expenditure is payment of debt or obligation reported on previous statement | 6/11/12 | $ 169.60 |
| Expenditure #4<br>Name HELA PRINTERS<br>Address 9673 LEWIS AVENUE TEMPERANCE, MI 48182<br>☐ Fund Raiser | Purpose: YARD SIGNS, WIRES, POSTERS<br>☐ Check box if this expenditure is payment of debt or obligation reported on previous statement | 6/11/12 | $ 1,044.87 |
| Expenditure #5<br>Name MONROE EVENING NEWS CO MONROE PUBLISHING CO.<br>Address 20 W. FIRST STREET MONROE, MI 48161<br>☐ Fund Raiser | Purpose: NEWSPAPER ADV<br>☐ Check box if this expenditure is payment of debt or obligation reported on previous statement | 6/11/12 | $ 294.84 |

Subtotal this page 2377.41

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

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

# ITEMIZED EXPENDITURES
## SCHEDULE 1B
## CANDIDATE COMMITTEE

1. Committee I. D. Number 77661

2. Committee Name COMMITTEE TO ELECT PAUL FRANCIS

| 3. Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
|---|---|---|---|
| **Expenditure #1**<br>Name FEDEX OFFICE<br>Address 1300 MONROE ST<br>TOLEDO, OH 43613<br>☐ Fund Raiser | Purpose: CAMPAIGN FLYERS<br>☐ Check box if this expenditure is payment of debt or obligation reported on previous statement | 6/26/12 | $ 471.84 |
| **Expenditure #2**<br>Name U.S. POSTAL SERVICE<br>Address SYLVANIA, OH 43560<br>☐ Fund Raiser | Purpose: STAMPS<br>☐ Check box if this expenditure is payment of debt or obligation reported on previous statement | 6/29/12 | $ 112.56 |
| **Expenditure #3**<br>Name BEDFORD PRESS<br>Address 3363 HEMMINGWAY LANE<br>LAMBERTVILLE, MI 48144<br>☐ Fund Raiser | Purpose: NEWSPAPER ADV<br>☐ Check box if this expenditure is payment of debt or obligation reported on previous statement | 7/6/12 | $ 440.00 |
| **Expenditure #4**<br>Name O'MALLEY'S RESTAURANT<br>Address 3336 W. STERNS RD.<br>LAMBERTVILLE, MI 48144<br>☐ Fund Raiser | Purpose: MEET & GREET PARTY<br>☐ Check box if this expenditure is payment of debt or obligation reported on previous statement | 7/7/12 | $ 465.00 |
| **Expenditure #5**<br>Name MONROE EVENING NEWS CO.<br>Address MONROE PUBLISHING CO.<br>20 W. FIRST STREET<br>MONROE, MI 48161<br>☐ Fund Raiser | Purpose: NEWSPAPER ADV<br>☐ Check box if this expenditure is payment of debt or obligation reported on previous statement | 7/10/12 | $ 347.18 |

Subtotal this page 1,832.14

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

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

# ITEMIZED EXPENDITURES
## SCHEDULE 1B
## CANDIDATE COMMITTEE

1. Committee I. D. Number 77617

2. Committee Name COMMITTEE TO ELECT PAUL FRANCIS
REVISED TO PROPER INFORMATION

| 3. Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
|---|---|---|---|
| Expenditure #1<br>Name BLOOFIELD PRESS<br>Address 3363 HEMMINGWAY LANE<br>LAWRENCEVILLE, MI 48144<br>☐ Fund Raiser | Purpose: NEWSPAPER ADV<br>☐ Check box if this expenditure is payment of debt or obligation reported on previous statement | 7/19/12 | $ 160.00 |
| Expenditure #2<br>Name OFFICE MAX<br>Address 5214 MONROE ST,<br>TOLEDO, OH 43623<br>☐ Fund Raiser | Purpose: OFFICE SUPPLIES<br>☐ Check box if this expenditure is payment of debt or obligation reported on previous statement | 7/20/12 | $ 64.01 |
| Expenditure #3<br>Name<br>Address<br>☐ Fund Raiser | Purpose:<br>☐ Check box if this expenditure is payment of debt or obligation reported on previous statement | | $ |
| Expenditure #4<br>Name<br>Address<br>☐ Fund Raiser | Purpose:<br>☐ Check box if this expenditure is payment of debt or obligation reported on previous statement | | $ |
| Expenditure #5<br>Name<br>Address<br>☐ Fund Raiser | Purpose:<br>☐ Check box if this expenditure is payment of debt or obligation reported on previous statement | | $ |

Click Here for Memo Itemization Type

| | |
|---|---|
| Subtotal this page | 224.01 |
| Grand Total of all Schedules 1B (Complete on last page of Schedule) | 1,413.10 |

Enter this total on line 8a of Summary Page