



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 029234
2. Committee Name Committee to re-elect Tom Reich for Sheriff

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.	8. 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>06/27/15</u> Name & Address: Paul Hartwick 2500 Sanibel Hollow Holt, MI 48842 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>90.00</u>	\$ <u>90.00</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/27/15</u> Name & Address: Dylan Reich 2233 Delhi NE Holt, MI 48842 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>105.00</u>	\$ <u>105.00</u> Click Here for Memo Itemization
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/27/15</u> Name & Address: Jack Cook Howell Rd Mason, MI 48854 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>300.00</u>	\$ <u>300.00</u> Click Here for Memo Itemization
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/27/15</u> Name & Address: Brenda Reich 1822 Winchester Way Eaton Rapids, MI 48827 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>30.00</u>	\$ <u>30.00</u> Click Here for Memo Itemization

Page Subtotal **\$525.00**
 Grand Total of All Schedules 1A
 (Complete on last page of Schedule)

Enter this total on
line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 029234

2. Committee Name Committee to re-elect Tom Reich for Sheriff

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>06/27/15</u> Name & Address: Jessica Kyer 920 West Lansing, MI 48915		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input 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>06/27/15</u> Name & Address: Glenda Cook Howell Rd Mason MI 48854		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input 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 _____ Name & Address: Left Blank		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address: Left Blank		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$40.00**

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

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 029234
2. Committee Name Committee to re-elect Tom Reich for Sheriff

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.

8. 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 06/27/15
Name & Address:

Scott Wriggelsworth
2327 Keller Rd
Holt, MI 48842

\$ 100.00 \$ 100.00

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

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/27/15
Name & Address:

Kirk MacKeller
11546 Ransom Hwy
Dimondale, MI 48821

\$ 100.00 \$ 100.00

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

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/27/15
Name & Address:

Gene Wriggelsworth
P.O. Box 581
Holt, MI 48842

\$ 100.00 \$ 100.00

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

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 06/27/15
Name & Address:

Randy Joy
627 Lansing Rd
Pottersville, MI 48876

\$ 100.00 \$ 100.00

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

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal \$400.00

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

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 029234

2. Committee Name Committee to re-elect Tom Reich for Sheriff

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>06/27/15</u> Name & Address: Jim Downs 1141 S.Washington Ave Lansing, MI 48910 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/27/15</u> Name & Address: Steve Freeman 6510 Cheshire Dr Dimondale, MI 48821 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>250.00</u>	\$ <u>250.00</u> Click Here for Memo Itemization
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/27/15</u> Name & Address: Glenn Buege Chevrolet 4499 Smithville Rd EatonRapids, MI 48827 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u> Click Here for Memo Itemization
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/27/15</u> Name & Address: Dan De Wolf P.O.Box 793 Bloomfield Hills, MI 48303 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>200.00</u>	\$ <u>200.00</u> Click Here for Memo Itemization

Page Subtotal **\$650.00**

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

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 029234

2. Committee Name Committee to re-elect Tom Reich for Sheriff

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: Tom Terres 4580 Hawk Hollow Dr, East Bath, MI 48808	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/27/15</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: IE Newton, III P.O.Box 10147 Irondale, AL 35210	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/27/15</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: Patrick Dotson 1820 S. Chester Rd Charlotte, MI 48813	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/27/15</u>	\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: Jeff Kirkpatrick 401 S. Jackson St Jackson, MI 49201	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/27/15</u>	\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$700.00**

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

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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 029234
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3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/27/15</u> Name & Address: Myers Plumbing & Heating 16825 Industrial Pkwy Lansing, MI 48906		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input 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>06/27/15</u> Name & Address: Randall Kleiman 200 Woodland Pass, Box 1296 East Lansing, MI 48826		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input 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>06/27/15</u> Name & Address: Joe & Debbie Brown 1114 Wolf Run Dr Lansing, MI 48917		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input 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>06/27/15</u> Name & Address: Allen & Amy Dow 203 E. Clark St. St. Johns, MI 48879		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$400.00**

Grand Total of All Schedules 1A
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3. Contribution # 1 Name & Address: William Byrnes 314 W.Greenlawn Lansing,MI 48910	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/27/15</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: Darrell&Jacquelyn Tennis 5675 S.Stine Rd Olivet,MI 49076	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/27/15</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: Pat Hutting 1046 Thompson Shore Dr Howell,MI 48843	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/27/15</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: Tim Reed 239 S.Cochran Charlotte,MI 48813	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/27/15</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$400.00**

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 029234

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3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/27/15</u> Name & Address: Patricia Nowak 5914 Green Rd Haslett, MI 48870		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input 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>06/27/15</u> Name & Address: Kathy O'Neil 7360 Players Club Dr Lansing, MI 48917		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input 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>06/27/15</u> Name & Address: Patrick Brown 1298 Aurelius Rd Holt, MI 48842		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input 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>06/27/15</u> Name & Address: Tom Clark 11412 Jerryson Dr Grand Ledge, MI 48837		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$500.00

Grand Total of All Schedules 1A
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CANDIDATE COMMITTEE**

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3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/27/15</u> Name & Address: Jeff Warder The WW Crew		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input 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>06/27/15</u> Name & Address: Jack&Doreen Warder		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input 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>06/27/15</u> Name & Address: Jeff Warder Josh & Brooke Warder		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input 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>06/27/15</u> Name & Address: Dean Transportation 4812 Aurelius Rd Lansing, MI 48910		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$400.00

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
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3. Contribution #1 Name & Address: <u>Dean Trailways</u> <u>4812 Aurelius Rd</u> <u>Lansing, MI 48910</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/27/15</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>100.00</u>	\$ <u>100.00</u>
		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>David Smith</u> <u>P.O. Box 8</u> <u>Charlotte, MI 48813</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/27/15</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>100.00</u>	\$ <u>100.00</u>
		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>Mid Michigan Emergency Equipment</u> <u>536 Beech St</u> <u>Lansing, MI 48912</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/27/15</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>100.00</u>	\$ <u>100.00</u>
		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>Blake Mulder</u> <u>5495 E. St Joseph Hwy</u> <u>Grand Ledge, MI 48837</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/27/15</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>200.00</u>	\$ <u>200.00</u>
		Click Here for Memo Itemization	

Page Subtotal \$500.00

Grand Total of All Schedules 1A
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3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/27/15</u> Name & Address: Charles Adams 401 S.Jackson St Jackson,MI 49201		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input 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>01/06/15</u> Name & Address: Bill Kelly 4390 E Clinton Trail Eaton Rapids, MI 48827		\$ <u>2000.00</u>	\$ <u>2000.00</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 # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address: _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
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 _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal	\$2,100.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$21,842.50

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**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 029234
2. Committee Name Committee To Re-Elect Tom Reich For Sheriff

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name John D Vanator CPA PC Address PO Box 509 Eaton Rapids, MI 48827 <input type="checkbox"/> Fund Raiser	Purpose: <u>Prepare Committee Paperwork</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>01/26/15</u> Date	<u>\$ 200.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name Charlotte Rotary Address PO Box 484 Charlotte, MI 48813 <input type="checkbox"/> Fund Raiser	Purpose: <u>Membership Dues</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/03/15</u> Date	<u>\$ 218.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name Crime Stoppers of Michigan Address 3315 S Pennsylvania Lansing, MI 48910 <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/10/15</u> Date	<u>\$ 200.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name US Post Office Address Charlotte, MI 48813 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Stamps for Golf Outing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/09/15</u> Date	<u>\$ 98.00</u> Click Here for Memo Itemization Type
Expenditure #5 Name Charlotte Lithograph Address 114 S Cochran Ave Charlotte, MI 48813 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Flyers/envelopes for Golf Outing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/13/15</u> Date	<u>\$ 168.01</u> Click Here for Memo Itemization Type
Subtotal this page			\$884.01
Grand Total of all Schedules 1B (Complete on last page of Schedule)			Enter this total on line 8a of Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 029234
2. Committee Name Committee To Re-Elect Tom Reich For Sheriff

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name US Post Office Address Charlotte, MI 48813 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Stamps for Golf Outing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/16/15</u> Date	<u>\$ 98.00</u>
Expenditure #2 Name Charlotte Lithograph Address 114 S Cochran Ave Charlotte, MI 48813 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Copies for Golf Outing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/16/15</u> Date	<u>\$ 14.31</u>
Expenditure #3 Name US Post Office Address Charlotte, MI 48813 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Stamps for Golf Outing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/17/15</u> Date	<u>\$ 49.00</u>
Expenditure #4 Name Charlotte Lithograph Address 114 S Cochran Ave Charlotte, MI 48813 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Business Flyers for Golf Outing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/15/15</u> Date	<u>\$ 56.71</u>
Expenditure #5 Name Committee to Elect Scott Wriggelsworth Sheriff Address 630 N Cedar Mason, MI 48859 <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/04/15</u> Date	<u>\$ 100.00</u>

Subtotal this page **\$318.02**

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 029234
2. Committee Name Committee To Re-Elect Tom Reich For Sheriff

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Meijer Address 1167 E Clinton Trail Charlotte, MI 48813 <input type="checkbox"/> Fund Raiser	Purpose: <u>Cake for Corrections Appreciation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/05/15</u> Date	<u>\$ 27.99</u>
Expenditure #2 Name Meijer Address 1167 E Clinton Trail Charlotte, MI 48813 <input type="checkbox"/> Fund Raiser	Purpose: <u>Cake for Corrections Appreciation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/06/15</u> Date	<u>\$ 34.98</u>
Expenditure #3 Name Meijer Address 1167 E Clinton Trail Charlotte, MI 48813 <input type="checkbox"/> Fund Raiser	Purpose: <u>Cake for Deputies Appreciation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/12/15</u> Date	<u>\$ 27.99</u>
Expenditure #4 Name Meijer Address 1167 E Clinton Trail Charlotte, MI 48813 <input type="checkbox"/> Fund Raiser	Purpose: <u>Cake for Deputies Appreciation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/13/15</u> Date	<u>\$ 27.99</u>
Expenditure #5 Name US Post Office Address Charlotte, MI 48813 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Stamps for Golf Outing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/27/15</u> Date	<u>\$ 49.00</u>

Subtotal this page **\$167.95**

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

Enter this total on line 8a of Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 029234
2. Committee Name Committee To Re-Elect Tom Reich For Sheriff

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Total Firearms Address 1380 North Cedar Mason, MI 48859 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Golf Outing Prize</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/23/15</u> Date	<u>\$ 200.00</u>
Expenditure #2 Name Dick's Sporting Goods Address 2801 Preyde Blvd Lansing, MI 48912 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Golf Outing Prize</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/23/15</u> Date	<u>\$ 84.75</u>
Expenditure #3 Name Dunhams Sports Address 5184 W Saginaw Highway Lansing, MI 48917 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Golf Outing Prize</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/23/15</u> Date	<u>\$ 116.59</u>
Expenditure #4 Name Meijer Address 1167 E Clinton Trail Charlotte, MI 48813 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Golf Outing Prizes</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/25/15</u> Date	<u>\$ 219.80</u>
Expenditure #5 Name ABC Warehouse Address 5501 W Saginaw Highway Lansing, MI 48917 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Golf Outing Prizes</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/25/15</u> Date	<u>\$ 400.68</u>

Subtotal this page **\$1,021.82**
 Grand Total of all Schedules 1B
 (Complete on last page of Schedule)

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 029234
2. Committee Name Committee To Re-Elect Tom Reich For Sheriff

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name The Shirt Smith Address PO Box 522 Perry, MI 48872 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>T Shirts for Golf Outing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/25/15</u> Date	<u>\$ 180.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name Centennial Acres Golf Course Address 12485 Dow Rd Sunfield, MI 48890 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Golfing fee's for Golf Outing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/30/15</u> Date	<u>\$ 5800.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name US Post Office Address Charlotte, MI 48813 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Stamps for thank-you cards</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/10/15</u> Date	<u>\$ 49.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name Greenstone Farm Credit Address 551 Courthouse Dr, Suite 1 Charlotte, MI 48813 <input type="checkbox"/> Fund Raiser	Purpose: <u>4-H Premium Donations</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/16/15</u> Date	<u>\$ 160.00</u> 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 **\$6,189.00**
Grand Total of all Schedules 1B (Complete on last page of Schedule) **\$8,580.80**

Enter this total on line 8a of Summary Page



**ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK**

1. Committee I. D. Number 029234

CANDIDATE COMMITTEE

2. Committee Name Committee To Re-Elect Tom Reich For Sheriff

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)
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<p>Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: Allen & Amy Dow 203 E Clark St St Johns, MI 48879</p> <p>If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:</p> <p><input checked="" type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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</p> <p>Description <u>Two Gift Certificates</u></p> <p>5. Date Of Receipt: <u>06/27/15</u></p> <p>6. Vendor Name & Address: Cupcakes by Amy 203 E Clark St St Johns, MI 48879</p> <p>Click Here for Memo Itemization</p>	<p>\$ 20 \$ 20</p>	
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<p>Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: Radison Hotel 111 N Grand Ave Lansing, MI 48933</p> <p>If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:</p> <p><input checked="" type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input checked="" 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</p> <p>Description <u>One Night's Stay</u></p> <p>5. Date Of Receipt: <u>06/27/15</u></p> <p>6. Vendor Name & Address:</p> <p>Click Here for Memo Itemization</p>	<p>\$ 125 \$ 125</p>	
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<p>Contribution #3 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: Tavern & Tap 101 S Washington Square Lansing, MI 48933</p> <p>If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:</p> <p><input checked="" type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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</p> <p>Description <u>\$50 Gift Certificate</u></p> <p>5. Date Of Receipt: <u>06/27/15</u></p> <p>6. Vendor Name & Address:</p> <p>Click Here for Memo Itemization</p>	<p>\$ 50 \$ 50</p>	
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Page Subtotal **\$205.00** **\$205.00**

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

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK

1. Committee I. D. Number 029234

CANDIDATE COMMITTEE

2. Committee Name Committee To Re-Elect Tom Reich For Sheriff

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)

Fund Raiser Contribution

Contribution # 1 PAC Receipt? Yes

Name & Address:
Champs
2800 Preyde Blvd
Lansing, MI 48912

If over \$100.00 cumulative, please provide:
Occupation:
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 \$25 Gift Certificate

5. Date Of Receipt: 06/27/15

6. Vendor Name & Address:

\$ 25 \$ 25

[Click Here for Memo Itemization](#)

Fund Raiser Contribution

Contribution # 2 PAC Receipt? Yes

Name & Address:
NOG Theatre
2500 Showtime Dr
Lansing, MI 48912

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 4 Movie Passes

5. Date Of Receipt: 06/27/15

6. Vendor Name & Address:

\$ 20 \$ 20

[Click Here for Memo Itemization](#)

Fund Raiser Contribution

Contribution #3 PAC Receipt? Yes

Name & Address:
Art's Bar
809 E Kalamazoo
Lansing, MI 48912

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 Two Large Pizzas

5. Date Of Receipt: 06/27/15

6. Vendor Name & Address:

\$ 20 \$ 20

[Click Here for Memo Itemization](#)

Fund Raiser Contribution

Page Subtotal **\$65.00** **\$65.00**

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

Enter this total
on line 8 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 029234

CANDIDATE COMMITTEE

2. Committee Name Committee To Re-Elect Tom Reich For Sheriff

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: <u>Tasmanian Tire</u> <u>2345 Eifer Rd</u> <u>Holt, MI 48842</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input checked="" 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 <u>\$50 Gift Certificate</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>50</u>	\$ <u>50</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Edible Arrangements</u> <u>300 N Clippert St, Ste 11</u> <u>Lansing, MI 48912</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input checked="" 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 <u>\$40 Gift Certificate</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>40</u>	\$ <u>40</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Capital Prime Steakhouse</u> <u>2324 Showtime Dr</u> <u>Lansing, MI 48912</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>\$75 Gift Certificate</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>75</u>	\$ <u>75</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal **\$165.00** **\$165.00**

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

Enter this total
on line 8 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 029234

CANDIDATE COMMITTEE

2. Committee Name Committee To Re-Elect Tom Reich For Sheriff

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)
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<p>Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>Hyatt Regency Hotel</u> <u>2401 Showtime Dr</u> <u>Lansing, MI 48912</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input checked="" 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</p> <p>Description <u>One Nights Stay</u></p> <p>5. Date Of Receipt: <u>06/27/15</u></p> <p>6. Vendor Name & Address:</p>	<p>\$ <u>125</u></p>	<p>\$ <u>125</u></p>
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Fund Raiser Contribution

<p>Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>Tony Sacco's</u> <u>2328 Showtime Dr</u> <u>Lansing, MI 48912</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input checked="" 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</p> <p>Description <u>Breadstick cards</u></p> <p>5. Date Of Receipt: <u>06/27/15</u></p> <p>6. Vendor Name & Address:</p>	<p>\$ <u>10</u></p>	<p>\$ <u>10</u></p>
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Fund Raiser Contribution

<p>Contribution #3 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>Courtyard by Marriot</u> <u>2710 Lake Lansing Rd</u> <u>Lansing, MI 48912</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input checked="" 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</p> <p>Description <u>One Nights Stay</u></p> <p>5. Date Of Receipt: <u>06/27/15</u></p> <p>6. Vendor Name & Address:</p>	<p>\$ <u>150</u></p>	<p>\$ <u>150</u></p>
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<p><input checked="" type="checkbox"/> Fund Raiser Contribution</p>	<p>Page Subtotal \$285.00 \$285.00</p> <p>Grand Total of all Schedules 1-IK (Complete on last page of Schedule)</p>
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Enter this total on line 6 of Summary Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 029234

CANDIDATE COMMITTEE

2. Committee Name Committee To Re-Elect Tom Reich For Sheriff

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.	4. Type of In-Kind Contribution (Check applicable box)	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: <u>Fire Mountain Grill</u> <u>730 Elmwood Rd</u> <u>Lansing, MI 48917</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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	\$ <u>30</u>	\$ <u>30</u>
<input checked="" type="checkbox"/> Fund Raiser Contribution	Description <u>Two Dinners</u>	5. Date Of Receipt: <u>06/27/15</u>	
6. Vendor Name & Address:			
Click Here for Memo Itemization			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Applebee's</u> <u>5400 W Saginaw</u> <u>Lansing, MI 48917</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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	\$ <u>20</u>	\$ <u>20</u>
<input checked="" type="checkbox"/> Fund Raiser Contribution	Description <u>Gift Cards</u>	5. Date Of Receipt: <u>06/27/15</u>	
6. Vendor Name & Address:			
Click Here for Memo Itemization			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Chipotle</u> <u>5330 W Saginaw</u> <u>Lansing, MI 48917</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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	\$ <u>20</u>	\$ <u>20</u>
<input checked="" type="checkbox"/> Fund Raiser Contribution	Description <u>Gift Cards</u>	5. Date Of Receipt: <u>06/27/15</u>	
6. Vendor Name & Address:			
Click Here for Memo Itemization			

Page Subtotal **\$70.00** **\$70.00**

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

Enter this total
on line 6 of Summary
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 029234

CANDIDATE COMMITTEE

2. Committee Name Committee To Re-Elect Tom Reich For Sheriff

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.	4. Type of In-Kind Contribution (Check applicable box)	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: Chedders 5719 W Saginaw Lansing, MI 48917 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>\$10 Gift Certificate</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>10</u>	\$ <u>10</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Fazio's 5617 W Saginaw Lansing, MI 48917 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>Gift Certificate</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>20</u>	\$ <u>20</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: City Limits 801 Cedar St Mason, MI 48854 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>Gift Certificate</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>20</u>	\$ <u>20</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal **\$50.00** **\$50.00**

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

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK

1. Committee I. D. Number 029234

2. Committee Name Committee To Re-Elect Tom Reich For Sheriff

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: <u>Olive Garden</u> <u>501 S Marsh</u> <u>Okemos, MI 48864</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>Gift Certificate</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>20</u> \$ <u>20</u>	
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Texas Roadhouse</u> <u>280 E Edgewood</u> <u>Lansing, MI 48917</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>Gift Certificate</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>20</u> \$ <u>20</u>	
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Outback Steakhouse</u> <u>707 Brookside</u> <u>Lansing, MI 48917</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>Gift Certificate</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>20</u> \$ <u>20</u>	
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal \$60.00 \$60.00

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

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on line 6 of Summary
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 029234

CANDIDATE COMMITTEE

2. Committee Name Committee To Re-Elect Tom Reich For Sheriff

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)	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: <u>Maple Brook Golf Club</u> <u>681 Lansing Rd</u> <u>Charlotte, MI 48813</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>Golfing Package</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>150</u> \$ <u>150</u>	
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Eldorado</u> <u>3750 W Howell Rd</u> <u>Mason, MI 48854</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>Golfing Package</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>80</u> \$ <u>80</u>	
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Old Chicago</u> <u>1938 Grand River</u> <u>Okemos, MI 48864</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>Gift Certificate</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>20</u> \$ <u>20</u>	
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal **\$250.00** **\$250.00**

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

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on line 6 of Summary
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 029234

CANDIDATE COMMITTEE

2. Committee Name Committee To Re-Elect Tom Reich For Sheriff

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: <u>Pro Golf</u> <u>5630 Bearcreek</u> <u>Lansing, MI 48917</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>Golf Items</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>114</u>	\$ <u>114</u> Click Here for Memo Itemization
<input checked="" type="checkbox"/> Fund Raiser Contribution Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Grand Hotel</u> <u>PO Box 286</u> <u>Mackinaw Island, MI 49757</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>Golfing Package</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>400</u>	\$ <u>400</u> Click Here for Memo Itemization
<input checked="" type="checkbox"/> Fund Raiser Contribution Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>HawkiHollow</u> <u>PO Box 307</u> <u>Bath, MI 48808</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>Golfing Package</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>65</u>	\$ <u>65</u> Click Here for Memo Itemization
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal **\$579.00** **\$579.00**

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

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on line 8 of Summary
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 029234

CANDIDATE COMMITTEE

2. Committee Name Committee To Re-Elect Tom Reich For Sheriff

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: <u>Michigan State University</u> <u>3535 Forest St</u> <u>Lansing, MI 48910</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>Time with Coach Mark Dantonio</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ 150	\$ 150
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Goodyear</u> <u>5107 W Saginaw</u> <u>Lansing, MI 48917</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input checked="" 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 <u>Oil Change/Lube</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ 20	\$ 20
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Treetop Resort</u> <u>3962 Wilkinson</u> <u>Gaylord, MI 49735</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>Golfing Package</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ 90	\$ 90
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal **\$260.00** **\$260.00**

Grand Total of all Schedules 1-IK
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**ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK**

1. Committee I. D. Number 029234

CANDIDATE COMMITTEE

2. Committee Name Committee To Re-Elect Tom Reich For Sheriff

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: Sherry Jones c/o 2820 E Saginaw Lansing, MI 48912 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>Country Club Certificate</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>400</u> \$ <u>400</u>	
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Bay Mills (CASINO) 11386 W Lakeshore Brimley, MI 49715 ↑ ADDED NOTE	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>Motel and Golf Certificate</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>285</u> \$ <u>285</u>	
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Discount Tire 4830 W Saginaw Lansing, MI 48917 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input checked="" 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 <u>Gift Certificate</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>20</u> \$ <u>20</u>	
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal **\$705.00** **\$705.00**

Grand Total of all Schedules 1-IK
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**ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK**

1. Committee I. D. Number 029234

CANDIDATE COMMITTEE

2. Committee Name Committee To Re-Elect Tom Reich For Sheriff

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)
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<p>Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: Bill Jenkins 2883 Country Club Way Albion, MI 49224</p> <p>If over \$100.00 cumulative, please provide: Occupation:</p> <p>Employer Name & Business Address:</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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</p> <p>Description <u>University of MI Golf Items</u></p> <p>5. Date Of Receipt: <u>06/27/15</u></p> <p>6. Vendor Name & Address:</p>	<p>\$ <u>42</u></p>	<p>\$ <u>42</u></p>
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[Click Here for Memo Itemization](#)

Fund Raiser Contribution

<p>Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: Jim Dravenstatt-Moceri 1331 Hosta Court Holt, MI 48842</p> <p>If over \$100.00 cumulative, please provide: Occupation:</p> <p>Employer Name & Address:</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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</p> <p>Description <u>Necklace</u></p> <p>5. Date Of Receipt: <u>06/27/15</u></p> <p>6. Vendor Name & Address:</p>	<p>\$ <u>65</u></p>	<p>\$ <u>65</u></p>
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Fund Raiser Contribution

<p>Contribution #3 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: Jack Cook Howell Rd Mason, MI 48854</p> <p>If over \$100.00 cumulative, please provide: Occupation:</p> <p>Employer Name & Address:</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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</p> <p>Description <u>Assorted Items</u></p> <p>5. Date Of Receipt: <u>06/27/15</u></p> <p>6. Vendor Name & Address:</p>	<p>\$ <u>302.50</u></p>	<p>\$ <u>302.50</u></p>
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Fund Raiser Contribution

Page Subtotal **\$409.50** **\$409.50**

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

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**ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK**

1. Committee I. D. Number 029234

CANDIDATE COMMITTEE

2. Committee Name Committee To Re-Elect Tom Reich For Sheriff

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: Gene Wriggelsworth PO Box 581 Holt, MI 48842 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>Clock</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ 70	\$ 70
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Jeff Cook Mason, MI 48854 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>Assorted Guitar Items</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ 10	\$ 10
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Ken and Ronda McCoy 161 Twin Ponds Okemos, MI 48864 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>Cooler/Combo Kit</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ 75	\$ 75
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal **\$155.00** **\$155.00**

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

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on line 6 of Summary
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 029234

CANDIDATE COMMITTEE

2. Committee Name Committee To Re-Elect Tom Reich For Sheriff

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)	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: D & G Equipment 110 S Lincoln Charlotte, MI 48813 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>Tractor Toy and Hats</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>40</u> \$ <u>40</u>	
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Jeff Cook Mason, MI 48854 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>Backpack and Golf Items</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>45</u> \$ <u>45</u>	
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Ken and Ronda McCoy 161 Twin Ponds Okemos, MI 48864 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" 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 <u>Miller Lite Pub Sign and Bar Stool</u> 5. Date Of Receipt: _____ 6. Vendor Name & Address:	\$ <u>126</u> \$ <u>126</u>	
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal **\$211.00** **\$211.00**

Grand Total of all Schedules 1-IK
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