





MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

2016 NOV 28 AM 10:07

LEGAL DEFENSE FUND
COVER PAGE

Report must be legible, typed or printed in ink and signed by the Treasurer/Designated Record Keeper and Official.

FOR OFFICIAL USE ONLY

<p>1a. Legal Defense Fund I.D. Number: <u>005</u></p> <p>1b. Legal Defense Fund Name: <u>DANIEL DEVINE LEGAL DEFENSE FUND</u></p> <p>1c. Legal Defense Fund Address: <u>4511 LAKEVIEW CT. BLOOMFIELD HILLS, MI 48301</u></p> <p>1d. Legal Defense Fund Phone: <u>248-538-4159</u></p>	<p>2a. Official's Full Name: <u>DANIEL C. DEVINE, JR.</u></p> <p>2b. Official's Office: <u>BLOOMFIELD TOWNSHIP TREASURER</u></p>
<p>3a. Treasurer's Full Name: <u>DANIEL C. DEVINE, JR.</u></p> <p>3b. Treasurer's Residential Address: <u>4511 LAKEVIEW CT. BLOOMFIELD HILLS, MI 48301</u></p>	<p>3c. Treasurer's Business Address: <u>4200 TELEGRAPH RD. BLOOMFIELD HILLS, MI 48303</u></p> <p>3d. Treasurer's Phone Number(s): <u>248-433-7704</u></p>
<p>4a. Quarterly Transaction Report Covering:</p> <p><input type="checkbox"/> January 1 – March 31; Due: April 25th</p> <p><input type="checkbox"/> April 1 – June 30; Due: July 25th</p> <p><input type="checkbox"/> July 1 – September 30; Due: October 25th</p> <p><input type="checkbox"/> October 1 – December 31; Due: January 25th</p> <p>4b. <input type="checkbox"/> Amendment to Transaction Report: also mark (4a) to indicate which Report is being amended)</p>	<p>5. <input checked="" type="checkbox"/> Dissolution of Legal Defense Fund:</p> <p>Effective Date of Dissolution <u>11 / 15 / 2016</u></p> <p>By checking this item, I/We certify that the Legal Defense Fund has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Itemized Expenditure Schedule 2 and the Summary Page.</p>
<p>6. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.</p> <p>Official's Signature and Date: <u></u> <u>11 / 15 / 2016</u></p> <p>Treasurer's/Designated Record Keeper's Signature and Date: <u></u> <u>11 / 15 / 2016</u></p>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

LEGAL DEFENSE FUND
COVER PAGE

RECEIVED/FILED
MICHIGAN DEPT OF STATE
2016 OCT 21 AM 9:56
ELECTIONS/GREAT SEAL

Report must be legible, typed or printed in ink and signed by the Treasurer/Designated Record Keeper and Official.

FOR OFFICIAL USE ONLY

<p>1a. Legal Defense Fund I.D. Number: <u>005</u></p> <p>1b. Legal Defense Fund Name: <u>DANIEL DEVINE</u> <u>LEGAL DEFENSE FUND</u></p> <p>1c. Legal Defense Fund Address: <u>4511 LAKEVIEW CT.</u> <u>BLOOMFIELD HILLS, MI 48301</u></p> <p>1d. Legal Defense Fund Phone: <u>248-</u> <u>538-4159</u></p>	<p>2a. Official's Full Name: <u>DANIEL C. DEVINE, JR.</u></p> <p>2b. Official's Office: <u>BLOOMFIELD TOWNSHIP TREASURER</u></p>
<p>3a. Treasurer's Full Name: <u>DANIEL C. DEVINE, JR</u></p> <p>3b. Treasurer's Residential Address: <u>4511 LAKEVIEW CT.</u> <u>BLOOMFIELD HILLS, MI 48301</u></p>	<p>3c. Treasurer's Business Address: <u>4200 TELEGRAPH RD.</u> <u>BLOOMFIELD HILLS, MI 48303</u></p> <p>3d. Treasurer's Phone Number(s): <u>248-433-7704</u></p>
<p>4a. Quarterly Transaction Report Covering:</p> <p><input type="checkbox"/> January 1 – March 31; Due: April 25th</p> <p><input type="checkbox"/> April 1 – June 30; Due: July 25th</p> <p><input checked="" type="checkbox"/> July 1 – September 30; Due: October 25th</p> <p><input type="checkbox"/> October 1 – December 31; Due: January 25th</p> <p>4b. <input type="checkbox"/> Amendment to Transaction Report also mark (4a) to indicate which Report is being amended)</p>	<p>5. <input type="checkbox"/> Dissolution of Legal Defense Fund:</p> <p>Effective Date of Dissolution ____/____/____</p> <p>By checking this item, I/We certify that the Legal Defense Fund has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Itemized Expenditure Schedule 2 and the Summary Page.</p>
<p>6. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.</p> <p>Official's Signature and Date: <u></u> <u>10/18/16</u></p> <p>Treasurer's/Designated Record Keeper's Signature and Date: <u></u> <u>10/18/16</u></p>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

LEGAL DEFENSE FUND
SUMMARY PAGE

FOR OFFICIAL USE ONLY

Summary Page

	Column I This Period	Column II Cumulative Calendar Year
1. Contributions	1a. \$ <u>0</u>	1b. \$ <u>22,937.72</u>
2. In-Kind Contributions	2a. \$ <u>0</u>	2b. \$ <u>0</u>
3. TOTAL CONTRIBUTIONS	3a. \$ <u>0</u>	3b. \$ <u>22,937.72</u>
4. Itemized Expenditures	4a. \$ <u>426.93</u>	
5. Unitemized Expenditures (less than \$50.01 each - no Schedule)	5a. \$ <u>0</u>	
6. TOTAL EXPENDITURES	6a. \$ <u>426.93</u>	6b. \$ <u>8,332.83</u>

BALANCE STATEMENT

7. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	7. \$ <u>426.93</u>
8. Amount received during reporting period (Item 1a.)	8. \$ <u>0</u>
9. SUBTOTAL Add lines 7 and 8	9. \$ <u>426.93</u>
10. Amount expended during reporting period (Item 6a.)	10. \$ <u>426.93</u>
11. ENDING BALANCE (Subtract line 10 from line 9)	11. \$ <u>-0-</u>

* The ending balance must always be a positive number.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES SCHEDULE 2 LEGAL DEFENSE FUND		1. Legal Defense Fund I.D. Number and Name: <u>005 DANIEL DEVINE LEGAL DEFENSE FUND</u>		
2. Name and address of person or vendor paid	3. Purpose	4. Date	5. Amount	
INDEPENDENT BANK 4140 W. MAPLE RD. BLOOMFIELD HILLS, MI 48301	BANK FEES	9/28/16	\$ 17.99	
SUMMERS SCHWARTZ P.C. 1 TOWNE CENTER SQ, SUITE 1700 SOUTHFIELD, MI 48076	LEGAL FEES	9/24/16	\$ 408.94	
			\$ _____	
			\$ _____	
			\$ _____	
			\$ _____	
			\$ _____	
			\$ _____	
			\$ _____	
			\$ _____	
			\$ _____	
			\$ _____	
			\$ _____	
Page Subtotal			\$ 426.93	
Grand Total (Complete on last page of Schedule)			\$ 426.93	
Page <u>1</u> of <u>1</u>			Forward to #3 Summary Page	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

LEGAL DEFENSE FUND
COVER PAGE

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MICHIGAN DEPT OF STATE
2016 JUL 26 AM 10:47 FAX 517-241-4785
ELECTIONS/GREAT SEAL

Report must be legible, typed or printed in ink and signed by the Treasurer/Designated Record Keeper and Official.

FOR OFFICIAL USE ONLY

<p>1a. Legal Defense Fund I.D. Number: <u>005</u></p> <p>1b. Legal Defense Fund Name: <u>DANIEL DEVINE LEGAL DEFENSE FUND</u></p> <p>1c. Legal Defense Fund Address: <u>4511 LAKEVIEW CT. BLOOMFIELD HILLS, MI 48301</u></p> <p>1d. Legal Defense Fund Phone: <u>248-538-4159</u></p>	<p>2a. Official's Full Name: <u>DANIEL C. DEVINE, JR</u></p> <p>2b. Official's Office: <u>BLOOMFIELD TOWNSHIP TREASURER</u></p>
<p>3a. Treasurer's Full Name: <u>DANIEL C. DEVINE JR</u></p> <p>3b. Treasurer's Residential Address: <u>4511 LAKEVIEW CT. BLOOMFIELD HILLS, MI 48301</u></p>	<p>3c. Treasurer's Business Address: <u>4200 TELEGRAPH RD. P.O. BOX 489 BLOOMFIELD HILLS, MI 48303</u></p> <p>3d. Treasurer's Phone Number(s): <u>248-433-7704</u></p>
<p>4a. Quarterly Transaction Report Covering:</p> <p><input type="checkbox"/> January 1 - March 31; Due: April 25th</p> <p><input checked="" type="checkbox"/> April 1 - June 30; Due: July 26th</p> <p><input type="checkbox"/> July 1 - September 30; Due: October 25th</p> <p><input type="checkbox"/> October 1 - December 31; Due: January 25th</p> <p>4b. <input type="checkbox"/> Amendment to Transaction Report: also mark (4a) to indicate which Report is being amended)</p>	<p>5. <input type="checkbox"/> Dissolution of Legal Defense Fund:</p> <p>Effective Date of Dissolution ____/____/____</p> <p>By checking this item, I/We certify that the Legal Defense Fund has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Itemized Expenditure Schedule 2 and the Summary Page.</p>
<p>6. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.</p> <p>Official's Signature and Date: <u></u> <u>7/20/2016</u></p> <p>Treasurer's/Designated Record Keeper's Signature and Date: <u></u> <u>7/20/2016</u></p>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

LEGAL DEFENSE FUND
SUMMARY PAGE

FOR OFFICIAL USE ONLY

Summary Page

	Column I This Period	Column II Cumulative Calendar Year
1. Contributions	1a. \$ <u>5,000.00</u>	1b. \$ <u>22,937.72</u>
2. In-Kind Contributions	2a. \$ <u>0</u>	2b. \$ _____
3. TOTAL CONTRIBUTIONS	3a. \$ <u>5,000.00</u>	3b. \$ <u>22,937.72</u>
4. Itemized Expenditures	4a. \$ <u>7,905.90</u>	
5. Unitemized Expenditures (less than \$50.01 each - no Schedule)	5a. \$ <u>0</u>	
6. TOTAL EXPENDITURES	6a. \$ <u>7,905.90</u>	6b. \$ <u>7,905.90</u>
BALANCE STATEMENT		
7. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	7. \$ <u>3332.83</u>	
8. Amount received during reporting period (Item 1a.)	8. \$ <u>5000.00</u>	
9. SUBTOTAL Add lines 7 and 8	9. \$ <u>8332.83</u>	
10. Amount expended during reporting period (Item 6a.)	10. \$ <u>7,905.90</u>	
11. ENDING BALANCE (Subtract line 10 from line 9)	11. \$ <u>426.93</u>	
	* The ending balance must always be a positive number.	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS



<p align="center">ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND</p>	<p>1. Legal Defense Fund I.D. Number and Name: 005 DANIEL DEVINE LEGAL DEFENSE FUND</p>
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Enter contributor's name and address.				
2. Name and Address: DANIEL DEVINE 4511 LAKEVIEW CT. BLOOMFIELD HILLS, MI 48301	3. Date of Receipt: 4/21/16	\$ <u>5,000</u>	\$ _____	\$ <u>5,000</u>
4. If over \$100.00 cumulative, please provide: Occupation: _____ Employer: _____ Place of Business: _____				
2. Name and Address:	3. Date of Receipt: _____	\$ _____	\$ _____	\$ _____
4. If over \$100.00 cumulative, please provide: Occupation: _____ Employer: _____ Place of Business: _____				
2. Name and Address:	3. Date of Receipt: _____	\$ _____	\$ _____	\$ _____
4. If over \$100.00 cumulative, please provide: Occupation: _____ Employer: _____ Place of Business: _____				
2. Name and Address:	3. Date of Receipt: _____	\$ _____	\$ _____	\$ _____
4. If over \$100.00 cumulative, please provide: Occupation: _____ Employer: _____ Place of Business: _____				
2. Name and Address:	3. Date of Receipt: _____	\$ _____	\$ _____	\$ _____
4. If over \$100.00 cumulative, please provide: Occupation: _____ Employer: _____ Place of Business: _____				
Page Subtotal:		\$ <u>5,000</u>	\$ <u>0</u>	\$ <u>5,000</u>
Grand Total: (Complete on last page of Schedule)		\$ <u>5,000</u>	\$ <u>0</u>	\$ <u>5,000</u>
Page <u>1</u> of <u>1</u>		Forward to #1 Summary Page	Forward to #2 Summary Page	



**MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS**

ITEMIZED EXPENDITURES SCHEDULE 2 LEGAL DEFENSE FUND	1. Legal Defense Fund I.D. Number and Name: <u>005 DANIEL DEVINE LEGAL DEFENSE FUND</u>		
2. Name and address of person or vendor paid	3. Purpose	4. Date	5. Amount
SOMMERS SCHWARTZ P.C. 1 TOWNE CENTER SQ, SUITE 1700 SOUTHFIELD MI, 48076	LEGAL FEES	<u>4/2/16</u>	\$ <u>2723.40</u>
SOMMERS SCHWARTZ P.C. 1 TOWNE CENTER SQ, SUITE 1700 SOUTHFIELD, MI 48076	LEGAL FEES	<u>4/28/16</u>	\$ <u>5,182.50</u>
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
Page Subtotal			\$ <u>7,905.90</u>
Grand Total (Complete on last page of Schedule)			\$ <u>7,905.90</u>
Page <u>1</u> of <u>1</u>			Forward to #3 Summary Page

04/20/2016 11:49 0077

PAGE 01



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

LEGAL DEFENSE FUND
COVER PAGE

FAX TO EVELYN QUIROGA
517-373-0941

Report must be legible, typed or printed in ink and signed by the Treasurer/Designated Record Keeper and Official.

FOR OFFICIAL USE ONLY

RECEIVED/FILED
MICHIGAN DEPT OF STATE
2016 APR 20 AM 11:56
ELECTIONS/GREAT SEAL

<p>1a. Legal Defense Fund I.D. Number: <u>005</u></p> <p>1b. Legal Defense Fund Name: <u>DANIEL DEVINE LEGAL DEFENSE FUNDS</u></p> <p>1c. Legal Defense Fund Address: <u>4511 LAKEVIEW CT. BLOOMFIELD HILLS, MI 48301</u></p> <p>1d. Legal Defense Fund Phone: <u>248-538-4159</u></p>	<p>2a. Official's Full Name: <u>DANIEL C. DEVINE, JR</u></p> <p>2b. Official's Office: <u>TREASURER OF CHARTER TOWNSHIP OF BLOOMFIELD</u></p>
<p>3a. Treasurer's Full Name: <u>DANIEL C. DEVINE, JR</u></p> <p>3b. Treasurer's Residential Address: <u>4511 LAKEVIEW CT. BLOOMFIELD HILLS, MI 48301</u></p>	<p>3c. Treasurer's Business Address: <u>4200 TELEGRAPH RD. P.O. BOX 489 BLOOMFIELD HILLS, MI 48303-0489</u></p> <p>3d. Treasurer's Phone Number(s): _____</p>
<p>4a. Quarterly Transaction Report Covering:</p> <p><input checked="" type="checkbox"/> January 1 – March 31; Due: April 25th</p> <p><input type="checkbox"/> April 1 – June 30; Due: July 25th</p> <p><input type="checkbox"/> July 1 – September 30; Due: October 25th</p> <p><input type="checkbox"/> October 1 – December 31; Due: January 25th</p> <p>4b. <input type="checkbox"/> Amendment to Transaction Report: also mark (4a) to indicate which Report is being amended)</p>	<p>5. <input type="checkbox"/> Dissolution of Legal Defense Fund:</p> <p>Effective Date of Dissolution ____/____/____</p> <p>By checking this item, I/We certify that the Legal Defense Fund has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Itemized Expenditure Schedule 2 and the Summary Page.</p>

6 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.

Official's Signature and Date: 04/19/2016

Treasurer's/Designated Record Keeper's Signature and Date: 04/19/2016

04/20/2016 11:49 0077

PAGE 02



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

LEGAL DEFENSE FUND
SUMMARY PAGE

FOR OFFICIAL USE ONLY

Summary Page

	Column I This Period	Column II Cumulative Calendar Year
1. Contributions	1a. \$ <u>17,937.72</u>	1b. \$ <u>17,937.72</u>
2. In-Kind Contributions	2a. \$ <u>0</u>	2b. \$ <u>0</u>
3. TOTAL CONTRIBUTIONS	3a. \$ <u>17,937.72</u>	3b. \$ <u>17,937.72</u>
4. Itemized Expenditures	4a. \$ <u>21,900.24</u>	
5. Unitemized Expenditures (less than \$50.01 each - no Schedule)	5a. \$ <u>0</u>	
6. TOTAL EXPENDITURES	6a. \$ <u>21,900.24</u>	6b. \$ <u>21,900.24</u>
BALANCE STATEMENT		
7. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	7. \$ <u>7295.35</u>	
8. Amount received during reporting period (Item 1a.)	8. \$ <u>17,937.72</u>	
9. SUBTOTAL Add lines 7 and 8	9. \$ <u>25,233.07</u>	
10. Amount expended during reporting period (Item 6a.)	10. \$ <u>21,900.24</u>	
11. ENDING BALANCE (Subtract line 10 from line 9)	11. \$ <u>3,332.83</u>	
*The ending balance must always be a positive number.		



MICHIGAN DEPARTMENT OF STATE
 BUREAU OF ELECTIONS



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND		1. Legal Defense Fund I.D. Number and Name: <u>005 DANIEL DEVINE LEGAL DEFENSE FUND</u>		
Enter contributor's name and address:				
2. Name and Address: <u>DANIEL DEVINE, JR</u> <u>4511 LAKEVIEW CT.</u> <u>BLOOMFIELD HILLS, MI 48301</u>		3. Date of Receipt: <u>2/3/2016</u>		
4. If over \$100.00 cumulative, please provide: Occupation: <u>TREASURER</u>		\$ <u>17,937.72</u>	\$ _____	\$ _____
Employer: <u>BLOOMFIELD TOWNSHIP</u> Place of Business: <u>BLOOMFIELD TOWNSHIP MICHIGAN</u>				
2. Name and Address:		3. Date of Receipt: _____		
4. If over \$100.00 cumulative, please provide: Occupation: _____		\$ _____	\$ _____	\$ _____
Employer: _____ Place of Business: _____				
2. Name and Address:		3. Date of Receipt: _____		
4. If over \$100.00 cumulative, please provide: Occupation: _____		\$ _____	\$ _____	\$ _____
Employer: _____ Place of Business: _____				
2. Name and Address:		3. Date of Receipt: _____		
4. If over \$100.00 cumulative, please provide: Occupation: _____		\$ _____	\$ _____	\$ _____
Employer: _____ Place of Business: _____				
2. Name and Address:		3. Date of Receipt: _____		
4. If over \$100.00 cumulative, please provide: Occupation: _____		\$ _____	\$ _____	\$ _____
Employer: _____ Place of Business: _____				
2. Name and Address:		3. Date of Receipt: _____		
4. If over \$100.00 cumulative, please provide: Occupation: _____		\$ _____	\$ _____	\$ _____
Employer: _____ Place of Business: _____				
Page Subtotal:		\$ <u>17,937.72</u>	\$ _____	\$ _____
Grand Total: (Complete on last page of Schedule)		\$ <u>17,937.72</u>	\$ _____	\$ _____
Page <u>1</u> of <u>1</u>		Forward to #1 Summary Page	Forward to #2 Summary Page	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES SCHEDULE 2 LEGAL DEFENSE FUND	1. Legal Defense Fund I.D. Number and Name: <u>005 DANIEL DEVINE LEGAL DEFENSE FUND</u>		
2. Name and address of person or	3. Purpose	4. Date	5. Amount
VOTE DAN DEVINE FOR BLOOMFIELD TOWNSHIP TREASURER 4511 LAKEVIEW CT. BLOOMFIELD HILLS, MI 48301	REIMBURSEMENT AS PER OAKLAND COUNTY CLERK INSTRUCTION	<u>2/1/2016</u>	\$ <u>7,000.00</u>
VOTE DAN DEVINE FOR BLOOMFIELD TOWNSHIP TREASURER 4511 LAKEVIEW CT. BLOOMFIELD HILLS, MI 48301	REIMBURSEMENT AS PER OAKLAND COUNTY CLERK INSTRUCTION	<u>2/1/2016</u>	\$ <u>10,937.72</u>
SOMMERS SCHWARZ PC ONE TOWNE SQUARE, SUITE 1700 SOUTHFIELD, MI 48076-3779	ATTORNEY FEES FOR LEGAL REPRESENTATION EXPAINED IN AMENDED 2015 OCTOBER FILING OF 11/20/2015	<u>2/12/16</u>	\$ <u>3,962.52</u>
			\$ _____
			\$ _____
			\$ _____
			\$ _____
			\$ _____
			\$ _____
			\$ _____
			\$ _____
Page Subtotal			\$ <u>21,900.24</u>
Grand Total (Complete on last page of Schedule)			\$ <u>21,900.24</u>
Page <u>1</u> of <u>1</u>			Forward to #3 Summary Page

01/25/2016 15:20 0077

PAGE 01



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

LEGAL DEFENSE FUND
COVER PAGE

FAX TO EVELYN GUIROGA
517-373-0941

Report must be legible, typed or printed in ink and signed by the Treasurer/Designated Record Keeper and Official.

FOR OFFICIAL USE ONLY

RECEIVED/FILED
MICHIGAN DEPT OF STATE
2016 JAN 25 PM 2:38
ELECTIONS/GREAT SEAL

<p>1a. Legal Defense Fund I.D. Number: <u>005</u></p> <p>1b. Legal Defense Fund Name: <u>DANIEL DEVINE LEGAL DEFENSE FUND</u></p> <p>1c. Legal Defense Fund Address: <u>4511 LAKEVIEW CT BLOOMFIELD HILLS, MI 48301</u></p> <p>1d. Legal Defense Fund Phone: <u>248-538-4159</u></p>	<p>2a. Official's Full Name: <u>DANIEL C. DEVINE, JR.</u></p> <p>2b. Official's Office: <u>TREASURER OF CHARTER TOWNSHIP OF BLOOMFIELD</u></p>
<p>3a. Treasurer's Full Name: <u>DANIEL C. DEVINE, JR</u></p> <p>3b. Treasurer's Residential Address: <u>4511 LAKEVIEW CT. BLOOMFIELD HILLS, MI 48301</u></p>	<p>3c. Treasurer's Business Address: <u>4200 TELEGRAPH RO. P.O. BOX 489 BLOOMFIELD HILLS, MI 48303-0489</u></p> <p>3d. Treasurer's Phone Number(s): _____</p>
<p>4a. Quarterly Transaction Report Covering:</p> <p><input type="checkbox"/> January 1 – March 31; Due: April 25th</p> <p><input type="checkbox"/> April 1 – June 30; Due: July 25th</p> <p><input type="checkbox"/> July 1 – September 30; Due: October 25th</p> <p><input checked="" type="checkbox"/> October 1 – December 31; Due: January 25th</p> <p>4b. <input type="checkbox"/> Amendment to Transaction Report: also mark (4a) to indicate which Report is being amended)</p>	<p>5. <input type="checkbox"/> Dissolution of Legal Defense Fund:</p> <p>Effective Date of Dissolution _____/_____/_____ By checking this item, I/We certify that the Legal Defense Fund has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Itemized Expenditure Schedule 2 and the Summary Page.</p>
<p>6. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.</p> <p>Official's Signature and Date: <u></u> <u>01/23/2016</u></p> <p>Treasurer's/Designated Record Keeper's Signature and Date: <u></u> <u>01/23/2016</u></p>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

LEGAL DEFENSE FUND
SUMMARY PAGE

FOR OFFICIAL USE ONLY

Summary Page

	Column I This Period	Column II Cumulative Calendar Year
1. Contributions	1a. \$ <u>35,943.72</u>	1b. \$ <u>42,943.72</u>
2. In-Kind Contributions	2a. \$ <u>0.00</u>	2b. \$ <u>0.00</u>
3. TOTAL CONTRIBUTIONS	3a. \$ <u>35,943.72</u>	3b. \$ <u>42,943.72</u>
4. Itemized Expenditures	4a. \$ <u>30,648.37</u>	
5. Unitemized Expenditures (less than \$50.01 each - no Schedule)	5a. \$ <u>0.00</u>	
6. TOTAL EXPENDITURES	6a. \$ <u>30,648.37</u>	6b. \$ <u>30,648.37</u>
BALANCE STATEMENT		
7. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	7. \$ <u>2,000.00</u>	
8. Amount received during reporting period (Item 1a.)	8. \$ <u>35,943.72</u>	
9. SUBTOTAL Add lines 7 and 8	9. \$ <u>37,943.72</u>	
10. Amount expended during reporting period (Item 6a.)	10. \$ <u>30,648.37</u>	
11. ENDING BALANCE (Subtract line 10 from line 9)	11. \$ <u>7,295.35</u>	

* The ending balance must always be a positive number.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND		1. Legal Defense Fund I.D. Number and Name: 005 DANIEL DEVINE LEGAL DEFENSE FUND		
Enter contributor's name and address.		5. Amount	6. Amount (In-Kind)	7. Cumulative
2. Name and Address: VOTE DAN DEVINE FOR BLOOMFIELD TOWNSHIP TREASURER 4511 LAKEVIEW CT. BLOOMFIELD TOWNSHIP, MI 48301		3. Date of Receipt: 10/22/2015		
4. If over \$100.00 cumulative, please provide: Occupation: _____ Employer: _____ Place of Business: _____		\$10,937.72	\$ 0	\$17,937.72
2. Name and Address: DANIEL C. DEVINE, JR 4511 LAKEVIEW CT. BLOOMFIELD HILLS, MI 48301		3. Date of Receipt: 12/11/2015		
4. If over \$100.00 cumulative, please provide: Occupation: TREASURER Employer: BLOOMFIELD TOWNSHIP Place of Business: 4200 TELEGRAPH BLOOMFIELD HILLS, MI		\$ 6.00	\$ 0	\$ 6.00
2. Name and Address: DANIEL C. DEVINE, JR 4511 LAKEVIEW CT. BLOOMFIELD HILLS, MI 48301		3. Date of Receipt: 12/14/2015		
4. If over \$100.00 cumulative, please provide: Occupation: TREASURER Employer: BLOOMFIELD TOWNSHIP Place of Business: 4200 TELEGRAPH BLOOMFIELD HILLS, MI		\$25,000.00	\$ 0	\$25,000.00
2. Name and Address: _____		3. Date of Receipt: _____		
4. If over \$100.00 cumulative, please provide: Occupation: _____ Employer: _____ Place of Business: _____		\$ _____	\$ _____	\$ _____
2. Name and Address: _____		3. Date of Receipt: _____		
4. If over \$100.00 cumulative, please provide: Occupation: _____ Employer: _____ Place of Business: _____		\$ _____	\$ _____	\$ _____
2. Name and Address: _____		3. Date of Receipt: _____		
4. If over \$100.00 cumulative, please provide: Occupation: _____ Employer: _____ Place of Business: _____		\$ _____	\$ _____	\$ _____
Page Subtotal:		\$35,943.72	\$	\$42,943.72
Grand Total: (Complete on last page of Schedule)		\$35,943.72	\$	\$42,943.72
Page <u>1</u> of <u>1</u>		Forward to #1 Summary Page	Forward to #2 Summary Page	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

LEGAL DEFENSE FUND
COVER PAGE

Fax to EVELYN QUIROGA
517-373-0941

Report must be legible, typed or printed in ink and signed by the Treasurer/Designated Record Keeper and Official.

FOR OFFICIAL USE ONLY

<p>1a. Legal Defense Fund I.D. Number: <u>005</u></p> <p>1b. Legal Defense Fund Name: Daniel Devinel Legal Defense Fund</p> <p>1c. Legal Defense Fund Address: 4511 Lakeview Ct. Bloomfield Hills, MI 48301</p> <p>1d. Legal Defense Fund Phone: <u>248-538-4159</u></p>	<p>2a. Official's Full Name: Daniel C. Devine, Jr.</p> <p>2b. Official's Office: Treasurer of Charter Township of Bloomfield</p>
<p>3a. Treasurer's Full Name: Daniel C. Devine, Jr.</p> <p>3b. Treasurer's Residential Address: 4511 Lakeview Ct. Bloomfield Hills, MI 48301</p>	<p>3c. Treasurer's Business Address: 4200 Telegraph Rd. P.O. Box 489 Bloomfield Hills, MI 48303-0489</p> <p>3d. Treasurer's Phone Number(s): <u>248-433-7704</u></p>
<p>4a. Quarterly Transaction Report Covering:</p> <p><input type="checkbox"/> January 1 – March 31; Due: April 25th</p> <p><input type="checkbox"/> April 1 – June 30; Due: July 25th</p> <p><input checked="" type="checkbox"/> July 1 – September 30; Due: October 25th</p> <p><input type="checkbox"/> October 1 – December 31; Due: January 25th</p> <p>4b. <input checked="" type="checkbox"/> Amendment to Transaction Report: also mark (4a) to indicate which Report is being amended)</p>	<p>5. <input type="checkbox"/> Dissolution of Legal Defense Fund:</p> <p>Effective Date of Dissolution ____/____/____</p> <p>By checking this item, I/We certify that the Legal Defense Fund has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Itemized Expenditure Schedule 2 and the Summary Page.</p>
<p>6. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.</p> <p>Official's Signature and Date: <u></u> <u>11/20/2015</u></p> <p>Treasurer's/Designated Record Keeper's Signature and Date: <u></u> <u>11/20/2015</u></p>	

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11/19/2015 19:31 0077

PAGE 01

To: State of Michigan, Ruth Johnson, Secretary of State, Department of State,
Bureau of Elections, Disclosure Division

Attention to: Evelyn Quiroga @ fax # 517-373-0941

From: Daniel Devine Legal Defense Fund, 4511 Lakeview Ct., Bloomfield Hills, MI
48301, Daniel Devine, Treasurer of the Daniel Devine Legal Defense Fund

Date: 11/20/15

AMENDED 2015 OCTOBER STATEMENT

In response to Notice of Error or Omission dated 11/6/15

Response to Description 1:

"Contribution" is defined by the Legal Defense Fund Act in relevant part as an expenditure or donation of money made for the purpose of defending an elected official in a criminal, civil or administrative action that arises directly out of the conduct of the elected official.

"Expenditures" from a legal defense fund may be used to pay for attorney fees, or related legal costs, for the defense of the elected official for whom the fund was established.

"Defense" is defined in the American Heritage Dictionary, Second College Edition, 1985 as "The act of defending against attack, danger or injury; protection."

The Daniel Devine Legal Defense Fund was established to accept money to pay legal fees or related legal costs for elected official Daniel Devine in civil and administrative actions arising directly out of the conduct of my governmental duties inextricably intertwined as both the elected Treasurer of Bloomfield Township and as an administrator employee of the Township.

On 7/13/15, the Bloomfield Township Board of Trustees ambushed me in a surprise attack administrative action by a Censure Proceeding at a Township Board meeting without prior notice or opportunity to defend myself against charges leveled against me culminating in the adjudication of guilt for "Official

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PAGE 02

Misconduct" and "Willful Neglect of Duty". As the administrative action was couched as a Resolution for Censure, there was neither provision for due process nor any appeal procedure for the action taken against me in that forum. The only way to defend myself against these claims was to file an action in Oakland County Circuit Court, Case No. 2015-149016-CK filed on 9/10/15.

Response to Description 2:

A candidate committee may make expenditures to a legal defense fund to pay legal costs if the action relates to Michigan Election Law pursuant to the Michigan Campaign Finance Act at MCL 169.221a stating in relevant part:

"(2) A candidate committee of a candidate who is elected or appointed to an elective office shall not make an expenditure to defend the elected or appointed official in a civil or criminal action or pay legal costs unless the action or legal costs do any of the following:

(c) Relate to the compliance with this act or the Michigan election law, 1954 PA 116, MCL 168.1 to 168.992."

The Censure Proceeding conducted as an administrative action was crafted to make charges exhibited in writing and verified as truthful by those Board members voting in the affirmative to find me guilty of "Official Misconduct" and "Willful Neglect of Duty" in order to trigger the procedure under Michigan Election Law MCL 168.369 for my removal from office by the Governor. Pursuant to MCL 169.221a (as cited above), expenditure of funds for my legal costs falls squarely within subsection 2(c), in that it relates to and arises in connection with and under MCL 168.369 and the Board's initiating the process for my removal from office by way of the Resolution for Censure.

The legal costs paid for by the use of the candidate campaign committee's donation to the Legal Defense Fund are for the defense of myself against false allegations made against me in an administrative action by the Bloomfield Township Board of Trustees and to prevent my removal from office under MCL 168.369. Therefore the use of said funds for said purposes are lawful and appropriate.

Respectfully submitted by:

A handwritten signature in black ink, appearing to read "Daniel Devine", is written over a horizontal line.

Daniel Devine

Treasurer for Daniel Devine Legal Defense Fund



STATE OF MICHIGAN
RUTH JOHNSON, SECRETARY OF STATE
DEPARTMENT OF STATE
LANSING

November 6, 2015

MR. DANIEL DEVINE, TREASURER
DANIEL DEVINE LDF
4511 LAKEVIEW COURT
BLOOMFIELD HILLS, MI 48301

ID#: 005

FIRST CLASS MAIL

NOTICE OF ERROR OR OMISSION

Please be advised that one or more apparent error(s) or omission(s) were found in a review of the 2015 OCTOBER STATEMENT filed by your Legal Defense Fund.

A description of the apparent error(s) or omission(s) is attached. Please review the description and make the necessary corrections in an amendment to the above Statement. The amendment to the Statement is due in this office no later than November 20, 2015.

If we do not receive a response to this notice by the above due date, MCL 15.531(8) requires this office to refer the matter to the Attorney General.

If you have any questions, contact us immediately.

Sincerely,


Evelyn Quiroga

DISCLOSURE DIVISION

Attachment

1. A contribution is defined under the Legal Defense Fund Act as follows:

(a) "Contribution" means a payment, gift, subscription, assessment, expenditure, contract, payment for services, dues, advance, forbearance, loan, or donation of money or anything of ascertainable monetary value, or a transfer of anything of ascertainable monetary value to a person, made for or allocated to the purpose of defending an elected official in a criminal, civil, or administrative action that arises directly out of the conduct of the elected official's governmental duties. Contribution includes an officer holder's own money or property, other than the officer holder's homestead, used on behalf of the officer holder's defense, the granting of discounts or rebates not available to the general public, and the endorsing or guaranteeing of a loan for the amount the endorser or guarantor is liable. Contribution does not include an offer or tender of a contribution if expressly and unconditionally rejected, returned, or refunded within 30 business days after receipt.

Expenditures are restricted under Section 15 which states "a person shall make expenditures from a legal defense fund only for administration of the fund, attorney fees, or related legal costs, which shall not include direct or indirect payments for media purchases, media consulting, or mass mailings. An expenditure from a legal defense fund shall be made for the legal defense of only the 1 elected official for whom the fund was established'.

Taking these constraints specified in the LDFA into account, please clarify the nature of the expenditure made for the Legal Defense Fund and how it comports with the requirements of the LDFA.

2. It appears that the LDF may have accepted a prohibited contribution by accepting \$7,000.00 from the Vote Dan Devine for Bloomfield Township Treasurer. This is a registered candidate committee with the Oakland County Clerk's Office. Section 21 of the Michigan Campaign Finance Act reads as follows:

(1) A candidate committee of a candidate who is elected or appointed to an elective office may make an expenditure for an incidental expense for the elective office to which that candidate was elected or appointed. Except as otherwise specifically provided in this act, an expenditure for an incidental expense by a candidate committee under this section is an expenditure under this act.

(2) A candidate committee of a candidate who is elected or appointed to an elective office shall not make an expenditure to defend the elected or appointed official in a civil or criminal action or to pay legal costs unless the action or legal costs do any of the following:

(a) Relate to a recall election.

(b) Relate to a recount of votes as provided in the Michigan election law, 1954 PA 116, MCL 168.1 to 168.992.

(c) Relate to compliance with this act or the Michigan election law, 1954 PA 116, MCL 168.1 to 168.992.

(d) Tangibly benefit the nomination or election of a candidate.

(3) Any legal costs not authorized under subsection (2) shall be paid from a legal defense fund as provided in the legal defense fund act, 2008 PA 288, MCL 15.521 to 15.539.

(4) In addition to any other requirements of this act, a campaign statement of a candidate committee shall contain the purpose of any expenditure for legal costs made by that committee as described in subsection (2).

(5) An individual who violates subsection (2) is guilty of a misdemeanor punishable by a fine of not more than \$1,000.00 or imprisonment for not more than 90 days, or both.

In view of this, please clarify or explain the nature of this contribution. Prohibited funds received by the Legal Defense Fund should be returned immediately to the Candidate Committee.

REMINDER: When filing an amended LDF Statement please include a signed and completed cover page showing which statement is being amended. Include only those pages which are being amended. Submit one original of the amended report.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

LEGAL DEFENSE FUND
COVER PAGE

Report must be legible, typed or printed in ink and signed by the Treasurer/Designated Record Keeper and Official.

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 2015 OCT 19 AM 10:03
 OFFICE OF THE GREAT SEAL

<p>1a. Legal Defense Fund I.D. Number: <u>005</u></p> <p>1b. Legal Defense Fund Name: <u>DANIEL DEVINE LEGAL DEFENSE FUND</u></p> <p>1c. Legal Defense Fund Address: <u>4511 LAKEVIEW CT.</u> <u>BLOOMFIELD HILLS, MI 48301</u></p> <p>1d. Legal Defense Fund Phone: <u>248-</u> <u>538-4159</u></p>	<p>2a. Official's Full Name: <u>DANIEL C. DEVINE, JR.</u></p> <p>2b. Official's Office: <u>TREASURER OF CHARTER</u> <u>TOWNSHIP OF BLOOMFIELD</u></p>
<p>3a. Treasurer's Full Name: <u>DANIEL C. DEVINE, JR.</u></p> <p>3b. Treasurer's Residential Address: <u>4511 LAKEVIEW CT.</u> <u>BLOOMFIELD HILLS, MI 48301</u></p>	<p>3c. Treasurer's Business Address: <u>4200 TELEGRAPH RD.</u> <u>P.O. BOX 489</u> <u>BLOOMFIELD HILLS, MI 48303-0489</u></p> <p>3d. Treasurer's Phone Number(s): <u>248-433-7704</u></p>
<p>4a. Quarterly Transaction Report Covering:</p> <p><input type="checkbox"/> January 1 – March 31; Due: April 25th</p> <p><input type="checkbox"/> April 1 – June 30; Due: July 25th</p> <p><input checked="" type="checkbox"/> July 1 – September 30; Due: October 25th</p> <p><input type="checkbox"/> October 1 – December 31; Due: January 25th</p> <p>4b. <input type="checkbox"/> Amendment to Transaction Report: also mark (4a) to indicate which Report is being amended)</p>	<p>5. <input type="checkbox"/> Dissolution of Legal Defense Fund:</p> <p style="text-align: center;">Effective Date of Dissolution</p> <p style="text-align: center;">____/____/____</p> <p>By checking this item, I/We certify that the Legal Defense Fund has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Itemized Expenditure Schedule 2 and the Summary Page.</p>
<p>6. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.</p>	
<p>Official's Signature and Date: <u></u> <u>10, 15, 2015</u></p>	
<p>Treasurer's/Designated Record Keeper's Signature and Date: <u></u> <u>10, 15, 2015</u></p>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

LEGAL DEFENSE FUND
SUMMARY PAGE

FOR OFFICIAL USE ONLY

Summary Page

	Column I This Period	Column II Cumulative Calendar Year
1. Contributions	1a. \$ <u>7,000.00</u>	1b. \$ <u>7,000.00</u>
2. In-Kind Contributions	2a. \$ _____	2b. \$ _____
3. TOTAL CONTRIBUTIONS	3a. \$ <u>7,000.00</u>	3b. \$ <u>7,000.00</u>
4. Itemized Expenditures	4a. \$ <u>5,000.00</u>	
5. Unitemized Expenditures (less than \$50.01 each - no Schedule)	5a. \$ _____	
6. TOTAL EXPENDITURES	6a. \$ <u>5,000.00</u>	6b. \$ <u>5,000.00</u>

BALANCE STATEMENT

7. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	7. \$ <u>0000.00</u>
8. Amount received during reporting period (Item 1a.)	8. \$ <u>7,000.00</u>
9. SUBTOTAL Add lines 7 and 8	9. \$ <u>7,000.00</u>
10. Amount expended during reporting period (Item 6a.)	10. \$ <u>5,000.00</u>
11. ENDING BALANCE (Subtract line 10 from line 9)	11. \$ <u>2,000.00</u> *

* The ending balance must always be a positive number.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND		1. Legal Defense Fund I.D. Number and Name: 005 DANIEL DEVINE LEGAL DEFENSE FUND		
Enter contributor's name and address.		5. Amount	6. Amount (In-Kind)	7. Cumulative
2. Name and Address: VOTE DAN DEVINE FOR BLOOMFIELD TOWNSHIP TREASURER 4511 LAKEVIEW CT. BLOOMFIELD TOWNSHIP, MI 48301 3. Date of Receipt: 7/22/2015		\$ 7,000.00	\$	\$ 7,000.00
4. If over \$100.00 cumulative, please provide: Occupation: _____ Employer: _____ Place of Business: _____				
2. Name and Address: _____ 3. Date of Receipt: _____		\$ _____	\$ _____	\$ _____
4. If over \$100.00 cumulative, please provide: Occupation: _____ Employer: _____ Place of Business: _____				
2. Name and Address: _____ 3. Date of Receipt: _____		\$ _____	\$ _____	\$ _____
4. If over \$100.00 cumulative, please provide: Occupation: _____ Employer: _____ Place of Business: _____				
2. Name and Address: _____ 3. Date of Receipt: _____		\$ _____	\$ _____	\$ _____
4. If over \$100.00 cumulative, please provide: Occupation: _____ Employer: _____ Place of Business: _____				
2. Name and Address: _____ 3. Date of Receipt: _____		\$ _____	\$ _____	\$ _____
4. If over \$100.00 cumulative, please provide: Occupation: _____ Employer: _____ Place of Business: _____				
Page Subtotal:		\$ 7,000.00	\$	\$ 7,000.00
Grand Total: (Complete on last page of Schedule)		\$ 7,000.00	\$	\$ 7,000.00
Page 1 of 1		Forward to #1 Summary Page	Forward to #2 Summary Page	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES SCHEDULE 2 LEGAL DEFENSE FUND		1. Legal Defense Fund I.D. Number and Name: <u>005 DANIEL DEVINE LEGAL DEFENSE FUND</u>		
2. Name and address of person or vendor paid		3. Purpose	4. Date	5. Amount
SOMMERS SCHWARTZ, PC ONE TOWNE SQUARE, SUITE 1700 SOUTHFIELD, MI 48076-3739		RETAINER FOR LAW FIRM FOR LEGAL REPRESENTATION	8/3/2015	\$ 5,000.00
				\$ _____
				\$ _____
				\$ _____
				\$ _____
				\$ _____
				\$ _____
				\$ _____
				\$ _____
				\$ _____
				\$ _____
				\$ _____
				\$ _____
Page Subtotal				\$ 5,000.00
Grand Total (Complete on last page of Schedule)				\$ 5,000.00
Page <u>1</u> of <u>1</u>				Forward to #3 Summary Page



STATE OF MICHIGAN
RUTH JOHNSON, SECRETARY OF STATE
DEPARTMENT OF STATE
LANSING

August 7, 2015

Mr. Daniel Devine, Treasurer
Daniel Devine LDF
4511 Lakeview Court
Bloomfield Hills, Michigan 48301

RE: Daniel Devine Legal Defense Fund; ID# 0005

**LEGAL DEFENSE FUND ACT
REGISTRATION IDENTIFICATION NUMBER ASSIGNMENT**

This acknowledges receipt of an original Statement of Organization form filed under the Legal Defense Fund Act (LDFA). The identification number appearing above in bold has been assigned to the fund appearing on the enclosed date stamped copy of the original Statement of Organization. Please enter the Identification Number on all filings and correspondence with this office.

Publications On The Internet: The Michigan Department of State's Bureau of Elections has conveniently located all of the Legal Defense Fund Act disclosure forms and publications on the Internet. The disclosure forms and publications are easy to access, print and download. To locate our Legal Defense Fund (LDF) home page:

1. Go to: www.Michigan.gov/elections
2. Click on "Legal Defense Funds"

Campaign Statements: Detailed campaign statements must be filed by all registrants. The filing must be made even if there are no receipts or expenditures to report. Four (4) separate filings must be made each year according to the following schedule:

January 1 – March 31; Due: April 25th
April 1 – June 30; Due: July 25th
July 1 – September 30; Due: October 25th
October 1 – December 31; Due: January 25th

Questions? Please do not hesitate to contact Evelyn Quiroga of this office if you have any questions by email at quiroga1@michigan.gov.

Bureau of Elections
Richard H. Austin Building– 1st Floor
P.O. Box 20126
Lansing, Michigan 48901-0726
Phone: 517-373-2540 Email: disclosure@michigan.gov



ORIGINAL OR AMENDED
STATEMENT OF ORGANIZATION FORM FOR LEGAL DEFENSE FUND

1. Legal Defense Fund ID #: 005

2. Type of Filing: Original Filing Amendment: Items: _____ Eff. Date: _____

3. Full Name of Legal Defense Fund: (Must include Official's first and last name and the words "Legal Defense Fund")
Daniel Devine Legal Defense Fund

4. Public Official Full Name (Last, First, M.I.):

Devine, Daniel, Jr., C.

5a. Office (Check one):

- | | | | | |
|---|---|--|--|--|
| <input type="checkbox"/> Governor | <input type="checkbox"/> State Senator | <input type="checkbox"/> MSU Trustee | <input type="checkbox"/> Circuit Court | <input checked="" type="checkbox"/> Local or Other please specify:
<u>Bloomfield Township Treasurer</u> |
| <input type="checkbox"/> Lt. Governor | <input type="checkbox"/> State Rep. | <input type="checkbox"/> WSU Gov. | <input type="checkbox"/> District Court | |
| <input type="checkbox"/> Sec. of State | <input type="checkbox"/> State Bd. of Ed. | <input type="checkbox"/> Supreme Court | <input type="checkbox"/> Probate Court | |
| <input type="checkbox"/> Attorney General | <input type="checkbox"/> UofM Reg. | <input type="checkbox"/> Appeals Court | <input type="checkbox"/> Municipal Court | |
| | | | | |

5b. District/Circuit # or Jurisdiction: _____

6. A description of the criminal, civil or administrative action at issue:

Legal action to defend against removal from public office and relating to action taken on July 13, 2015 by Bloomfield Township Board of Trustees in Resolution to Censure Township Treasurer Devine for "Official Misconduct".

7. Date of Initial Contribution/Expenditure: 07 / 22 / 2015

8a. Complete Mailing Address (May be PO Box):

4511 Lakeview Ct.
Bloomfield Hills, MI 48301

8b. Complete Street Address (May not be PO Box):

4511 Lakeview Ct.
Bloomfield Hills, MI 48301

8c. Legal Defense Fund Phone #: 248-538-4159

8d. Legal Defense Fund Fax #: _____

8e. Legal Defense Fund E-mail Address: _____

8f. Legal Defense Fund Web Address: _____

9a. Treasurer Name and Complete Street Address:

Daniel C. Devine, Jr.
4511 Lakeview Ct.
Bloomfield Hills, MI 48301

9b. Treasurer Phone #: 248-538-4159

9c. Treasurer E-mail Address: _____

10. Designated Recordkeeper Name:

11. Name and Address of Depository or Intended Depository of Legal Defense Fund funds. (Michigan Bank, Credit Union or Savings & Loan Association)

Independent Bank
4140 W. Maple Rd.
Bloomfield Hills, MI 48301

12. Verification: I/We certify that all reasonable diligence was used in the preparation of the above statement and that the contents are true, accurate and complete to the best of my/our knowledge or belief.

Public Official Signature: _____ Date: 07 / 27 / 2015

Current Treasurer Signature: _____ Date: 07 / 23 / 2015

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