

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

November 13, 2012

Walker Yes Ben Reisterer, Treasurer 2611 Hillsdale Drive Walker, Michigan 49544

Dear Mr. Reisterer:

The Department of State (Department) received a formal complaint filed against you by Amy Hayes on behalf of Friends of Transit-Walker, alleging that you violated the Michigan Campaign Finance Act (MCFA or Act), 1976 PA 388, MCL 169.201 et seq. The investigation and resolution of these complaints is governed by section 15 of the Act and the corresponding administrative rules, R 169.51 et seq. Copies of the complaint and supporting documentation are enclosed with this letter.

The MCFA requires the treasurer of a committee to file complete and accurate finance statements and reports. A person who files an incomplete or inaccurate statement may be subject to a civil fine of up to \$1,000.00. MCL 169.234(7).

Ms. Hayes alleges that the campaign statement you filed on behalf of Walker Yes is inaccurate in its reporting of the committee's expenditures on post cards and that the report omits expenditures for robocalls and postage. Ms. Hayes provided as evidence a copy of the committee's preelection general finance statement filed on October 26, 2012 and a quote for postcards from Cascade Printing.

The purpose of this letter is to inform you of the Department's examination of these matters and your right to respond to the allegations before the Department proceeds further. It is important to understand that the Department is neither making this complaint nor accepting the allegations as true.

If you wish to file a written response to this complaint, you are required to do so within 15 business days of the date of this letter. Your response may include any written statement or additional documentary evidence you wish to submit. All materials must be sent to the Department of State, Bureau of Elections, Richard H. Austin Building, 1st Floor, 430 West Allegan Street, Lansing, Michigan 48918. If you fail to submit a response, the Department will render a decision based on the evidence furnished by the complainant.

A copy of your reply will be provided to Ms. Hayes, who will have an opportunity to submit a rebuttal statement to the Department. After reviewing all of the statements and materials provided by the parties, the Department will determine whether "there may be reason to believe that a violation of [the MCFA] has occurred [.]" MCL 169.215(10). Note that the Department's

Walker Yes Ben Reisterer, Treasurer November 13, 2012 Page 2

enforcement powers include the possibility of entering a conciliation agreement or conducting an administrative hearing.

If you have any questions concerning this matter, you may contact me at (517) 241-0395.

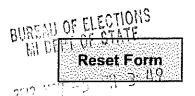
Sincerely,

Lori A. Bourbonais Bureau of Elections

Michigan Department of State

c: Amy Hayes

Michigan Department of State Campaign Finance Complaint Form



This complaint form may be used to file a complaint alleging that someone violated the Michigan Campaign Finance Act (the MCFA, 1976 PA 388, as amended; MCL 169.201 *et seq.*).

Please print or type all information.

I allege that the MCFA was violated as follows:

Section 1. Complainant		
Friends of Transit-Walker		Daytime Telephone Number 616-634-0916
Mailing Address		010-034-0310
3343 Peach Ridge NW		
City Walker	State Mi	^{Zip} 49544
Section 2. Alleged Violator		
Walker Yes		
Mailing Address 2611 Hillsdale Dr.		
^{City} Walker	State Mi	^{Zip} 49544
Section 3. Alleged Violations (Use additional shee	Lif more spac	e is needed.)
Section(s) of the MCFA violated: Itemized Direct Exp		
Explain how those sections were violated:		
Page 2 of 3 on Schedule 4B have post cards that have been printed by no postage paid or	their report. They d	id not account for it on their report.
Page 2 of 3 on Schedule 4B have paid Cascade Printing and Graphics to print post cards	for them. I have gotte	en quotes of Cascade Printing and they are not close to the
numbers that Walker Yes claims they paid. They have also 8	ent out	robo calls and they do
not have any on their expense report. Evidence that supports those allegations (attach copies of pertinent does I have attached a copy of their mailer to		
I have also attached a copy of the quote that I receive	d from Casc	ade Printing and Graphics.
We have recordings of the robo	calls	on an answering
machine that we can submit i		_

Section 4. Certification (Required)

I certify that to the best of my knowledge, information, and belief, formed after a reasonable inquiry under the circumstances, each factual contention of this complaint is supported by evidence.

X

Signature of Compilinant

11/02/2012

Date

Section 5. Certification without Evidence (Supplemental to Section 4)

Section 15(6) of the MCFA (MCL 169.215) requires that the signed certification found in section 4 of this form be included in every complaint. However, if, after a reasonable inquiry under the circumstances, you are unable to certify that certain factual contentions are supported by evidence, you may also make the following certification:

I certify that to the best of my knowledge, information, or belief, there are grounds to conclude that the following specifically identified factual contentions are likely to be supported by evidence after a reasonable opportunity for further inquiry. Those specific contentions are:

I have attached a copy of their mailer that shows postage paid.

I have attached a copy of their mailer that shows postage paid.

I have attached a copy of their mailer that shows postage paid.

I have attached a copy of their mailer that shows postage paid.

I have attached a copy of their mailer that shows postage paid.

I have attached a copy of their mailer that shows postage paid.

Signature of Complainant

Date

Section 15(8) of the MCFA provides that a person who files a complaint with a false certification is responsible for a civil violation of the MCFA. The person may be required to pay a civil fine of up to \$1,000.00 and some or all of the expenses incurred by the Michigan Department of State and the alleged violator as a direct result of the filing of the complaint.

Mail or deliver the completed complaint form and evidence to the following address:

Michigan Department of State
Bureau of Elections
Richard H. Austin Building – 1st Floor
430 West Allegan Street
Lansing, Michigan 48918

CASCADE PRINTING

6504 28th Street, S.E. • Suite A Grand Rapids, MI 49546 Phone (616) 222-2937 • Fax (616) 222-2939

Amy Hayes

Estimate No. E#15143

Date 11/1/12

Customer P.O. No.

Amy Hayes 616-334-5414 jokerar@yahoo.com

AMOUNT QUANTITY DESCRIPTION EDDM postcards, 8.5x11" printed full color on both sides. 100# gloss cover with AQ 797.00 2.500 (semi glossy) coating. Bundled as qty of 50 for easy drop off at post office 5,000 EDDM postcards, 8.5x11" printed full color on both sides. 100# gloss cover with AQ 1,250.00 (semi glossy) coating. Bundled as gty of 50 for easy drop off at post office 1,920.00 EDDM postcards, 8.5x11" printed full color on both sides. 100# gloss cover with AQ 10,000 (semi glossy) coating. Bundled as qty of 50 for easy drop off at post office Pricing assumes a print-ready file will be provided. Additional Layout and design services are available, to be billed at \$60/hr. We offer to make a "first time" check of your provided files to determine their suitability at no additional charge. Thanks! **SUB** Allow approx 10-12 working days EDDM postcards, 8.5x11" printed full color on both Thank You! We look forward to hearing from you. TAX Personal Service • Unbeatable Values SHIPPING 1 TOTAL

vote yes for withdrawal! ocal control, 465 · efficient service, 465 · tax cut, 465 ·

sedion of your ballot, the re Remoinber, when you see

WINTE Walker Sorg

get the PACTS and DONATE at

INTERURBAN TRANSIT PARTNERSHIP CITY OF WALKER PROPOSAL FOR WITHDRAWAL FROM

Fransit Partnership authority, provided by Act 1986 PA 196 withdraw from the Interurban known as "The Rapid", as a Shall the City of Walker as member?







PRSRT STD ECRWSS U.S. POSTAGE PAID EDDM RETAIL

like us on E3 facebook.com/walkeryes 2611 Hillside Drive Malker, MI 49544

Postal Customer

On the November Ballot, you'll be asked to vote on whether Walker should with any from the Interurban Transit Partnership (ITP) taxing authority.

A VES vote means.

A property tax cut, and

Incability to keep the same bus service (Gobus too!)

Walker's ITP Tax

\$1,400,000

Actual Cost of Bus Service

\$800,000

S600,000

Note YES on JULITURANIAL for

- / lower taxes
- \checkmark more efficient bus service

Get the facts and donate at

Don't listen to the scare tactics and misleading information!

Paid for by Walker Yes - 26 f l'Hillside brite, Walker III 195544



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

Kent County Clerk Elections Division OCT 2 6 2012

	a server state part			
BALLOT QUESTION COM	MITTEE			OR OFFICIAL USE ONLY
		[s Statement covers From: formatio	on то <u>10/21/2012</u>
a ar nrinted i	n ink and signed by the	3.This		
Report must be legible, typed or printed i treasurer or designated record keeper.		4. Co	mmilitee's Mailing Address 2617	cer, MI 49544
1. Committee I.D. Number	759 _			•
10-0			a Code and Phone: a ddress in this box is different from the	371 milten mailing address on
2. Committee Name		Are If the	a Code and Phone: 616-460-08 e address in this box is different from the Statement of Organization, mail may be	sent to this address by meaning
Walker Yes		the	Statement of Organization Statement of Organization	
5. Treasurer's Name and Residential A Ben Helsterer	ddress			
Ben Heisterer				
2611 Hillside Dr Walker, MI 49544				
Area Code and Phone 616-460)-08/1 T	7 Doeld	nated Record Keeper's Name and Mai committee has a Designated Record i	(seper)
6. Treasurer's Business Address	1	' (If the	committee has a Designate	1
Ben Reisterer				
local Hillside Dr				
Walker, MI 49544		Area Co	ode and Phone	8f. DISSOLUTION OF
Area Code and Phone			8d:	COMMITTEE REQUEST
	8b.	IT.	Post Petition Sample Filing under MCL 168.483a	Effective Date of Dissolution
8. TYPE OF STATEMENT:	TFEBRUARY STATEMEN	'']	Ellecting para
8a. RE-ELECTION	APRIL STATEMENT		(Required of Statewide Ballot Question Committees only after	- if that
OR	JULY STATEMENT			By checking this item, I certify that the committee has no assets or outstanding debts, including late outstanding debts. Note: The disposition of this fees. Note: The disposition of the certification of the certificati
POST- ELECTION	L JULY STATEMENT	ı r	the submission of a semi- prior to circulating the petition)	outstanding debts, including the outstanding the outstanding debts, including the outstanding
	COCTOBER STATEMEN			filing fees. Note: The disposition of residual funds must be reported on Schedule 4B and the Summary
Pre-Election or Post-Election Statement relates to:		-s.PT	88. CLAMPAIGN STATEMENT	Page.
Statement towns	8c ANNUAL STATEME	:01	CAWIT Allow 8a, 8b, 8c 8d, or 8f	
PRIMARY	(Coverage Year)	l .	(Complete Item 8a, 8b, 8c 8d, or 8f to indicate which Statement is being amended)	
GENERAL SCHOOL	,		Being Anona	. \
SPECIAL			1	
OTHER:			1	
Date of Election:				tude all applicable
0/6/2012			in Statements, The Campaig	n Statements must include all appending the \$1,000 Reporting Waiver threshold.
and have	a Reporting Waiver must file at	coenditate Leguire	es and outstanding debts count against es and outstanding debts count against	In Statements must include all applicable the \$1,000 Reporting Waiver threshold. Itles's Statement of Organization, and Reporting Waiver is not received on wed. Schedules (if any) and to the best of
that does not have Direct contributions	tems 425, 6, or 7 has changed	i'since th ry this Ca	e information statement. If a request to a impaign Statement can not be waiting a statement can not be waiting to the statement.	ved.
the Statement of	Organization should be organization of a required campaign statem	ient, thai	Campagn	at to the hest of
भाषु परववागाः =			of this statement and attached	schedules (if any) and to the post s.
shat all ra	asonable diligence was used in	the prep	paration of this statement and attached lete.	
belief the	asonable diligence was used in a contents are true, accurate ar			and the second section of the section of the second section of the secti
			Tu Tu	
	Ben Reisterer		Signature	•
-	Type or Print Name		Cigire.	·



SUMMARY PAGE BALLOT QUESTION COMMITTEE

1. Committee I.D. Number

2. Committee Name Walker Yes

RECEIPTS	Column I This Period	Column II Cumulative for Election Cycle
Contributions a. Itemized Contributions(Schedule 4A, Column 6)	(3a.) <u>\$ 2171.00</u>	
b. Unitemized Contributions (less than \$20.01 - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of Contributions	(3c.) \$ 2171.00	(18.)\$ <u>2171.00</u>
4. Other Receipts (Schedule 4A-1; Solumns6)	w = 0.00	(19)\$ 0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$ 2171.00	(201 <u>8</u> 2171.00
IN-KIND CONTRIBUTIONS		
6. In-Kind Contributions a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) \$ 1044.90	
b. Unitemized (less than \$20.01 each - no Schedule)	(6b.) \$ NOT APPLICABLE	
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7.) \$ 1044.90	(24) 8-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
EXPENDITURES		
8. Expenditures	4.54.00	
a. Itemized Direct Expenditures (Schedule 4B, Column 7)	(8a.) \$ 1154.38	
b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6)	(8b.) \$ 0.00	
c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7)	(8c.) \$ 0:00	
d. Unitemized Expenditures (\$50.00 or less-no Schedule)	(8d.) \$ 0.00	
e. Subtotal of Expenditures	(8e.) \$ <u>1154.38</u>	(22.)\$ 1154.38
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$ 0.00	(23.) \$ 0.00
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$ 1154.38	(24.)\$ 1154.38
IN-KIND EXPENDITURES 11. Total In-Kind Expenditures-Endorsements, Donations or Loans of Goods or Services (Schedule 4B-2, Column 8)	(11.) \$ 0.00	(25.) \$ 0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations	0.00	
a. Owed by the Committee (Schedule 4E)	(12a.)\$ 0.00	
b. Owed to the Committee (Schedule 4E)	(12b.) \$ 0.00	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ 0.00	
14. Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts)	(14.) + 2171.00	
15. SUBTOTAL Add lines 13 and 14	(15.) = <u>2171.00</u>	<u> </u>
 Amount expended during reporting period (Line 10, Column I, Total Expenditures) 	(16.) - 1154.38	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ 1016.62	*

^{*}If your ending balance is negative, please recheck your math.

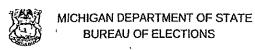


MICHIGAN DEPARTMENT OF STATE BUREAU OF FLECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

. Committee I.D. Number	

BALLOT QUESTION COMMITTEE 2. Committee Name Walker Yes	<u> </u>	
Please enter contributors name and address. If contribution is from an Individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 4. Date of Receipt 9/24/2012		
Linda and Theodore Gerrard 4481 Bonanza Dr. Grand Rapids, MI 49525	\$ <u>25.00</u>	<u>\$ 25.00</u>
	Click Here for Mer	no Itemization
5. If over \$100.00 cumulative, please provide:		
Occupation . Employer		
Business Address		
Type of Contribution: V Direct Loan from a person . Fund Ralser.		
3. Contribution #2 Name & Address: 4. Date of Receipt 9/28/2012		
Gena Rinckey 2028 Pheasant NW Walker, MI 49534	\$ 200.00	<u>\$200.00</u>
Louis Friedding Free Free Free Free Free Free Free Fre		
5. If over \$100.00 cumulative, please provide: Occupation Homemaker Employer N/A	Click Here for Men	no Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 4. Date of Receipt 9/26/2012		
Gena Rinckey 2028 Pheasant NW Walker, MI 49534	\$ 50.00	\$ <u>250.00</u>
	Click Here for Mem	o Itomization
5. If over \$100.00 cumulative, please provide:	Ouck Liefe for Ment	O ILEMIIZARUM
Occupation Employer N/A		
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution #4 4. Date of Receipt 10/3/2012		:
Gena Rinckey 2028 Pheasant NW Walker, MI 49534	s 100.00	§ 350.00
5. If over \$100.00 cumulative, please provide:	Click Here for Men	no Itemization
Occupation Employer N/A	-	
Business Address		-
Type of Contribution:		
Page Subtotal	375.00	
Grand Total of All Schedules 4A (Complete on last page of Schedule)	2171.00	,
1 4	Enter this total	I
Page of	on line 3a of Summary Page	



2. Committee Name Walker Yes

1. Committee I.D. Number ___

Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributer (Through date of receipt)
3. Contribution #1 4. Date of Receipt 9/27/2012 Name & Address:		
David Benjamin		F0.00
73582 Halfridge NE Belding, MI 48809	\$ <u>50.00</u>	\$ <u>50.00</u>
. 5552	Click Here for Me	mo Itemization
5. If over \$100.00 cumulative, please provide:	· · · · · · · · · · · · · · · · · · ·	
Occupation Employer .		
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution #2 4. Date of Receipt 9/28/2012 Name & Address:		
Mike Sveadas	20.00	20.00
296 13 Mile Rd NE Sparta, MI	\$ 20.00	\$ <u>20.00</u>
i. If over \$100.00 cumulative, please provide:	Click Here for Men	no Itemization
Occupation Employer		
Business Address	•	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 4. Date of Receipt 9/28/2012		·
Name & Address: Ken Owen		
6918 Kitson Dr NE Rockford, MI 49341	s 20.00	s 20.00
	-	
5. If over \$100.00 cumulative, please provide:	Click Here for Mem	o Itemization
Occupation Employer		
Business Address		
Type of Contribution: 🗸 Direct Loan from a person Fund Raiser		
. Contribution #4 Name & Address: 4. Date of Receipt 8/22/2012		
Benjamin L Reisterer		
2611 Hillside Dr. Walker, MI 49544	\$ 50.00	<u> 50.00</u>
. If over \$100.00 cumulative, please provide:	Click Here for Mer	no Itemization
Occupation Senior Advisor Employer Charter Communications		
Business Address 3355 Walker Ave Walker, MI 49544		
Type of Contribution: V Direct Loan from a person Fund Raiser		
Page Subtotal	140.00	

Grand Total of All Schedules 4A (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 4A

i. Committee I.D. Number	

SCHEDULE 4A		ottee Name Walker Yes		
BALLOT QUESTION COM		ARCO HARRO)	
Please enter contributors name and address. If c middle initial.	ontribution is from an individual,	enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 4. Name & Address:	Date of Receipt 9/7/201	2		
Benjamin L Reisterer 2611 Hillside Dr. Walke	r MI 49544		\$ 150.00	\$ <u>200.00</u>
ne ska	1, 1011 -100 1 1	•	Click Here for Mer	no Itemization
5. If over \$100.00 cumulative, please provide:	Charter Camp	munications		
Occupation Senior Advisor Emp	oyer Charter Comir	nunications_		
Business Address 3355 Walker	<u>Ave Walker, Mi</u>	49544		
Type of Contribution:	Loan from a person	Fund Raiser		
3. Contribution # 2 4. Name & Address:	Date of Receipt <u>9/24/20</u>	12		
Benjamin L Reisterer 2611 Hillside Dr. Walk	er. MI 49544		\$ <u>200.00</u>	\$ 400±00
5. If over \$100.00 cumulative, please provide:	,		Click Here for Men	no Itemization
Occupation Senior Advisor Emp	over Charter Comr	nunications		
Business Address 3355 Walker	Ave Walker, MI	49544		
Type of Contribution: Direct	Loan from a person	Fund Raiser		
Contribution # 3 Name & Address: 4.	Date of Receipt 10/12/20	012		
Benjamin L Reisterer			400.00	000 00
2611 Hillside Dr. Walk	er, MI 49544_	والمستورة والمستور والمستور والمستور والمستور والمتدار والمتدار والمتدارة والمستورة والمتدارة	\$ 400.00	\$800.00
5. If over \$100.00 cumulative, please provide:			Click Here for Mem	o Itemization
Occupation Senior Advisor em	noyer_Charter Com	munications_		
Business Address 3355 Walker	<u> Ave Walker, Mi</u>	49544		
	Loan from a person	Fund Ralser		
3. Contribution # 4 4. Name & Address:	Date of Receipt 9/28/201	₩2		
Benjamin L Reisterer				
2611 Hillside Dr. Walk	er, MI 49544		<u>\$ 21.00</u>	\$ <u>821.00</u>
5. If over \$100.00 cumulative, please provide:			Click Here for Men	no Itemization
Occupation Senior Advisor Emp	oyer Charter Comi	munications_		
Business Address 3355 Walker A	<u>lve Walker, Mil</u>	49544		
Type of Contribution: 🗸 Direct	Loan from a person	Fund Raiser		
•		Page Subtotal	771.00	
		rand Total of All Schedules 4A plete on last page of Schedule)	2171.00	
3 4	(COM)	hinns are man budde as agreement	Enter this total on line 3a of	1
Page of			Summary Page	



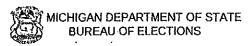
MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT OUESTION COMMITTE

		•
L. Committee I.D. Number	 	

on line 3a of Summary Page

BALLOT QUESTION COMMITTEE 2. Committee Name Walker Yes					
Please enter contributors name and address. middle initial.	If contribution is from			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution #1 Name & Address:	4. Date of Receipt	10/3/2012			
Kent County Taxpayers All 538 Bond Ave NW Ste 812 Grand Rapids, MI 49503	iance			•	\$ 810.00
5. If over \$100.00 cumulative, please provid	e: į			Click Here for Mer	no Itemization
Occupation E	mployer		MICHAEL COMMANDE COMM		
Business Address					
Type of Contribution: Direct	Loan from a	a person	Fund Raiser		
3, Contribution #2 Name & Address:	4. Date of Receipt	10/3/2012			
Betsy Boss 1079 Thornwyk NW Wa	alker, MI 4	9534		\$ <u>75.00</u>	\$ 75.00
5. If over \$100.00 cumulative, please provide)			Click Here for Mem	o itemization
Occupation E	mployer	*	•		
Business Address					
Type of Contribution: Direct	Loan from a p	person	Fund Raiser		
3. Contribution #3 Name & Address:	4. Date of Receipt	,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			
				\$	\$
5. If over \$100.00 cumulative, please provid	e:			Click Here for Memo	o Itemization
OccupationE	mployer		THE PARTY OF THE P		
Business Address			"		
Type of Contribution: Direct	Loan from a p	erson	Fund Raiser		
3. Contribution # 4 Name & Address:	4. Date of Receipt				
				\$	\$
5. If over \$100.00 cumulative, please provide	•			Click Here for Mem	o Itemization
OccupationE	mployer				
Business Address			P		
Type of Contribution: Direct	Loan from	a person	Fund Raiser		
			Page Sublotal	885.00	•
	•		otal of All Schedules 4A on last page of Schedule)	2171.00	
Page 4 of 4		Complete	man page of considering	Enter this total on line 3a of	



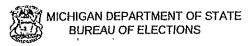
1. Committee I. D. Number	
2. Committee Name Walker Yes	

		· · · · · · · · · · · · · · · · · · ·	
3. Name and Address from whom received	Type of In-Kind Contribution (Check applicable box) Date of Receipt	7. Amount or Fair Market Value	8. Cumulative for Election
If contribution is from an individual, please enter last name first.	S. Date of Receipt S. Name & Address of Vendor from whom goods or services were purchased	MINIST VIIIUS	Cycle (Through date in Item 5)
Contribution #1	4. Loan endorsement or guarantee		
Name & Address: Kent County Taxpayers Alliance	Goods Donated or loaned Services Donated	t	
538 Bond Ave NW Ste 812	Goods or Services Purchased by Others		
Grand Rapids, MI 49503	Goods or Services Purchased by Others - LOAN	_s 143.90	s 143.90
If over \$100.00 cumulative, please provide:	Description Coples/supplies	Y	
Occupation	5 DATE OF DESCRIPT, 8/6/2012	Ollela Dave des Masses Bass	
Employer Name & Address:	6. VENDOR NAME & ADDRESS:	Click Here for Memo Ite	mzauon
	Ben Reisterer		
	2611 Hillside Dr		
C modernia	Walker, MI 49544		
Fund Raiser			
Contribution #2 Name & Address:	4. Loan endorsement or guarantee		
Kent County Taxpayers Alliance	Goods:Donated.or-loaned Services Donated		
538 Bond Ave NW Ste 812	✓ Goods or Services Purchased by Others		
Grand Rapids, MI 49503	Goods or Services Purchased by Others - LOAN	_s 238.00	_{\$} 238.00
If over \$100.00 cumulative, please provide:	Description Signatures	\$ <u></u>	\$200.00
Occupation	5. DATE OF RECEIPT: 8/16/2012	Click Here for Memo Ite	mization
Employer Name & Address:	6. VENDOR NAME & ADDRESS:		
	Eric Nugent		
	3639 Merrimont Ct SE		
Fund Raiser	Kentwood, MI 49512		
Contribution #3	-	,	
Vame & Address:	4. Loan endorsement or guarantee		
Kent County Taxpayers Alliance	Goods Donated or loaned Services Donated	İ	
538 Bond Ave NW Ste 812	Goods or Services Purchased by Others		99 = 310 4 4 4 4 4 4 4 4
Grand Rapids, MI 49503	Goods or Services Purchased by Others - LOAN	_s 286.00	_{\$} 286.00
If over \$100.00 cumulative, please provide:	Description Signatures	\$ 200.00	\$200.00
Occupation	5. DATE OF RECEIPT: 8/16/2012		
Employer Name & Address:	6. VENDOR NAME & ADDRESS:	Click Here for Memo Ite	mization
	Theodore Petzold		
	1312 Ford Ave NW		
Fund Raiser	Grand Rapids, MI 49505		
La 1 TREACT	Page Subtetal	667.00	

Page Subtotal

Grand Total of all Schedules 4-IK (Complete on last page of Schedule) 667.90

Enter this total on line 6a of Summary Page

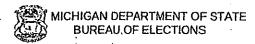


1. Committee I. D. Number	the same that th
2. Committee Name Walker Yes	

Name and Address from whom received If contribution is from an individual, please enter last name first.	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 Name & Address: Kent County Taxpayers Alliance 538 Bond Ave NW Ste 812 Grand Rapids, MI 49503 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. Loan endorsement or guarantee Goods Donated or loaned Services Donated Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN Description Signatures	\$ 70.00 Click Here for Memo Iter	
Contribution #2 Name & Address: Kent County Taxpayers Alliance 538 Bond Ave NW Ste 812 Grand Rapids, MI 49503 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. Loan endorsement or guarantee Goods Donated or loaned Services Donated Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN Description Signatures 5. DATE OF RECEIPT: 8/16/2012 6. VENDOR NAME & ADDRESS: Martin Courtade 1535 Mason Grand Rapids, MI 49503	\$ 48.00 Click Here for Memo Ite	\$48.00 mization
Contribution #3 Name & Address: Kent County Taxpayers Alliance 538 Bond Ave NW Ste 812 Grand Rapids, MI 49503 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. Loan endorsement or guarantee Goods Donated or loaned Services Donated Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN Description Signatures 5. DATE OF RECEIPT: 8/19/2012 6. VENDOR NAME & ADDRESS: Mark Thorndill 100 Dean NE Grand Rapids, MI 49505	\$ 36.00 Click Here for Memo Ite	\$ 36.00 mization
	Pane Suhtotal	15/100	

Grand Total of all Schedules 4-lK (Complete on last page of Schedule)

Enter this total on line 6a of Summary Page

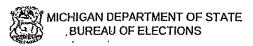


1. Committee I. D. Number	
2. Committee Name Walker Yes	

Name and Address from whom received If contribution is from an individual, please enter last name first.	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 Name & Address: Kent County Taxpayers Alliance 538 Bond Ave NW Ste 812 Grand Rapids, MI 49503 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. Loan endorsement or guarantee Goods Donated or loaned Services Donate Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN Description Signatures 5. DATE OF RECEIPT: 8/16/2012	d \$ 4.00 Click Here for Memo Ite	\$4.00
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Contribution #2 Name & Address: Kent County Taxpayers Alliance 538 Bond Ave NW Ste 812 Grand Rapids, MI 49503 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. Loan endorsement or guarantee Goods Donated or loaned Services Donated Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN Description Signatures 5. DATE OF RECEIPT: 8/16/2012 6. VENDOR NAME & ADDRESS: Savanna Bree Holder 6567 Crabapple Dr Troy, MI 48098	\$ 1.00	\$ 1.00
Contribution #3 Name & Address:	4. Loan endorsement or guarantee		
Kent County Taxpayers Alliance 538 Bond Ave NW Ste 812 Grand Rapids, MI 49503 If over \$100.00 cumulative, please provide:	Goods Donated or loaned Services Donated Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN Description Signatures 5. DATE OF RECEIPT: 8/16/2012 6. VENDOR NAME & ADDRESS: YVONNE Planck 4565 Show Apple Dr	s 33.00 Click Here for Memo Itel	\$33.00 mization
Fund Raiser	4565 Snow Apple Dr Walker, MI 49534		
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Grand Total of all Schedules 4-IK (Complete on last page of Schedule)

Enter this total on line 6a of Summary Page



1. Committee I. D. N	ımber	**************************************
2 Committee Name	Walker Yes	

	- Continued Name		
Name and Address from whom received If contribution is from an individual, please enter last name first.	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 Name & Address: Kent County Taxpayers Alliance	4. Loan endorsement or guarantee	d	
538 Bond Ave NW Ste 812 Grand Rapids, MI 49503 If over \$100.00 cumulative, please provide:	Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN Description Signatures	_{\$} 20.00	<u>\$ 20.00</u>
Occupation Employer Name & Address:	5. DATE OF RECEIPT: 8/16/2012 6. VENDOR NAME & ADDRESS: George Sikes Jr	Click Here for Memo Ite	mization
Fund Ralser	4549 Jonathan Ct NW Walker, MI 49534		
Contribution #2 Name & Address: Kent County Taxpayers Alliance 538 Bond Ave NW Ste 812 Grand Rapids, MI 49503 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. Loan endorsement or guarantee Goods Donated or loaned Services Donated Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN Description Segnatures 5. DATE OF RECEIPT: 8/16/2012 6. VENDOR NAME & ADDRESS: Paul Segers 16095 Gary Ave Grand Haven, MI 49417	\$ 22.00 Click Here for Memo Ite	
Contribution #3 Name & Address: Kent County Taxpayers Alliance 538 Bond Ave NW Ste 812 Grand Rapids, MI 49503 If over \$100.00 cumulative, please provide: Occupation Employer Name & Address:	4. Loan endorsement or guarantee Goods Donated or loaned Services Donated Goods or Services Purchased by Others Goods or Services Purchased by Others - LOAN Description Signatures 5. DATE OF RECEIPT: 8/16/2012 6. VENDOR NAME & ADDRESS: Roger Modderman III 7336 Piere St Allendale. MI 49401	\$ 102.00 Click Here for Memo Ite.	\$ 102.00 mization

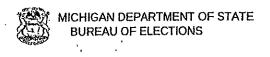


Committee I. D. Number
 Walker Yes

3. Name and Address from whom received	4. Type of In-Kind Contribution (Check-applicable-box) 5. Date of Receipt	7. Ameunteor Fair Market Value	8. Cumulative
If contribution is from an Individual, please enter last name first.	6. Name & Address of Vendor from whom goods or services were purchased		Cycle (Through date in Item 5)
Contribution #1 Name & Address:	4. Loan endorsement or guarantee		
Kent County Taxpayers Alliance	Goods Donated or loaned Services Donated	ſ	
538 Bond Ave NW Ste 812	Goods or Services Purchased by Others		
Grand Rapids, MI 49503	Goods or Services Purchased by Others - LOAN	_{\$} 41.00	41.00
If over \$100.00 cumulative, please provide:	Description Signatures	\$	* (1100
Occupation	5 DATE OF BECEINT: 8/16/2012	Ollete I lava for Marca Ha	n in atlan
Employer Name & Address:	6. VENDOR NAME & ADDRESS:	Click Here for Memo Iter	nizavon
	Debbie Reid		
	2429 Elmridge NW		
Fund Raiser	Walker, MI 49534		
Contribution #2			
Name & Address;	Loan endorsement or guarantee		
	Goods Donated or loaned Services Donated		
	Goods or Services Purchased by Others		kanan kanan ang atau na garan kang ang ang ang at kanan ang at kananasa.
	Goods or Services Purchased by Others - LOAN	•	
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Employer Name & Address:	6. VENDOR NAME & ADDRESS:	Chert lete to twente he	Allization
Fund Raiser			
Contribution #3	4. Loan endorsement or guarantee		
Name & Address:	Goods Donated or loaned Services Donated		ļ
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	Goods or Services Purchased by Others - LOAN		
If over \$100.00 cumulative, please provide:	Description	\$	\$
Occupation	5. DATE OF RECEIPT:		
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Fund Raiser	·		
	Page Subtotal	41.00	
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Grand Total of all Schedules 4-IK (Complete on last page of Schedule) 41.00

Enter this total on line 6a of Summary Page

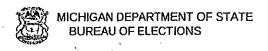


ITEMIZED DIRECT EXPENDITURES **SCHEDULE 4B**

1, Committee I. D. Number

Page

BALLOT QUESTION COMMITTEE 2. Co	ommittee B ä <i>l</i> he ^l Wa	lker Yes	••	• • •	
3. Name and address of person to whom paid	State purpose of expenditure. Identify the ballot proposal involved. Indicate whether supported or opposed.		6. Date	7. Amount	8. Cumulative for election
Expenditure #1	4. Purpose:				
Name & Address: Comerica Bank	Bank fe	<u> </u>			
Comenca Dank	5. Ballot Proposal:		9/14/2012	\$21.17	\$21.17
	ITP		Date of Expenditure		
			Click to	ur Mama Hamfaatlan	Timo
Check box if expenditure is payment of debt or obligation	County: Kent		CHEKIC	or Memo Itemization	1 ype
reported on previous statement	Support	Oppose			
Fund Raiser	Statewide 4. Purpose:	∠ Lecal			
Expenditure # 2 Name & Address:	Ads				
Facebook					
1601 Willow Avenue, Menlo	5. Ballet Proposal:		9/18/2012	_{\$} 29.09	_{\$} 29.09
Park, California, 94025.	IIP		Date of		
and canonia, crosses	county: Kent		Expenditure		
Check box if expenditure is payment of debt or obligation			Click for	r Memo Itemization	Туре
reported on previous statement	Support	Oppose			
Fund Raiser	Statewide	Local			
Expenditure # 3 Name & Address:	4. Purpose:				
	Ads				
Facebook	5. Ballot Proposal:		9/24/2012	\$29.07	_{\$} 58.16
1601 Willow Avenue, Menlo	ITP		Date of		
Park, California, 94025.			Expenditure		
·	county: Kent		Click fo	r Memo Itemization	Туре
Check box if expenditure is payment of debt or obligation reported on previous statement	Support	Oppose	•		
Fund_Raiser	Statewide	∠ ţocal			
Expenditure # 4	4. Purpose:			·	
Name & Address:	Ads		. m ft ban i n	00.00	07.40
Facebook	5. Ballot Proposal:		10/1/2012	<u>\$29.03</u>	\$87.19
1601 Willow Avenue, Menlo	ITP		Date of Expenditure		
Park, California, 94025.	<u>.1.1.1</u>		•		~
	County: Kent		Click to	or Memo Itemization	туре
Check box if expenditure is payment of debt or obligation reported on previous statement	✓ Support	Oppose			
Fund Raiser	Statewide	Local			
		Subto	otal this page	108.36	
		Grand Total of S	Schedules 48	100.00	1
		(Complete on last page	of Schedule)	1154.58	
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1 <				the Summary	



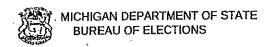
ITEMIZED DIRECT EXPENDITURES **SCHEDULE 4B**

1. Committee I. D. Number		
	· · · · · · · · · · · · · · · · · · ·	

BALLOT QUESTION COMMITTEE 2.C	ommittee Name Walker	Yes			
3. Name and address of person to whom paid	State purpose of expend Identify the ballot propose indicate whether supported	6. Date	7. Amount	8. Cumulative for election	
Expenditure # 1 Name & Address:	4. Purpose:		_		
Cascade Printing and	Post cards	· · · · · ·	40/0/0040	000.00	
Graphics	5. Ballot Proposal:		10/3/2012	_{\$} 806.66	_{\$} 806.66
6504 28th St. SE ste. A	ITP		Date of Expenditure		
Grand Rapids, MI 49546			, and the		T
Check box if expenditure is payment of debt or obligation	County: Kent		Glick to	r Memo Itemization	ıype
reported on previous statement	Support	Oppose			
Fund Raiser	Statewide 4. Purpose:	Local		•	
Expenditure # 2 Name & Address:	Ads				
Facebook					
1601 Willow Avenue, Menlo	5. Ballot Proposal:		10/9/2012	\$29.07	\$ 116.26
Park, California, 94025.	ITP		Date of	,	
rain, bailering, brown	county: Kent		Expenditure		
Check box if expenditure is payment of debt or obligation	••••••••••••••••••••••••••••••••••••••	——————————————————————————————————————	Click for	Memo Itemization 7	уре
reported on previous statement	Support	Oppose			
Fund Raiser	Statewide	✓ Local			
Expenditure # 3 Name & Address:	4. Purpose:				
Facebook	10/12/2012				
	5. Ballot Proposal:		10/12/2012	\$28.94	_{\$} 145.20
1601 Willow Avenue, Menlo	ITP		Date of		·
Park, California, 94025.			Expenditure		
7	County: Kent		Click for	Memo temization	Гуре
Check box if expenditure is payment of debt or obligation reported on previous statement	Support	Oppose			
Fund Raiser	Statewide	Local			
Expenditure # 4 Name & Address:	4. Purpose:				
Comerica Bank	Bank fee		10/12/2012	27 40	10.57
	5. Ballot Proposal:			\$27.40	\$ 40.07
2500 Alpine Avenue	ITP		Date of Expenditure		
NW Walker, MI 49544			Click fo	r Memo Itemization	Tvpe
Check box if expenditure is payment of debt or obligation	County: Kent				**
reported on previous statement	Support	Oppose			
Fund Raiser	Statewide	Local			1
		Subto	otal this page	892.07	-
	(Comp	Grand Total of S lete on last page		1154.38	A TANAMAN AND AND AND AND AND AND AND AND AND A

2 of 3

Enter this total on Line 8a of the Summary Page



ITEMIZED DIRECT EXPENDITURES SCHEDULE 4B

BALLOT QUESTION COMMITTEE 2. Committee Name Walker Yes 8. Cumulative 6. Date 7. Amount 3. Name and address of person to whom paid 4. State purpose of expenditure. for election 5. Identify the ballot proposal involved. Indicate whether supported or opposed. Expenditure #1 4. Purpose: Name & Address: Flyers printing Cascade Printing and \$943.66 137.00 Graphics 5. Ballot Proposal: Date of 6504 28th St. SE ste. A ITP Expenditure Grand Rapids, MI 49546 Click for Memo Itemization Type county: Kent Check box if expenditure is payment of debt or obligation reported on previous statement Support Oppose Statewide ✓ Local Fund Raiser 4. Purpose: Expenditure # 2 Name & Address: Ads Facebook 5. Ballot Proposal: 16.95 \$ 162.15 10/19/2012 1601 Willow Avenue, Menlo Date of Park, California, 94025. Expenditure county: Kent Click for Memo Itemization Type Check box if expenditure is payment of debt or obligation Oppose Support reported on previous statement ✓ Local Statewide Fund Raiser 4. Purpose: Expenditure #3 Name & Address: 5. Ballot Proposal: Date of Expenditure Click for Memo Itemization Type County: Check box if expenditure is payment of debt or obligation Oppose Support reported on previous statement Local Statewide **Fund Raiser** Expenditure # 4 4. Purpose: Name & Address: 5. Ballot Proposal: Date of Expenditure Click for Memo Itemization Type County: Check box if expenditure is payment of debt or obligation Support Oppose reported on previous statement Statewide **✓** Local Fund Raiser Subtotal this page Grand Total of Schedules 4B (Complete on last page of Schedule) Enter this total on Line 8a of

> the Summary Page

1. Committee I. D. Number_



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

December 6, 2012

Friends of Transit-Walker Amy Hayes 3343 Peach Ridge NW Walker, Michigan 49544

Dear Ms. Hayes:

The Department of State received a response to the complaint you filed against Walker Yes, which concerns an alleged violation of the Michigan Campaign Finance Act (MCFA), 1976 P.A. 388, MCL 169.201 *et seq.* A copy of the response is provided as an enclosure with this letter.

If you elect to file a rebuttal statement, you are required to send it within 10 business days of the date of this letter to the Bureau of Elections, Richard H. Austin Building, 1st Floor, 430 West Allegan Street, Lansing, Michigan 48918.

Sincerely,

Lori A. Bourbonais

Bureau of Elections

Michigan Department of State

c: Ben Reisterer

Walker Yes

Ben Reisterer, Treasurer

2611 Hillside Dr

Walker, MI 49544

Department of State

Bureau of Elections

Attn: Lori A. Bourbonais

Richard H. Austin Building, 1st Floor

430 West Allegan Street

Lansing, MI 48918

Dear Ms. Bourbonais,

In response to the campaign finance complaint received by your office from Amy Hayes on behalf of Friends of Transit-Walker, my responses are below:

In regards to the allegation that postage was not included on our statement, we inadvertently left off an in-kind contribution of postage. This was a mistake and not intentional. An amended campaign finance statement was filed with the Kent County Clerk on 11/28/2012 to reflect this unintentional omission. A copy of that amendment is attached.

In regards to the allegation that we incorrectly listed the price of the post cards we had printed through Cascade Printing, we also inadvertently left off the in-kind discount received by Cascade Printing. This was a mistake and not intentional. The above-mentioned campaign finance amendment was filed to reflect the correct amount. In addition, a copy of the invoice received from Cascade Printing is attached which reflects the total cost and the discount received.

In regard to phone call costs, we were not invoiced for the calls until after the election, so the cost will be included on our post-election campaign finance statement, which is due by December 26th. This portion of the complaint is premature.

I hope that this resolves the matter. All expenses have been appropriately reported to the Kent County Clerk as of the mailing of this response.

Sincerely,

Ren Resitere

MI DEFT OF STATE



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

Kent County Clerk Elections Division NOV 2 8 2012

BALLOT QUESTION COMMITTEE COVER PAGE

				FUR UFFICIAL USE UNLY
Report must be legible, typed or pri treasurer or designated record keep	nted in ink and signed by the per.		3.This Statement covers From:	To 10/21/12
1. Committee I.D. Number				11 Hillside Drive alker, MI 49544
2. Committee Name	-			
Walker Yes			Area Code and Phone: (616) 460-0 if the address in this box is different for the Statement of Organization, mail mofficial.	871 om the committee mailing address on ay be sent to this address by the filing
5. Treasurer's Name and Residentia Ben Reisterer 2611 Hillside Drive Walker, MI 49544 Area Code and Phone (616) 460-				
Area Code and Phone (070) 400	-0071			
6. Treasurer's Business Address Ben Reisterer 2611 Hillside Drive Walker, MI 49544		7. De (if	signated Record Keeper's Name and N the committee has a Designated Recor	falling Address d Keeper)
Area Code and Phone (616) 460-0	871	Area (Code and Phone	•
8. TYPE OF STATEMENT: 8a. PRE-ELECTION OR POST-ELECTION Pre-Election or Post-Election Statement relates to: PRIMARY GENERAL SCHOOL SPECIAL OTHER: Date of Election: 10/06/12	8b. FEBRUARY STATEMENT APRIL STATEMENT JULY STATEMENT OCTOBER STATEMENT 8c. ANNUAL STATEMENT Coverage Year)	T	8d: Post Petition Sample Filing under MCL 168.483a (Required of Statewide Ballot Question Committees only after the submission of a sample petition prior to circulating the petition) 8e. AMENDMENT TO CAMPAIGN STATEMENT (Complete Item 8a, 8b, 8c 8d, or 8f to indicate which Statement is being amended)	8f. DISSOLUTION OF COMMITTEE REQUEST Effective Date of Dissolution By checking this item, I certify that the committee has no assets or outstanding debts, including late filling fees. Note: The disposition of residual funds must be reported on Schedule 4B and the Summary Page.
			ampaign Statements. The Campaign St nd outstanding debts count against the formation was shown on the committee algn Statement. If a request for a Rep npaign statement can not be walved.	
	or Print Name	'	Signature	
			S.g.idato C	

SUMMARY PAGE BALLOT QUESTION COMMITTEE

2. Committee Name Walker Yes RECEIPTS Column I Column II This Period Cumulative for Election Cycle 3. Contributions (3a.) \$ 2,171.00 a. Itemized Contributions(Schedule 4A, Column 6) b. Unitemized Contributions (less than \$20.01 - no Schedule) (3b.) \$ NOT APPLICABLE (18.) \$ _2,171.00 (3c.) \$ 2,171.00 c. Subtotal of Contributions (19.) \$ _0.00 (4.) \$ 0.004. Other Receipts (Schedule 4A-1, Column 6) 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (5.) \$ 2,171.00 (20.) \$ _2,171.00 (Add Line 3 c + Line 4) IN-KIND CONTRIBUTIONS 6. In-Kind Contributions a. Itemized in-Kind Contributions (6a.) \$ 2,451.76 (Schedule 4-IK, Column 7) b. Unitemized (less than \$20.01 each - no Schedule) (6b.) \$ NOT APPLICABLE 7. TOTAL IN-KIND CONTRIBUTIONS (21.) \$ __2,451.76 (7.) \$_2,451.76 (Add Line 6a + Line 6b) **EXPENDITURES** 8. Expenditures (8a.) \$ 1,154.38 a. Itemized Direct Expenditures (Schedule 4B, Column 7) (8b.) \$ 0.00 b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6) c. In-Kind Expenditures - Purchase of Goods or Services (8c.) \$ 0.00 (Schedule 4B-2, Column 7) (8d.) \$ 0.00 d. Unitemized Expenditures (\$50.00 or less-no Schedule) (22.) \$ 1,154.38 _(8e.) \$ 1,154.38 e. Subtotal of Expenditures 0.00 (9.) \$ 0.00 (23.) \$ Independent Expenditures (Schedule 4B-1, Column 7) (24.) \$ _1,154.38 (10.) \$_1,154.38 10. TOTAL EXPENDITURES (Add Line 8e + Line 9) IN-KIND EXPENDITURES 11. Total In-Kind Expenditures-Endorsements, Donations or (11.) \$ 0.00 (25.) \$ _ 0.00 Loans of Goods or Services (Schedule 4B-2, Column 8) **DEBTS AND OBLIGATIONS** 12. Debts and Obligations (12a.)\$ 0.00 a. Owed by the Committee (Schedule 4E) (12b.) \$ 0.00 b. Owed to the Committee (Schedule 4E) **BALANCE STATEMENT** 13. Ending Balance of last report filed (13.) \$ _0.00 (Enter zero if no previous reports have been filed.) Amount received during reporting period (Line 5, Column I, Total Contributions & Other Receipts) (14.) + 2,171.00 (15.) = 2,171.00 15. SUBTOTAL Add lines 13 and 14 Amount expended during reporting period (Line 10, Column I, Total Expenditures) (16.) - 1,154.38 17. ENDING BALANCE (17.) \$ 1,016.62 (Subtract line 16 from line 15)

^{*}If your ending balance is negative, please recheck your math.



1. Committee I. D. Number	
2 Committee Name Walker Yes	

	2. Constitues Ivallie		
Name and Address from whom received If contribution is from an individual, please enter last name first.	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
Contribution #1			date in item 5)
Name & Address:	4. Loan endorsement or guarantee		
Kent County Taxpayers Alliance	Goods Donaled or loaned Services Donale	eq	
538 Bond Ave NW Ste 812	✓ Goods or Services Purchased by Others	4450.40	
Grand Rapids, MI 49503	Goods or Services Princhased by Others - LOAN	_s 1153.19	s 1153.19
f over \$100.00 cumulative, please provide:	Description Postage	•	
Occupation	5. DATE OF RECEIPT: 10/10/12		
Employer Name & Address:	6. VENDOR NAME & ADDRESS:	Click Here for Memo Ite	mization
•			
	US Postal Service 225 Michigan St NW		
—	Grand Rapids, MI 49501		•
Fund Raiser	Crand Napids, Wil 49001		
Contribution #2 Name & Address:	4. Loan endorsement or guarantee		
Cascade Printing	Goods Donated or loaned Services Donated	ł	. *
6504 28th Street SE Ste A	Goods or Services Purchased by Others		•
Grand Rapids, MI 49546	Goods or Services Purchased by Others - LOAN	050.07	
If over \$100.00 cumulative, please provide:		_{\$} 253.67	_{\$} 253.67
Occupation	Description Flyer discount		<u> </u>
•	5. DATE OF RECEIPT: 09/18/12	Click Here for Memo Ite	mization
Employer Name & Address:	6. VENDOR NAME & ADDRESS:		
•	Cascade Printing		
·	6504 28th Street SE Ste A		
Fund Raiser	Grand Rapids, MI 49546		
Contribution #3			
lame & Address:	4. Loan endorsement or guarantee		
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	Goods or Services Purchased by Others		
	Goods or Services Purchased by Others - LOAN		
f over \$100.00 cumulative, please provide:	Description	\$	<u>\$</u>
Occupation	5. DATE OF RECEIPT:		
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Fund Raiser			
	Page Subtotal	\$1,406.86	
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Grand Total of all Schedules 4-IK (Complete on last page of Schedule)

\$1,406.86

Enter this total on line 6a of Summary Page

Page _____ of ____

CASCADE PRINTING

6504 28th Street, S.E. • Suite A Grand Rapids, MI 49546 Phone (616) 222-2937 • Fax (616) 222-2939 Invoice No. 40587

Date 9/18/12

Customer P.O. No.

Walker Yes 600 Broadway Ave SW Suite 406 Grand Rapids MI 49504

aumany	DESCRIPTION		ANGUE
10,000 Walker YESI EDDM Mailer - 8.5" x aqueous coating - 4-5 day production	11* - 100# Gloss Cover - Printed	4/4 full color with	1,014.67
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	•		
	. •		
	C	iustomer Discount	-253.67
Though Word Ma Appropriate West Divisions	Rapid Materials - Walker	SUB	761.00
Thank You! We Appreciate Your Business. Personal Service • Unbeatable Values		TAX	45.66
		SHIPPING	
		(C) AL 45 (F)	806,66



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

March 6, 2013

Walker Yes Ben Reisterer, Treasurer 2611 Hillsdale Drive Walker, Michigan 49544

Dear Mr. Reisterer:

The Department of State (Department) has completed its investigation of a complaint filed against you by Amy Hayes on behalf of Friends of Transit-Walker, which alleged that you violated the Michigan Campaign Finance Act (MCFA or Act), 1976 PA 388, MCL 169.201 et seq. This letter concerns the disposition of Ms. Hayes's complaint.

The MCFA requires the treasurer of a committee to file complete and accurate finance statements and reports. A person who files an incomplete or inaccurate statement may be subject to a civil fine of up to \$1,000.00. MCL 169.234(7).

The Act also requires the Department to "endeavor to correct the violation or prevent a further violation by using informal methods[,]" if it finds that "there may be reason to believe that a violation ... has occurred[.]" MCL 169.215(10). The objective of an informal resolution is "to correct the violation or prevent a further violation[.]" *Id.* If the Department is unable to correct or prevent additional violations, it may convene an administrative hearing or ask the Attorney General to prosecute if a crime has been committed. *Id.*

The complaint was filed by Ms. Hayes on November 5, 2012, and you filed a written response on December 4, 2012. Ms. Hayes did not file a rebuttal statement.

Ms. Hayes alleged that you under-reported expenditures for postcards and omitted expenditures for postage and robocalls on your 2012 pre-election general campaign finance statement. Ms. Hayes provided as evidence a copy of the committee's pre-election general finance statement filed on October 26, 2012, copies of a flyer which stated "Vote YES on WITHDRAWAL for local control[,] lower taxes[, and] more efficient bus service [,]" and a quote for postcards from Cascade Printing.

In response, you stated that you "inadvertently left off an in-kind contribution of postage" and that it was "a mistake and not intentional." Additionally, you stated that you "inadvertently left off the in-kind discount" given to you by Cascade Printing for the postcards and that this, too, "was a mistake and not intentional." Further, you provided a copy of the amended 2012 pre-election general statement which you filed on November 28, 2012. You asserted that this amended statement accurately reflected the contributions received and expenditures made by committee during the period covered by the statement and that all expenses had been

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appropriately reported. Finally, you stated that you were not invoiced for the robocalls until after the election, and that the cost of those calls would be included on your post-election campaign finance statement.

The Department believes that the evidence tends to show that your 2012 post-election primary campaign finance statement was incomplete or inaccurate, and a violation of the Act occurred. However, the Department believes that the evidence also tends to show that this was not an intentional violation. Further, you corrected the violation by filing an amended statement as soon as you were given notice of the inaccurate report.

While the Department believes a violation occurred, section 15(10) of the MCFA requires the Department to "endeavor to correct the violation or prevent a further violation by using informal methods such as a conference, conciliation, or persuasion [.]" The Department is satisfied that you took appropriate corrective measures to ensure full and accurate disclosure of your committee's contributions and expenditures and requires no further action at this time.

Additionally, this letter has served to remind you of your duty under the Act to file complete and accurate campaign finance statements. MCL 169.234. The Department expects that any future filings will meet this obligation.

The Department considers this matter closed and will take no further enforcement action at this time.

Sincerely,

Lori A. Bourbonais Bureau of Elections

Michigan Department of State

c: Amy Hayes