



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 029234

CANDIDATE COMMITTEE

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

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Ken and Ronda McCoy 161 Twin Ponds Okemos, MI 48864 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Nike, MSU, Redwing Items</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>100</u>	\$ <u>100</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Michigan Police Equipment 6521 Lansing Road Charlotte, MI 48813 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Flashlight</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>35</u>	\$ <u>35</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Holden Reid 444 Frandor Ave Lansing, MI 48912 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Gift Certificate</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>50</u>	\$ <u>50</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal

\$185.00

\$185.00

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

Enter this total
on line 6 of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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SCHEDULE 1-IK

1. Committee I. D. Number 029234

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Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Dean Transportation</u> <u>4182 N Aurelius Rd</u> <u>Lansing, MI 48910</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Two T-Shirts and One Cedar Point Ticket</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>70</u> \$ <u>70</u>	
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Midas</u> <u>4230 W Saginaw</u> <u>Lansing, MI 48917</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input checked="" type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Two Gift Certificates</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>20</u> \$ <u>20</u>	
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Residence Inn</u> <u>922 Delta Commerce Dr</u> <u>Lansing, MI 48917</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>One Nights Stay</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>100</u> \$ <u>100</u>	
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal \$190.00 \$190.00

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

Enter this total
on line 6 of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 029234

CANDIDATE COMMITTEE

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

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>UKA</u> <u>754 Delta Commerce Dr</u> <u>Lansing, MI 48917</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Two \$50 Gift Certificates</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>100</u>	\$ <u>100</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Crowne Plaza</u> <u>925 S Creyts Rd</u> <u>Lansing, MI 48917</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Certificate for Wine Tasting</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>25</u>	\$ <u>25</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Reno's West</u> <u>5001 W Saginaw Hwy</u> <u>Lansing, MI 48917</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Large Pizza</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>15</u>	\$ <u>15</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Page Subtotal		\$ <u>140.00</u>	\$ <u>140.00</u>

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

Enter this total
on line 6 of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 029234

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

CANDIDATE COMMITTEE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Los Tres Amigos</u> <u>6405 S Cedar St</u> <u>Lansing, MI 48911</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Gift Certificate</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>20</u>	\$ <u>20</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Lansing Quality Suites</u> <u>901 Delta Commerce Dr</u> <u>Lansing, MI 48917</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Gift Certificate</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>75</u>	\$ <u>75</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Northside Towing</u> <u>627 E Lansing Rd</u> <u>Pottsville, MI 48876</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Wooden Jewelry Box, Shirt and Luba/Oil</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>55</u>	\$ <u>55</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal \$150.00 \$150.00

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

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on line 6 of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 029234

CANDIDATE COMMITTEE

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

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Contribution #1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Letavis Enterprises Inc</u> <u>8478 Miller Rd</u> <u>Schwartz Creek, MI 48473</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input checked="" type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Oil Change</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>15</u>	\$ <u>15</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>MSU Federal Credit Union</u> <u>653 Milgadi Lane</u> <u>Lansing, MI 48917</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Time with Coach Tom Izzo</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>65</u>	\$ <u>65</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Black Creek</u> <u>PO Box 101747</u> <u>Irondale, AL 35210</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Sponsor Golf Items</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>75</u>	\$ <u>75</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal \$155.00 \$155.00

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

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on line 6 of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 029234

CANDIDATE COMMITTEE

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Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Buffalo Wild Wings</u> <u>360 Albert Ave</u> <u>East Lansing, MI 48823</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Set-up at Course</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>50</u>	\$ <u>50</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Douglas J Salon</u> <u>4663 Ardmore Ave</u> <u>Okemos, MI 48864</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input checked="" type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Gift Certificate</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>45</u>	\$ <u>45</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Home Depot</u> <u>936 Waverly Rd</u> <u>Lansing, MI 48917</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Tool Set</u> 5. Date Of Receipt: _____ 6. Vendor Name & Address:	\$ <u>25</u>	\$ <u>25</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Page Subtotal		\$ <u>120.00</u>	\$ <u>120.00</u>

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

Enter this total
on line 8 of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

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CANDIDATE COMMITTEE

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Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Wheatfield Valley</u> <u>1600 Linn Rd</u> <u>Williamston, MI 48895</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Golf Package</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>20</u>	\$ <u>20</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Finleys</u> <u>5616 W Saginaw Hwy</u> <u>Lansing, MI 48917</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Gift Certificate</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>20</u>	\$ <u>20</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Logan's</u> <u>5800 W Saginaw Hwy</u> <u>Lansing, MI 48917</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Gift Certificate</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>20</u>	\$ <u>20</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal \$60.00 \$60.00

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

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

SCHEDULE 1-IK

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CANDIDATE COMMITTEE

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

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Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Carrabba's</u> <u>6540 W Saginaw Hwy</u> <u>Lansing, MI 48917</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Gift Certificate</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>20</u>	\$ <u>20</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Family Traditions</u> <u>202 Morrell St</u> <u>Charlotte, MI 48813</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Tree Stand</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>90</u>	\$ <u>90</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Tom Snyder</u> <u>5190 Runneymede</u> <u>Holt, MI 48842</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Detroit Tiger Tickets</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>75</u>	\$ <u>75</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal **\$185.00** **\$185.00**

Grand Total of all Schedules 1-IK
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

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CANDIDATE COMMITTEE

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Contribution #1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: John Nagel 12485 Dow Rd Sunfield, MI 48890 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Golf Items</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ 20 \$ 20	
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Ike Newton PO Box 10147 Irondale, AL 35210 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Polo Shirt</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ 10 \$ 10	
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Glenda Cook 3694 W Howell Rd Mason, MI 48854 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Polo Shirt</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ 10 \$ 10	
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Page Subtotal		\$40.00	\$40.00

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

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 029234

CANDIDATE COMMITTEE

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

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Dan Jeroshewich 5331 Kreger St Sterling Heights, MI 48310 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Detroit Lions Football Tickets</u> 5. Date Of Receipt: <u>06/27/15</u> 6. Vendor Name & Address:	\$ <u>75</u>	\$ <u>75</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address:	\$ _____	\$ _____
Click Here for Memo Itemization			
<input type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address:	\$ _____	\$ _____
Click Here for Memo Itemization			
<input type="checkbox"/> Fund Raiser Contribution			

Page Subtotal

\$75.00

\$75.00

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

\$4,769.50

Enter this total
on line 6 of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

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

This Schedule itemizes:

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

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Reich, Tom 1822 Winchester Way Eaton Rapids, MI 48827	4. Type: <u>Money Loaned</u> 5. <u>Date Debt Was Incurred:</u> <u>05/10/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 400.00</u>	\$ \$ \$ \$ \$	\$	\$ 400.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Reich, Tom 1822 Winchester Way Eaton Rapids, MI 48827	4. Type: <u>Money Loaned</u> 5. <u>Date Debt Was Incurred:</u> <u>5/4/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 67.36</u>	\$ \$ \$ \$ \$	\$	\$ 67.36 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Reich, Tom 1822 Winchester Way Eaton Rapids, MI 48827	4. Type: <u>Money Loaned</u> 5. <u>Date Debt Was Incurred:</u> <u>5/10/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 100.00</u>	\$ \$ \$ \$ \$	\$	\$ 100.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt) **\$567.36**

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total
on line 12a "owed
by" or line 12b
"owed to" of the
Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

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

This Schedule itemizes:

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

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Reich, Tom 1822 Winchester Way Eaton Rapids, MI 48827	4. Type: <u>Money Loaned</u> 5. <u>Date Debt Was Incurred:</u> <u>05/12/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 59.69</u>	\$ \$ \$ \$ \$	\$	\$ 59.69 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Reich, Tom 1822 Winchester Way Eaton Rapids, MI 48827	4. Type: <u>Money Loaned</u> 5. <u>Date Debt Was Incurred:</u> <u>5/20/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 22.95</u>	\$ \$ \$ \$ \$	\$	\$ 22.95 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Reich, Tom 1822 Winchester Way Eaton Rapids, MI 48827	4. Type: <u>Money Loaned</u> 5. <u>Date Debt Was Incurred:</u> <u>5/31/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 13.55</u>	\$ \$ \$ \$ \$	\$	\$ 13.55 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt) **\$96.19**

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

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

This Schedule itemizes:

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

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Reich, Tom 1822 Winchester Way Eaton Rapids, MI 48827	4. Type: <u>Money Loaned</u> 5. <u>Date Debt Was Incurred:</u> <u>06/03/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 10.47</u>	\$ \$ \$ \$ \$	\$	\$ <u>10.47</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Reich, Tom 1822 Winchester Way Eaton Rapids, MI 48827	4. Type: <u>Money Loaned</u> 5. <u>Date Debt Was Incurred:</u> <u>6/4/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 2.00</u>	\$ \$ \$ \$ \$	\$	\$ <u>2.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Reich, Tom 1822 Winchester Way Eaton Rapids, MI 48827	4. Type: <u>Money Loaned</u> 5. <u>Date Debt Was Incurred:</u> <u>6/4/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 2.73</u>	\$ \$ \$ \$ \$	\$	\$ <u>2.73</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

\$15.20

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 029234

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

This Schedule itemizes:

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

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Reich, Tom 1822 Winchester Way Eaton Rapids, MI 48827	4. Type: <u>Money Loaned</u> 5. <u>Date Debt Was Incurred:</u> <u>06/04/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 8.11</u>	\$ \$ \$ \$ \$	\$	\$ 8.44 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Reich, Tom 1822 Winchester Way Eaton Rapids, MI 48827	4. Type: <u>Money Loaned</u> 5. <u>Date Debt Was Incurred:</u> <u>6/4/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 4.22</u>	\$ \$ \$ \$ \$	\$	\$ 4.22 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Reich, Tom 1822 Winchester Way Eaton Rapids, MI 48827	4. Type: <u>Money Loaned</u> 5. <u>Date Debt Was Incurred:</u> <u>6/4/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 11.65</u>	\$ \$ \$ \$ \$	\$	\$ 11.65 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

\$24.31

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total
on line 12a "owed
by" or line 12b
"owed to" of the
Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 029234

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

This Schedule itemizes:				
a. <input checked="" type="checkbox"/> Debts and obligations owed by or forgiven the committee OR b. <input type="checkbox"/> Debts and obligations owed to or forgiven by the committee. (Check either a or b. Use only for the purpose checked.)				
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8) <input type="checkbox"/> FORGIVEN
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Reich, Tom 1822 Winchester Way Eaton Rapids, MI 48827	4. Type: <u>Money Loaned</u> 5. <u>Date Debt Was Incurred:</u> <u>07/04/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 60.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$ 60.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Reich, Tom 1822 Winchester Way Eaton Rapids, MI 48827	4. Type: <u>Money Loaned</u> 5. <u>Date Debt Was Incurred:</u> <u>7/8/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 25.38</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$ 25.38</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Reich, Tom 1822 Winchester Way Eaton Rapids, MI 48827	4. Type: <u>Money Loaned</u> 5. <u>Date Debt Was Incurred:</u> <u>4/4/08</u> 6. <u>Original Amount of Debt:</u> <u>\$ 10,000.00</u>	<u>06/06/14 \$ 6,000.00</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$ 6,000.00</u>	<u>\$ 4,000.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: <u>State of Michigan 401K Loan</u>		Amount Endorsed: \$ _____		
Page Subtotal (Outstanding debt)				\$4,085.38
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				\$4,788.44

Enter this total
on line 12a "owed
by" or line 12b
"owed to" of the
Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Section 3

CANDIDATE COMMITTEE
COVER PAGE

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: <u>10/19/15</u> to <u>07/17/16</u>	
4. Candidate Last Name Reich	First Name Thomas
M.I. L	
4a. Office Sought Including District # or Community Served (If applicable) Eaton County Sheriff	
4b. County of Residence EATON	
6. Treasurer's Name & Residential Address Theresa O'Dell 140 Spring Street Vermontville, Michigan 49096	
Area Code & Phone _____	
8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) Catherine M Marcus CPA John D Vanator CPA PC PO Box 509 Eaton Rapids, Michigan 48827	
Area Code and Phone <u>(517) 663-4204</u>	

1. Committee I.D. Number
029234

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

5. Committee's Mailing Address
1822 Winchester Way
Eaton Rapids, Michigan 48827

Area Code and Phone _____

If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

7. Treasurer's Business Address
N/A

Area Code and Phone _____

9. TYPE OF STATEMENT

9a. ☒ Pre-Election OR 9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

☒ Primary

☐ General

☐ Convention

☐ Special

☒ School

☐ Caucus

Date of Election, Convention or Caucus _____

Required ONLY if candidate is not on the ballot for the current year.

☐ July Quarterly

☐ October Quarterly

9c. ☐ Annual Statement (_____) Coverage Year

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

9e. Dissolution of Candidate Committee

☐ By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt.

Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Effective date of dissolution _____

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

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

Current Treasurer or Designated Record keeper Catherine M Marcus Signature Catherine M. Marcus Date 7/19/16

Candidate Thomas L Reich Signature Thomas L Reich Date 7/20/16



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 029234

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

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>22,315.90</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$22,315.90</u>	(18.) \$ <u>\$22,315.90</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>\$200.00</u>	(19.) \$ <u>\$200.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>\$22,515.90</u>	(20.) \$ <u>\$22,515.90</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$3,005.00</u>	(21.) \$ <u>\$3,005.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ _____	(22.) \$ _____
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$13,749.17</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ _____	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>\$39.96</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>\$13,789.13</u>	(23.) \$ <u>\$13,789.13</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ _____	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ _____	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ _____	(24.) \$ _____
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$4,788.44</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _____	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>\$23,520.34</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$22,515.90</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$46,036.24</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$13,789.13</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$32,247.11</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 029234

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

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/04/16</u></p> <p>Name & Address: John Hays 1840 Schaffer Dr Jackson MI 49203</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Legal Advisor</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>500.00</u>	\$ <u>500.00</u>
		Click Here for Memo Itemization	
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/04/16</u></p> <p>Name & Address: Jeff Kirkpatrick 401 S Jackson St Jackson MI 49201</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Business Owner</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>1500.00</u>	\$ <u>1500.00</u>
		Click Here for Memo Itemization	
<p>3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/24/16</u></p> <p>Name & Address: Gene and Sandra Wriggelsworth PO Box 581 Holt MI 48842</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Law Enforcement</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>280.00</u>	\$ <u>280.00</u>
		Click Here for Memo Itemization	
<p>3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/24/16</u></p> <p>Name & Address: Gene Wriggelsworth 2655 Maritime Dr Lansing MI 48911</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Law Enforcement</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>190.00</u>	\$ <u>190.00</u>
		Click Here for Memo Itemization	

Page Subtotal **\$2,470.00**

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 029234

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

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		8. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/24/16</u></p> <p>Name & Address: Allan Spyke 5361 E Hidden Lake Dr East Lansing MI 48823</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Law Enforcement</u> Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>190.00</u>	\$ <u>190.00</u>
		Click Here for Memo Itemization	
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/24/16</u></p> <p>Name & Address: Joel & Beth Maatman 9111 Williams Rd Dewitt MI 48820</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Law Enforcement</u> Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ <u>100.00</u>
		Click Here for Memo Itemization	
<p>3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/24/16</u></p> <p>Name & Address: Paul Malewski 1308 Hall St Eaton Rapids MI 48827</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>50.00</u>	\$ <u>50.00</u>
		Click Here for Memo Itemization	
<p>3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/24/16</u></p> <p>Name & Address: Randy Thayer 10875 Riverside Dr Dimondale MI 48821</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>300.00</u>	\$ <u>300.00</u>
		Click Here for Memo Itemization	

Page Subtotal **\$640.00**

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

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line 3a of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 029234

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

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/24/16</u> Name & Address: Joe Drolett 5736 Whitehaven Dr Lansing MI 48917		\$ <u>340.00</u>	\$ <u>340.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/11/16</u> Name & Address: James Osieczonek 316 N Cryts Rd Lansing MI 48917		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Commissioner</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/11/16</u> Name & Address: Mary Clark 412 Chanticleer Trl Lansing MI 48917		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Twp Clerk</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/11/16</u> Name & Address: Dr Phillip Brown 4604 Norwick St Lansing MI 48917		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$790.00

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

Enter this total on
line 3a of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

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

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		8. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/11/16</u> Name & Address: <u>G Michael Hocking</u> <u>5814 Cabrena Dr</u> <u>Lansing MI 48917</u>		<u>\$ 540.00</u>	<u>\$ 540.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/11/16</u> Name & Address: <u>Scott Wriggelsworth</u> <u>2327 Keller Rd</u> <u>Holt MI 48842</u>		<u>\$ 390.00</u>	<u>\$ 390.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Lawenforcement</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/11/16</u> Name & Address: <u>Thomas Snyder</u> <u>5190 Runnymede Dr</u> <u>Holt MI 48842</u>		<u>\$ 300.00</u>	<u>\$ 300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Business Owner</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/06/16</u> Name & Address: <u>Christine Walker</u> <u>209 E Lincoln St</u> <u>Grand Ledge MI 48837</u>		<u>\$ 25.00</u>	<u>\$ 25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$1,255.00

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

Enter this total on
line 3a of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 029234

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

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/06/16</u> Name & Address: Jeffrey Tiggelman (Canteen Services) 615 Denham Dr Grand Rapids MI 49546		\$ <u>440.00</u>	\$ <u>440.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/06/16</u> Name & Address: William Siamy 320 W Harris St Charlotte MI 48813		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/06/16</u> Name & Address: Patrick A Brown (Holt/Dimondale Ins) 1298 Aurelius Rd Holt MI 48842		\$ <u>440.00</u>	\$ <u>440.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Insurance</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/06/16</u> Name & Address: Leonard & Gloria Benden 542 N Wheaton Rd Charlotte MI 48813		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$1,005.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 029234

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

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		8. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/06/16</u> Name & Address: <u>Jack Turner (Family Traditions)</u> <u>202 Morrell St</u> <u>Charlotte MI 48813</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/06/16</u> Name & Address: <u>Patrick Hutting</u> <u>1046 Thompson Shore Dr</u> <u>Howell MI 48843</u>		\$ <u>355.00</u>	\$ <u>355.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>State Worker</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/06/16</u> Name & Address: <u>Dr Matthew & Vicki Myers</u> <u>4448 Ocean Height Dr</u> <u>Seaside CA 93955</u>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>law Enforcement</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/06/16</u> Name & Address: <u>James Voss</u> <u>3456 Tomlinson Rd</u> <u>Mason MI 48854</u>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$855.00

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

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line 3a of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 029234

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

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		8. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/16/16</u> Name & Address: Jack Devine 7304 Dupree Ave Dimondale MI 48821		\$ 30.00	\$ 30.00
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/16/16</u> Name & Address: Ken Knowlton 12439 Nixon Rd Grand Ledge MI 48837		\$ 340.00	\$ 340.00
5. If over \$100.00 cumulative, please provide: Occupation <u>Magistrate</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/16/16</u> Name & Address: William Byrnes (Sgt McDaniels MSU) Lansing MI 48910		\$ 215.00	\$ 215.00
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/16/16</u> Name & Address: Jane Dotson 1820 S Chester Rd Charlotte MI 48813		\$ 1500.00	\$ 1500.00
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$2,085.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 029234

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

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/16/16</u> Name & Address: IBEW PAC Voluntary Fund 900 Seventh St NW Washington DC 20001		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>PAC</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/16/16</u> Name & Address: James Downs (Lansing Uniform) 6850 Mulderstraat Grand Ledge MI 48837		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u> Name & Address: Jon McNett (Durobyte Motorsports) 627 Lansing Rd Pottersville MI 48876		\$ <u>440.00</u>	\$ <u>440.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u> Name & Address: Mark Wriggelsworth 5651 Ambler Holt MI 48842		\$ <u>115.00</u>	\$ <u>115.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Law Enforcement</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$1,155.00

Grand Total of All Schedules 1A
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line 3a of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 029234

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

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/30/16</u>	
Name & Address: Robert Farmer 126 Okemos St #9 Mason MI 48854		\$ <u>340.00</u>	\$ <u>340.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/30/16</u>	
Name & Address: Col Ellis Brumbaugh 81 Wildemere Dr Mason MI 48854		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/30/16</u>	
Name & Address: Darrell Tennis 5675 S Stine Rd Olivet MI 49076		\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Business Owner</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/30/16</u>	
Name & Address: Carol Scherer 12794 Iroquois Dr Grand Ledge MI 48837		\$ <u>35.00</u>	\$ <u>35.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$575.00

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

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line 3a of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

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

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u> Name & Address: Kristi Tullis 2908 Kalamazoo Ave Portage MI 49024		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u> Name & Address: Neal Rohrs 2990 Stewart Rd Charlotte MI 48813		\$ <u>485.00</u>	\$ <u>485.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Investor</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u> Name & Address: Kent Austin 4171 Young Rd Bellevue MI 48021		\$ <u>156.00</u>	\$ <u>156.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Commissioner</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u> Name & Address: Michael Hosey 7475 N Cochran Rd Charlotte MI 48813		\$ <u>370.00</u>	\$ <u>370.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>State Worker</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$1,061.00

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 029234

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

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Daniel Fillion 5926 Shaw St Haslett MI 48840		\$ 165.00	\$ 165.00
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>Law Enforcement</u> Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2 Name & Address: Tammie Brand 5397 Packard Hwy Charlotte MI 48813		\$ 66.00	\$ 66.00
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>Secretary</u> Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: Michael & Mary Boes 1312 S Eleventh Ave Alpena MI 49707		\$ 50.00	\$ 50.00
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: Richard Cook 3378 N Michigan Rd Dimondale MI 48821		\$ 100.00	\$ 100.00
PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>State Worker</u> Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal \$381.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 029234

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

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u> Name & Address: Scott Ellis 621 Riverwalk Dr Mason MI 48854		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MLBA</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u> Name & Address: Ted Dotts 6790 Lakeview Dr Bellevue MI 49021		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u> Name & Address: Kellie Dean 215 Chimney Oaks Dr Okemos MI 48864		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Transportation</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u> Name & Address: Mark Jones 2460 Pine Hollow Dr East Lansing MI 48823		\$ <u>115.00</u>	\$ <u>115.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Physician</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$785.00**

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
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3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u> Name & Address: <u>Mike & Kellie Garland</u> <u>9517 Columbia Hwy</u> <u>Eaton Rapids MI 48827</u>		\$ <u>447.00</u>	\$ <u>447.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Law Enforcement</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u> Name & Address: <u>Mike & Kelli Wriggelsworth</u> <u>3512 N Clinton Trl</u> <u>Charlotte MI 48813</u>		\$ <u>180.00</u>	\$ <u>180.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u> Name & Address: <u>Thomas Foote</u> <u>1428 E Dansville Rd</u> <u>Masonn MI 48854</u>		\$ <u>157.00</u>	\$ <u>157.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u> Name & Address: <u>Brion Pearson</u> <u>2418 Teel Ave</u> <u>Lansing MI 48910</u>		\$ <u>215.00</u>	\$ <u>215.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Medical</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$999.00

Grand Total of All Schedules 1A
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