



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)
<p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/30/16</u></p> <p>Name &amp; Address: <b>Daniel Zolnai</b> <b>4282 Eaton River Trail</b> <b>Eaton Rapids MI 48827</b></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>LPD</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>115.00</u>	\$ <u>115.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/30/16</u></p> <p>Name &amp; Address: <b>Andrew Stopczynski</b> <b>812 N Clinton St</b> <b>Grand Ledge MI 48837</b></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>115.00</u>	\$ <u>115.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/30/16</u></p> <p>Name &amp; Address: <b>Joseph Kattelus</b> <b>832 W Thomas L Pkwy</b> <b>Lansing MI 48917</b></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Computer Programmer</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>676.00</u>	\$ <u>676.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/30/16</u></p> <p>Name &amp; Address: <b>Julie Coenen</b> <b>2315 Brookmead Way</b> <b>Charlotte MI 48813</b></p> <p>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</p>		\$ <u>115.00</u>	\$ <u>115.00</u>
		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$1,021.00

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 <u>all</u> 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>06/30/16</u></p> <p>Name &amp; Address: <u>Jeff &amp; Amy Warder</u> <u>6924 Mulderstratt</u> <u>Grand Ledge MI 48837</u></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>215.00</u>	\$ <u>215.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/30/16</u></p> <p>Name &amp; Address: <u>Lisa Sherman</u> <u>600 Casler Rd</u> <u>Charlotte MI 48813</u></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>115.00</u>	\$ <u>115.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/30/16</u></p> <p>Name &amp; Address: <u>Daniel Anderson</u> <u>4972 Bunker Rd</u> <u>Mason MI 48854</u></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>115.00</u>	\$ <u>115.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/30/16</u></p> <p>Name &amp; Address: <u>Lara O'Brien</u> <u>5028 Haddon Hall Dr</u> <u>Holt MI 48842</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Dispatcher</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>115.00</u>	\$ <u>115.00</u>
		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$560.00

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 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: Adam Morris 4330 Courtside Dr Williamston MI 48895		\$ <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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u> Name & Address: Thomas Johnson 6030 Fairgrove St Kalamazoo MI 49009		\$ <u>115.00</u>	\$ <u>115.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>MDOC</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u> Name & Address: Michael Batcheller 110 Halbert St Grand Ledge MI 48837		\$ <u>340.00</u>	\$ <u>340.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>BW&amp;L</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u> Name & Address: Josh Ivey 19766 16 Mile Rd Marshall MI 49068		\$ <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		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$685.00

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.		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>06/30/16</u>	
Name & Address: Robert Shroyer 2740 Eaton Rapids Rd Lansing MI 48911		\$ <u>540.00</u>	\$ <u>540.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Towing Business</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>06/29/16</u>	
Name & Address: Kevin Heuhs 6175 Brooks Landing Dimondale MI 48821		\$ <u>115.00</u>	\$ <u>115.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Car Dealer</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>06/29/16</u>	
Name & Address: Jessica Kyer 920 West St Lansing MI 48915		\$ <u>160.00</u>	\$ <u>160.00</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 #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/29/16</u>	
Name & Address: Gary Elliott 11297 Shaytown Rd Sunfield MI 48890		\$ <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 \$915.00

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>06/29/16</u>	
Name & Address: <b>Jack Cook</b> 3684 W Howell Rd Mason MI 48854		\$ <u>150.00</u>	\$ <u>150.00</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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/29/16</u>	
Name & Address: <b>Jerri Nesbitt</b> 3901 Maurer Rd Charlotte MI 48813		\$ <u>10.00</u>	\$ <u>10.00</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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/29/16</u>	
Name & Address: <b>James Drevenstatt Mocer</b> 1331 Hosta Court Holt MI 48842		\$ <u>190.00</u>	\$ <u>190.00</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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/29/16</u>	
Name & Address: <b>James Moreseth</b> 4409 Yarrow Holt MI 48842		\$ <u>155.00</u>	\$ <u>155.00</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		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$505.00

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>06/29/16</u> Name & Address: Gary & Robin Naeyaert 501 Riverwalk Dr Mason MI 48854		\$ 190.00	\$ 190.00
5. If over \$100.00 cumulative, please provide: Occupation <u>Polical Adv/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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/29/16</u> Name & Address: Nicole Lefke 4409 Yarrow Holt MI 48842		\$ 115.00	\$ 115.00
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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/29/16</u> Name & Address: Tim Jungel 8820 Cook Rd Olivet MI 49076		\$ 115.00	\$ 115.00
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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/29/16</u> Name & Address: Ted Coy 1919 Oriole Charlotte MI 48813		\$ 365.00	\$ 365.00
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		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$785.00

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 <u>all</u> 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>06/29/16</u></p> <p>Name &amp; Address: <b>Mike Ruedisueli</b> 1079 E Kinsel Charlotte MI 48813</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>115.00</u>	\$ <u>115.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/29/16</u></p> <p>Name &amp; Address: <b>Chip Ruedisueli</b> 1712 E Grand Ledge Hwy Grand Ledge MI</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</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>115.00</u>	\$ <u>115.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/29/16</u></p> <p>Name &amp; Address: <b>Eldon Warr</b> 2869 Jolly Rd Okemos MI 48864</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</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>115.00</u>	\$ <u>115.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/29/16</u></p> <p>Name &amp; Address: <b>Blanche Martin</b> 2869 Jolly Rd Okemos MI 48864</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</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>115.00</u>	\$ <u>115.00</u>
		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$460.00**

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>06/29/16</u> Name & Address: Josh Turner 521 Schoolcraft Grand Ledge MI 48837		\$ <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	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/29/16</u> Name & Address: Jeff Lenneman 205 W Herbison Dewitt MI 48820		\$ <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	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/29/16</u> Name & Address: Elbert Sidel 4425 Reed Durand MI 48429		\$ <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	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/29/16</u> Name & Address: Ted Johnson 6030 Fairgrove St Kalamazoo MI 49009		\$ <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 \$460.00

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	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/29/16</u>		
Name & Address: Ken King 46 Kingman Rd Mason MI 48854			\$ 340.00	\$ 340.00
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			<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/29/16</u>		
Name & Address: Dan Moak 1818 Eden Mason MI 48854			\$ 357.00	\$ 357.00
5. If over \$100.00 cumulative, please provide: Occupation <u>Bail Bondsman</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/29/16</u>		
Name & Address: Brett Reich 3702 Observatory Lane Holt MI 48842			\$ 395.00	\$ 395.00
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			<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/29/16</u>		
Name & Address: Andrew Cole 1298 Aurelius Rd Holt MI 48842			\$ 80.00	\$ 80.00
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			<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$1,172.00

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 <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>06/29/16</u> Name & Address: <b>Sandra Pearson</b> <b>2418 Teal</b> <b>Lansing MI 48917</b>		\$ <u>140.00</u>	\$ <u>140.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Hair Stylist</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/29/16</u> Name & Address: <b>Edward Sussex</b> <b>Lansing St</b> <b>Charlotte MI 48813</b>		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Maintenance</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/29/16</u> Name & Address: <b>Kevin Kaplan</b> <b>Okemos MI 48864</b>		\$ <u>65.00</u>	\$ <u>65.00</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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/29/16</u> Name & Address: <b>Kylie Kattelles</b> <b>4468 Oakwood Dr</b> <b>Okemos MI 48864</b>		\$ <u>15.00</u>	\$ <u>15.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Nurse</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$240.00

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 <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>06/29/16</u> Name & Address: <u>Scott Reich</u> <u>2233 Delhi NE</u> <u>Holt MI 48842</u>		\$ <u>325.00</u>	\$ <u>325.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Sparrow Hospital 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	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/29/16</u> Name & Address: <u>Dan Prueter</u> <u>2833 Webster</u> <u>Lansing MI 48906</u>		\$ <u>110.00</u>	\$ <u>110.00</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>06/29/16</u> Name & Address: <u>Jennifer Spicer</u> <u>912 Virginia St SE #2</u> <u>Grand Rapids MI 49506</u>		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Student</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>06/29/16</u> Name & Address: <u>David Miller</u> <u>11251 Plains Rd</u> <u>Eaton Rapids MI 48827</u>		\$ <u>90.00</u>	\$ <u>90.00</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 \$545.00

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 <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>06/29/16</u> Name & Address: Tara Palmer 7304 Talbot Drive Lansing MI 48917		\$ <u>80.00</u>	\$ <u>80.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Insurance Agent</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/29/16</u> Name & Address: Tracey Flannery 5361 E Hidden Lake Dr East Lansing MI 48823		\$ <u>10.00</u>	\$ <u>10.00</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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/13/16</u> Name & Address: Jane Whitacre 1111 Bretton Rd Lansing MI 48917		\$ <u>50.00</u>	\$ <u>50.00</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		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/13/16</u> Name & Address: Lance Graf 4419 Carter Rd E Stockbridge MI 49285		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Firearm Dealer</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$240.00**

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 <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>07/13/16</u> Name & Address: <b>Dave Bankhead</b> <b>1262 Otto Rd</b> <b>Charlotte MI 48813</b> 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		\$ <u>300.00</u>	\$ <u>300.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>07/13/16</u> Name & Address: <b>William &amp; Helen Schneider</b> <b>1915 Glass Dr</b> <b>Charlotte MI 48813</b> 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		\$ <u>200.00</u>	\$ <u>200.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/30/16</u> Name & Address: <b>Miscellaneous Internet Receipts</b> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>191.90</u>	\$ <u>191.90</u>
		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address: 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ _____	\$ _____
		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$691.90

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

\$22,315.90

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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED OTHER RECEIPTS  
SCHEDULE 1A-1

CANDIDATE COMMITTEE

1. Committee I.D. Number 029234

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

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address:  Theresa O'Dell 140 Spring Street Vermontville, MI 49096	Date of Receipt <u>06/30/16</u>	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input checked="" type="checkbox"/> Other (Specify) <u>Re-Deposit</u>	\$ <u>200.00</u>
Receipt #2 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #3 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #4 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #5 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #6 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #7 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate Click for Memo Itemization Type <input type="checkbox"/> Other (Specify) _____	\$ _____
Page Subtotal			\$200.00
Grand Total of All Schedules 1A -1 (Complete on last page of Schedule)			\$200.00

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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: Larry Treadwell 1269 Porter Charlotte, MI 48813  If over \$100.00 cumulative, please provide: Occupation: <u>law enforcement</u> Employer Name & Business Address: ECSCO 1025 Independence Charlotte, MI  <input checked="" type="checkbox"/> Fund Raiser Contribution	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 bag</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:  Click Here for Memo Itemization	\$ 150	\$ 150
Contribution # 2      PAC Receipt? <input type="checkbox"/> Yes Name & Address: Jeff Warder 6924 Mulderstraat Grand Ledge, MI  If over \$100.00 cumulative, please provide: Occupation: <u>law enforcement</u> Employer Name & Address: ECSCO 1025 Independence Charlotte, MI  <input checked="" type="checkbox"/> Fund Raiser Contribution	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>glock holster</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:  Click Here for Memo Itemization	\$ 40	\$ 40
Contribution #3      PAC Receipt? <input type="checkbox"/> Yes Name & Address: Jim Dravenstratt-Mocer 1331 Hosta Court Holt, MI 48842  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>Lapel Badge</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:  Click Here for Memo Itemization	\$ 75	\$ 75
Page Subtotal		\$265.00	265.00
Grand Total of all Schedules 1-IK (Complete on last page of Schedule)			

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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>MidMichigan Emergency Equipment</u> <u>Lansing, MI</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>flashlights</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ <u>60</u>	\$ <u>60</u>
<a href="#">Click Here for Memo Itemization</a>			
<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</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>06/24/16</u> 6. Vendor Name & Address:	\$ <u>25</u>	\$ <u>25</u>
<a href="#">Click Here for Memo Itemization</a>			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Fast Eddie's Oil Change</u> <u>6219 W. Saginaw</u> <u>Lansing, MI 48917</u>  If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>oil change car wash</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ <u>45</u>	\$ <u>45</u>
<a href="#">Click Here for Memo Itemization</a>			
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal \$ 130.00 130.00

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-K

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>Ziebart</u> <u>604 N. Croyts Rd</u> <u>Lansing, MI 48917</u>  If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>interior detail</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ <u>50</u>	\$ <u>50</u>
<a href="#">Click Here for Memo Itemization</a>			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2      PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Lansing Uniform</u> <u>1141 S. Washington</u> <u>Lansing, MI 48910</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>shirt</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ <u>20</u>	\$ <u>20</u>
<a href="#">Click Here for Memo Itemization</a>			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3      PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Family Tradition Treestands</u> <u>202 Morrell St</u> <u>Charlotte, MI</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>06/24/16</u> 6. Vendor Name & Address:	\$ <u>150</u>	\$ <u>150</u>
<a href="#">Click Here for Memo Itemization</a>			
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal

\$220.00

\$220.00

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

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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-K

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 Name & Address: <u>Bobcat of Lansing</u> <u>3237 W. Main 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>weedtrimmer</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ <u>150</u>	\$ <u>150</u>
<input checked="" type="checkbox"/> Fund Raiser Contribution Click Here for Memo Itemization			
Contribution # 2 Name & Address: <u>Durobyte</u> <u>627 E. Lansing Rd</u> <u>Pottersville, 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>car wash kit and 2 oil changes</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ <u>50</u>	\$ <u>50</u>
<input checked="" type="checkbox"/> Fund Raiser Contribution Click Here for Memo Itemization			
Contribution #3 Name & Address: <u>D&amp;G Equipment</u> <u>110 S. Lincoln</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>Leaf blower</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ <u>150</u>	\$ <u>150</u>
<input checked="" type="checkbox"/> Fund Raiser Contribution Click Here for Memo Itemization			

Page Subtotal \$350.00 \$350.00

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

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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 Name & Address: Tom Reich 1855 Winchester Way Eaton Rapids, MI 48827 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 basket</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ 10	\$ 10
<a href="#">Click Here for Memo Itemization</a>			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #2 Name & Address: Mike Wiggelsworth 3512 N. Clinton Trl Charlotte, MI 48813 If over \$100.00 cumulative, please provide: Occupation: <u>sales</u> 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>bag, 3 shirts, gloves</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ 100	\$ 100
<a href="#">Click Here for Memo Itemization</a>			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 Name & Address: Clinton Wells 700 Clinton St Grand Ledge, MI 48837 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</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ 20	\$ 20
<a href="#">Click Here for Memo Itemization</a>			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Page Subtotal		\$130.00	\$130.00
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-K

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 Name & Address: Jack Cook 3684 W. Howell Rd Mason  If over \$100.00 cumulative, please provide: Occupation: <u>retired</u> 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>MSU football, basketball, silver coins, tool box, Kincald painting, I</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address: <u>cont. Clinton book and doll, game container, soni-crafter,</u>	\$ <u>700</u>	\$ <u>700</u>
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 Name & Address: Dan Jaroshewich Detroit Lions 222 Republic Dr Allen Park, MI 48101  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>Autograph football</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ <u>100</u>	\$ <u>100</u>
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 Name & Address: Tommie 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>autograph baseball</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ <u>35</u>	\$ <u>35</u>
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal \$835.00 \$835.00

Grand Total of all Schedules 1-K  
(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

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>Applebeels</u> <u>5400 W. Saginaw Hw</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>2 gift card</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ <u>40</u>	\$ <u>40</u>
<a href="#">Click Here for Memo Itemization</a>			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2      PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Carrabba's</u> <u>6540 W. Saginaw</u> <u>Lansing, MI 48917</u>  If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>2 gift cards</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ <u>50</u>	\$ <u>50</u>
<a href="#">Click Here for Memo Itemization</a>			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3      PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>NGG Cinemas</u> <u>2500 Showtime Dr</u> <u>Lansing, MI 48912</u>  If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>movie passes</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ <u>20</u>	\$ <u>20</u>
<a href="#">Click Here for Memo Itemization</a>			
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal

110.00

110.00

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

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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

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: The Jewel Golf at Mackinac 2177 Commons Parkway 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>golf, with cart and horse drawn carriage</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ 300	\$ 300
<a href="#">Click Here for Memo Itemization</a>			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Cheddar's 5719 W. Saginaw Lansing, MI 48917  If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>gift card</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ 10	\$ 10
<a href="#">Click Here for Memo Itemization</a>			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Honey Baked Ham 5601 W. Saginaw Lansing, MI 48917  If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address:	\$ 15	\$ 15
<a href="#">Click Here for Memo Itemization</a>			
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal \$325.00 \$325.00

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

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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

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>Outback</u> <u>707 Brookside</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 cards</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ <u>30</u>	\$ <u>30</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2      PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Tavern &amp; Tap</u> <u>101 S. Washington Squ</u> <u>Lansing, MI 48933</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 card</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ <u>30</u>	\$ <u>30</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3      PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>LosTres Amigo</u> <u>5010 W. Saginaw</u> <u>Lansing, MI 48917</u>  If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>gift card</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ <u>25</u>	\$ <u>25</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Page Subtotal		\$85.00	\$85.00

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

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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

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>Finley's Grill</u> <u>7433 W. Saginaw</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 card</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ <u>20</u>	\$ <u>20</u>
<a href="#">Click Here for Memo Itemization</a>			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>City Limits</u> <u>2120 E. Saginaw</u> <u>East Lansing, MI 48823</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>2 gift cards</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ <u>60</u>	\$ <u>60</u>
<a href="#">Click Here for Memo Itemization</a>			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Douglas J Salon</u> <u>331 E. Grand River</u> <u>East Lansing, MI 48823</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 card</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ <u>50</u>	\$ <u>50</u>
<a href="#">Click Here for Memo Itemization</a>			
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal 130.00 130.00

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

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)
<p>Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name &amp; Address: <u>Eldorado Golf Course</u> <u>3750 W. Howell</u> <u>Mason, MI 48854</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: Employer Name &amp; Business Address:</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description <u>golf for 4 and cart</u></p> <p>5. Date Of Receipt: <u>06/24/16</u></p> <p>6. Vendor Name &amp; Address:</p>	<p>\$ <u>120</u></p> <p>\$ <u>120</u></p>	
<p><input checked="" type="checkbox"/> Fund Raiser Contribution</p> <p>Click Here for Memo Itemization</p>			
<p>Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name &amp; Address: <u>Home Depot</u> <u>936 S. Waverly</u> <u>Lansing, MI 48917</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: Employer Name &amp; Address:</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description <u>hand tools - bbq utensils</u></p> <p>5. Date Of Receipt: <u>06/24/16</u></p> <p>6. Vendor Name &amp; Address:</p>	<p>\$ <u>25</u></p> <p>\$ <u>25</u></p>	
<p><input checked="" type="checkbox"/> Fund Raiser Contribution</p> <p>Click Here for Memo Itemization</p>			
<p>Contribution #3 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name &amp; Address: <u>Mongolian Grill</u> <u>2080 W. Grand River</u> <u>Oakman, MI 48864</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: Employer Name &amp; Address:</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description <u>4 gift cards</u></p> <p>5. Date Of Receipt: <u>06/24/16</u></p> <p>6. Vendor Name &amp; Address:</p>	<p>\$ <u>100</u></p> <p>\$ <u>100</u></p>	
<p><input checked="" type="checkbox"/> Fund Raiser Contribution</p> <p>Click Here for Memo Itemization</p>			

Page Subtotal **\$245.00** **\$245.00**

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

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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

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: Glenda Cook 3694 W. Howell Rd Mason, MI 48854  If over \$100.00 cumulative, please provide: Occupation: <u>secretary part time</u> 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>Eotech HWS, flashlight, knife, hats</u> 5. Date Of Receipt: <u>06/24/16</u> 6. Vendor Name & Address:	\$ <u>180.</u>	\$ <u>180</u>
<a href="#">Click Here for Memo Itemization</a>			
<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:	\$ _____	\$ _____
<a href="#">Click Here for Memo Itemization</a>			
<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:	\$ _____	\$ _____
<a href="#">Click Here for Memo Itemization</a>			
<input type="checkbox"/> Fund Raiser Contribution			

Page Subtotal

180.00

180.00

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

3,005.00

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**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

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

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<b>Expenditure #1</b> Name <u>Ingham County Sobriety Court Foundation</u> Address <u>John Nicolucci/Foster, Swift, Collins &amp; Smith PC</u> <u>313 S Washington Square</u> <u>Lansing, MI 48933-2193</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/23/15</u> Date	<u>\$ 100.00</u>
<b>Expenditure #2</b> Name <u>John D Vanator CPA PC</u> Address <u>PO Box 509</u> <u>Eaton Rapids, MI 48827-0509</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Candidate Committee Forms</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/21/15</u> Date	<u>\$ 148.75</u>
<b>Expenditure #3</b> Name <u>Wal-Mart</u> Address <u>1680 Packard Hwy</u> <u>Charlotte, MI 48813</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Candy - Trunk or Treat</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/28/15</u> Date	<u>\$ 56.97</u>
<b>Expenditure #4</b> Name <u>Highfields</u> Address <u>5123 Old Plank Road</u> <u>Onondaga, MI 49264</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/29/15</u> Date	<u>\$ 100.00</u>
<b>Expenditure #5</b> Name <u>MLK Jr Holiday Commission</u> Address <u>PO Box 24112</u> <u>Lansing, MI 48909-4112</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/07/15</u> Date	<u>\$ 80.00</u>
Subtotal this page			<b>\$485.72</b>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE

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

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Rotary Club of Charlotte</u> Address <u>PO Box 484</u> <u>Charlotte, MI 48813-0484</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Dues</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/15/15</u> Date	<u>\$ 44.00</u> <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #2 Name <u>Rotary Club of Charlotte</u> Address <u>PO Box 484</u> <u>Charlotte, MI 48813-0484</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Dues</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>01/05/16</u> Date	<u>\$ 234.00</u> <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #3 Name <u>St Michael's K of C Council #7311</u> Address <u>345 Edwards St</u> <u>Grand Ledge, MI 48837</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Ad-Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>01/11/16</u> Date	<u>\$ 150.00</u> <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #4 Name <u>Michigan Sheriff's Association</u> Address <u>620 S Capitol Ave Ste 320a</u> <u>Lansing, MI 48933</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Shirts</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/01/16</u> Date	<u>\$ 78.44</u> <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #5 Name <u>Crime Stoppers of Michigan</u> Address <u>740 May St</u> <u>Lansing, MI 48906</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/01/16</u> Date	<u>\$ 200.00</u> <a href="#">Click Here for Memo Itemization Type</a>
Subtotal this page			<b>\$706.44</b>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

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

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Charlotte Lithograph</u> Address <u>144 South Cochran</u> <u>Charlotte, MI 48813</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Golf Flyers/Envelopes</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/16/16</u> Date	<u>\$ 93.81</u>
Expenditure #2 Name <u>US Post Office</u> Address <u>117 W Lovett St</u> <u>Charlotte, MI 48813</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/16/16</u> Date	<u>\$ 98.00</u>
Expenditure #3 Name <u>Eaton County Information Systems</u> Address <u>1045 Independence Blvd</u> <u>Charlotte, MI 48813</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Laptop</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/17/16</u> Date	<u>\$ 25.00</u>
Expenditure #4 Name <u>The Hundred Club</u> Address <u>3315 S. Pennsylvania Ave.</u> <u>Lansing, MI 48910</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/18/16</u> Date	<u>\$ 100.00</u>
Expenditure #5 Name <u>Charlotte Lithograph</u> Address <u>144 South Cochran</u> <u>Charlotte, MI 48813</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Golf Flyers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/24/16</u> Date	<u>\$ 36.80</u>
Subtotal this page			<b>\$353.61</b>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

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

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<b>Expenditure #1</b> Name <b>Susan G Komen</b> Address 2922 Fuller NE Ste 107B Grand Rapids, MI 49505 <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/08/16</u> Date	<u>\$ 100.00</u>
<b>Expenditure #2</b> Name <b>Eaton County Five-O 5K Run/Walk</b> Address 1401 Elmwood Rd. Lansing MI 48917 <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/17/16</u> Date	<u>\$ 100.00</u>
<b>Expenditure #3</b> Name <b>Best Buy</b> Address 5216 W Saginaw Hwy Lansing, MI 48917 <input type="checkbox"/> Fund Raiser	Purpose: <u>Microsoft Office</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/22/16</u> Date	<u>\$ 158.99</u>
<b>Expenditure #4</b> Name <b>Best Buy</b> Address 5216 W Saginaw Hwy Lansing, MI 48917 <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign Laptop</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/23/16</u> Date	<u>\$ 275.59</u>
<b>Expenditure #5</b> Name <b>US Post Office</b> Address 117 W Lovett St Charlotte, MI 48813 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/06/16</u> Date	<u>\$ 49.00</u>
Subtotal this page			<b>\$683.58</b>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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