

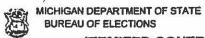
1. Committee I.D. Number 029234

CANDIDATE COMMITTEE

2. Committee Name

Committee To Re-Elect Tom Reich For Sheriff

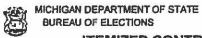
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/30/16		
Daniel Zolnai		
4282 Eaton River Trail	445.00	145.00
Eaton Rapids MI 48827	_s 115.00	<u>, 115.00</u>
5. If over \$100.00 cumulative, please provide:	Click Hoss &	or Memo Itemization
Occupation LPD Employer	Click Here it	or Memo Itemization
Business Address	•9	
Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/30/16 Name & Address		
Andrew Stopczynski	445.00	445.00
812 N Clinton St	₅ 115.00	<u>,</u> 115.00
Grand Ledge MI 48837		
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Law Enforcement Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/30/16 Name & Address:		
Joseph Kattelus	676 00	070.00
832 W Thomas L Pkwy	<u>\$676.00</u>	_s 676.00
Lansing MI 48917	Clieb Hear for	
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Computer Programmer Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		35 KD
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 06/30/16 Name & Address		
Julie Coenen	100 mg	
2315 Brookmead Way	_s 115.00	, 115.00
Charlotte MI 48813		
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Medical Employer		Commence of the second of the
Business Address		
Type of Contribution: Direct Loan from a person 🗸 Fund Raiser		
Page Subtotal	\$1,021.00	
Grand Total of All Schedules 1A	+ (lam (194	•
(Complete on last page of Schedule)		J
Page 14 of 26	Enter this total on line 3a of Summary	
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1. Committee I.D. Number 029234

CANDIDATE COMMITTEE

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? YES 4. Date of Receipt 06/30/16	•	
Jeff & Arny Warder		
6924 Mulderstratt	.215.00	215.00
Grand Ledge MI 48837	\$ 213.00	\$210.00
5. If over \$100.00 cumulative, please provide:	Click Hara f	or Memo Itemization
Occupation Law Enforcement Employer	Click Hele I	or Memo Remization
Business Address		
Type of Contribution: Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/30/16 Name & Address		
Lisa Sherman 600 Casier Rd Charlotte MI 48813	_s 115.00	<u>\$ 115.00</u>
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Law Enforcement Employer		
Business Address		
Type of Contribution: Direct Loan from a person 🗸 Fund Raiser	•	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/30/16 Name & Address:	•	
Daniel Anderson 4972 Bunker Rd Mason Mi 48854	_{\$} 115.00	s 115.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Law Enforcement Employer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person 🗸 Fund Raiser		>
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 06/30/16 Name & Address		
Lara O'Brien 5028 Haddon Hall Dr Holt Mi 48842	_{\$} 115.00	115.00
5. If over \$100.00 cumulative, please provide:	G!	
Occupation Dispatcher Employer	Click Here to	r Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
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Grand Total of All Schedules 1A (Complete on last page of Schedule)		
Page 15 of 26	Enter this total on line 3s of Summary Page.	



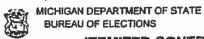
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Committee	I.D.	Num.	ber	02.0	**
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CANDIDATE COMMITTEE

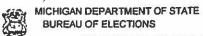
Committee To Re-Elect Tom Reich For Sheriff 2. Committee Name

	to Indicate if con	tribu	ribution is from an Individual, enter last name, first name, tion is from a Political Committee or an Independent ardless of amount.	8. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:	PAC Receipt?		YES 4. Date of Receipt 06/30/16		
Adam Morris					
4330 Courtside D)r			115.00	. 115.00
Williamston MI 48	3895			_{\$} 115.00	\$ 110.00
5. if over \$100.00 cumu		vid	9:	Click Here f	or Memo Itemization
Occupation law Enforce	cement	-8	Employer	Office Hole I	or morno demization
Business Address		• • • • •			
Type of Contribution:	Direct		Loan from a person	<u> </u>	
3. Contribution #2 Name & Address	PAC Receipt?		YES 4. Date of Receipt 06/30/16		
Thomas Johnson				445.00	44=00
6030 Fairgrove S	t		üler	_s 115.00	_s 115.00
Kalamazoo Mi 49	009				
5. If over \$100.00 cumul	lative, please pro	vld	:	Click Here fo	or Memo Itemization
Occupation MDOC		E E	nployer		
Business Address					
Type of Contribution:	Direct		Loan from a person		
3. Contribution #3 Name & Address:	PAC Receipt?		YES 4. Date of Receipt 06/30/16	_	<u></u>
Michael Batchelle	er			240.00	040.00
110 Halbert St	1 1			<u>\$ 340.00</u>	s 340.00
Grand Ledge MI	48837			Click Hosp fo	r Memo Itemization
5. If over \$190.00 cumul	lative, please pro	vid	:	Click mere to	r Memo nemization
Occupation BW&L		. 1	Employer		
Business Address					
Type of Contribution:	Direct		Loan from a person Fund Raiser		
3. Contribution #4 Name & Address	PAC Receipt?		YES 4. Date of Receipt 06/30/16	-8	
Josh Ivey					A service on the
19766 16 Mile Rd				_s 115.00	, 115.00
Marshall MI 4906					
5. If over \$100.00 cumul	100.0	vid	7:	Click Here for	r Memo Itemization
Occupation Law Enfo	rcement	-	Employer	r.	
Business Address					
Type of Contribution:	Direct	Ē	Loan from a person 🗸 Fund Raiser		
			Page Subto	\$685.00	T
			Grand Total of All Schedules 1		-
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029234 1. Committee I.D. Number Committee To Re-Elect Tom Reich For Sheriff

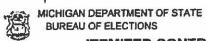
CANDIDATE COMMITT	EE	2. Committee Name	7MLDB 70 116-E1001	TOTAL TOTAL CALCULATION
Enter contributor's name and address. If contribution is fi middle initial. Check box to indicate if contribution is from Committee (PAC) Report all contributions regardless of a	ı a Political Committe	ter last name, first name, e or an independent	8. Amount	7. Curnulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES Name & Address:	4. Date of Receipt	06/30/16		
Robert Shroyer 2740 Eaton Rapids Rd Lansing MI 48911			540.00	_{\$} 540.00
5. If over \$100.00 cumulative, please provide: Occupation	Click Here for Memo Itemization			
Business Address Type of Contribution: Direct Loan from	n a person	Fund Raiser		
Contribution #2 PAC Receipt? YES Name & Address	4. Date of Receipt	06/29/16		
Kevin Heuhs 6175 Brooks Landing Dimondale MI 48821			<u>\$ 115.00</u>	_{\$} 115.00
5. If over \$100.00 cumulative, please provide:			Click Here for	Memo Itemization
Occupation Car Dealer Employer				
Business Address				
Type of Contribution: Direct Loan from	a person	Fund Raiser		
3. Contribution #3 PAC Receipt? YES Name & Address;	4. Date of Receipt	06/29/16		
Jessica Kyer 920 West St Lansing MI 48915		ţi.	\$ 160.00	s 160.00
5. If over \$100.00 cumulative, please provide:				
Occupation State Worker Employer				
Business Address				
	n a person	Fund Raiser		
3. Contribution # 4 PAC Receipt? YES Name & Address	4. Date of Receip	06/29/16		
Gary Elliott 11297 Shaytown Rd Sunfield MI 48890			<u>100.00</u>	_s _100.00
5. If over \$100.00 cumulative, please provide:			Click Here for	Memo Itemization
Occupation Retired Employe	er		Click Hore to	MONTO NETHIZABON
Business Address				
Type of Contribution: Direct Loan from	n a person	Fund Raiser		
		Page Subtotal nd Total of All Schedules 1A te on last page of Schedule)	\$915.00 Enter this total on	
Page 17 of 26			line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number 029234

Enter contributor's nat middle Initial. Check I Committee (PAC) Rep	oox to Indicate If con	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)		
3. Contribution # 1	PAC Receipt?		YES 4. Date of Receipt 06/29/16	-	
Name & Address:				<i>5</i> .	
Jack Cook 3684 W Howell	Pd			450.00	450.00
Mason MI 4885				_s 150.00	_{\$} 150.00
5. If over \$100.00 cur		wid	n:		
Occupation Retired	italiation places pro			Click Here f	or Memo Itemization
10 EST 10	= : : : : : : : : : : : : : : : : : : :	-	Employer		Ĩ.
Business Address					
Type of Contribution:	Direct		Loan from a person V Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?		YES 4. Date of Receipt 06/29/16		
Jerri Nesbitt				40.00	40.00
3901 Maurer Ro	t			_s 10.00	, 10.00
Charlotte MI 48	813				
5. If over \$100.00 cun	nulative, piease pro	vid	9:	Click Here for	or Memo Itemization
Occupation Retired		_ E	mployer		
Business Address					
Type of Contribution:	Direct		Loan from a person 🗸 Fund Raiser		
3. Contribution #3 Name & Address:	PAC Receipt?		YES 4. Date of Receipt 06/29/16	Ey.	
James Drevens	tatt Moceri			, 190.00	400.00
1331 Hosta Co	urt			\$ 190.00	, <u>190.00</u>
Holt Mi 48842				0"141	
5. If over \$100.00 cun	nulative, please pro	vid	e:	Click Here to	r Memo Itemization
Occupation Retired			Employer		
Business Address					
Type of Contribution:	Direct		Loan from a person 🗸 Fund Raiser		¥
3. Contribution #4 Name & Address	PAC Receipt?		YES 4. Date of Receipt 06/29/16	•	
James Moresett	h				
4409 Yarrow				, 155.00	. 155.00
Holt MI 48842				<u> </u>	• •
5. If over \$100.00 cun	4.5	vld	e :	Click Here fo	r Memo Itemization
Occupation_Retired		-	Employer	Ollow Field IC	Wello Hellization
Business Address					
Type of Contribution:	Direct		Loan from a person 🗸 Fund Raiser		
			Page Subtot	\$505.00	
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			Grand Total of All Schedules 1/ (Complete on last page of Schedule) [
19 54			enteres en la proposición de la proposición dela proposición de la proposición de la proposición dela proposición dela proposición dela proposición de la proposición dela proposición de la proposición dela proposición dela propo	Enter this total on line 3a of Summan	
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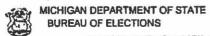
1. Committee I.D. Number ____029234

CANDIDATE COMMITTEE

2. Committee Name

Committee To Re-Elect Torn 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? YES 4. Date of Receipt 06/29/16 Name & Address:		
Gary & Robin Naeyaert		
501 Riverwalk Dr	. 190.00	. 190.00
Mason MI 48854	\$ 100.00	\$ 100.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Polical Adv/State Worker Employer	Ollow 1 1010 IV	or Morrio Romazsuon
Business Address		*
Type of Contribution: Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/29/16 Name & Address		
Nicole Lefke 4409 Yarrow Holt MI 48842	<u>s 115.00</u>	<u>, 115.00</u>
5. if over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation State Worker Employer		
Business Address		liko
Type of Contribution: Direct Loan from a person 🗸 Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/29/16 Name & Address:		
Tim Jungel 8820 Cook Rd Olivet MI 49076	<u>s 115.00</u>	_s 115.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Law Enforcement Employer		9
Business Address		
Type of Contribution: Direct Loan from a person 🗸 Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/29/16 Name & Address		
Ted Coy 1919 Oriole Charlotte MI 48813	₂ 365.00	_{\$} 365.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Physician Employer	Click Hele for	Metho Remization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of Alf Schedules 1A (Complete on last page of Schedule)	\$785.00 Enter this total on line 3a of Summary	



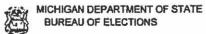
CANDIDATE COMMITTEE

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. Curnulative for Election Cycle for Each Contributor (Through data of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 06/29/16	
Mike Ruedisueli	~
1079 E Kinsel	445.00 445.00
Charlotte MI 48813	§ 115.00 § 115.00
5. If over \$100.00 cumulative, please provide:	
Occupation Law Enforcement Employer	Click Here for Memo Itemization
Business Address	*
Type of Contribution:	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/29/16 Name & Address	
Chip Ruedisueli	145.00
1712 E Grand Ledge Hwy	_s 115.00 _s 115.00
Grand Ledge MI	
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Engineer Employer	
Business Address	
Type of Contribution: ☐ Direct ☐ Loan from a person ✓ Fund Raiser	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/29/16 Name & Address:	-
Eldon Warr	145.00
2869 Jolly Rd	<u>s 115.00</u> <u>s 115.00</u>
Okemos MI 48864	
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Sales Employer	40
Business Address	
Type of Contribution: ☐ Direct ☐ Loan from a person ✓ Fund Raiser	
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 06/29/16 Name & Address	
Blanche Martin	· · · · · · · · · · · · · · · · · · ·
2869 Jolly Rd	115.00 115.00
Okemos MI 48864	
5. If over \$100.90 cumulative, please provide:	Click Here for Memo Itemization
Occupation Sales Employer	Check here for the morning the missage
Business Address	
Type of Contribution: ☐ Direct ☐ Loan from a person ✓ Fund Raiser	
Page Subtota	\$460.00
Grand Total of All Schedules 1A	
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Page 20 of 26	line 3a of Summary Page.



CANDIDATE COMMITTEE

1. Committee I.D. Number ___029234

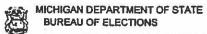
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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/29/16		
Josh Tumer		
521 Schoolcraft	. 115.00	. 115.00
Grand Ledge MI 48837	\$ 110.00	\$ 110.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Law Enforcement Employer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/29/16 Name & Address		
Jeff Lenneman	, 115.00	, 115.00
205 W Herbison Dewitt MI 48820	\$ 110.00	\$ 110.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Law Enforcement Employer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ✓ Fund Ralser		
Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/29/16 Name & Address:		
Elbert Sidel	, 115.00	115.00
4425 Reed	\$ 110.00	_s 115.00
Durand Mi 48429	Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please provide:		monio namizadon
Occupation Law Enforcement Employer		
Business Address Type of Contribution: Direct Loan from a person / Sund Raiser		,
Total Raises		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 06/29/16 Name & Address		7
Ted Johnson 6030 Fairgrove St	115.00	145.00
Kalamazoo MI 49009	<u>115.00</u>	<u>115.00</u>
5. If over \$100.00 cumulative, please provide:		
Occupation Law Enforcement Employer	Click Here for	Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$460.00	
Grand Total of All Schedules 1A		1
(Complete on last page of Schedule)	Enter this total on	,
Page 21 of 26	line 3a of Summary Page.	



1, Committee I.D. Number ____029234

CANDIDATE COMMITTEE

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:	PAC Receipt?		YES 4. Date	of Receipt	06/29/16		
Ken King							
46 Kingman Rd						240.00	. 340.00
Mason MI 48854						_s 340.00	\$ 340.00
5. If over \$100.00 cumu	lative, please pro	pyld	9:			Click Here fr	or Memo Itemization
Occupation Retired	5 10 (5 (5 (5 (5 (5 (5 (5 (5 (5 (5 (5 (5 (5	_	Employer			Olick Hele it	Nicino Italiization
Business Address			<u> </u>				
Type of Contribution:	Direct		Loan from a person	1	Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?		YES 4. Date of	of Receipt	06/29/16		-
Dan Moak						257.00	057.00
1818 Eden						<u>\$</u> 357.00	_s 357.00
Mason MI 48854							***************************************
5. If over \$100.00 cumul	7.7	vid	D:			Click Here fo	r Memo Itemization
Occupation Bail Bonds	sman	E	nployer	-			
Business Address							
Type of Contribution:	Direct		Loan from a person	V	Fund Raiser		
3. Contribution #3 Name & Address:	PAC Receipt?		YES 4. Date	of Receipt	06/29/16		
Brett Reich						205.00	
3702 Observatory	/ Lane					<u>\$395.00</u>	s 395.00
Holt MI 48842						00.1.1.	
5. If over \$100.00 cumul	ative, please pro	vid):			Click Here for	Memo Itemization
Occupation Physician		. 6	Employer	_			
Business Address							
Type of Contribution:	Direct		Loan from a person	1	Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?		YES 4. Date	of Receipt	06/29/16		91
Andrew Cole		4					~
1298 Aurelius Rd					6	,80.00	. 80.00
Holt MI 48842						•	\$
5. If over \$100.00 cumul		vld):			Click Here for	Memo Itemization
Occupation Insurance)	_	Employer				momo nomeanor
Business Address							
Type of Contribution:	Direct		Loan from a person	1	Fund Raiser		20 W 81 KANDO 20
	N.				Page Subtotal	\$1,172.00	
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					e on last page of Schedule)	Enter this total on	J
Page 22 of 26						line 3a of Summary	



1. Committee I.D. Number ____029234

CANDIDATE COMMITTEE

Enter contributor's name and address. If co middle Initial. Check box to indicate if contri Committee (PAC) Report <u>all</u> contributions re	bution is from a Political (idual, e Commit	nter last name, first name, lee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? Name & Address:	YES 4. Date of	Receip	06/29/16	_	
Sandra Pearson					
2418 Teal Lansing MI 48917				. 140.00	. 140.00
5. If over \$100.00 cumulative, please provi	do:		4	•	
Occupation Hair Stylist	Employer			Click Here f	or Memo Itemization
Business Address					
Type of Contribution: Direct	Loan from a person	1	Fund Raiser		
3. Contribution #2 PAC Receipt? Name & Address	YES 4. Date of I	Receipt	06/29/16		
Edward Sussex Lansing St Charlotte MI 48813				<u>\$</u> 20.00	ş 20.00
5. If over \$100.00 cumulative, please provide	je:			Click Here fo	r Memo Itemization
Occupation Maintenance	mployer	_			
Business Address					
Type of Contribution: Direct	Loan from a person	V	Fund Raiser		
3. Contribution #3 PAC Receipt?	YES 4. Date of	Receip	06/29/16		
Kevin Kaplan				,65.00	, 65.00
Okemos MI 48864		2	ufi s	•	\$ 00.00
5. If over \$100.00 cumulative, please provid	le:			Click Here for	Memo Itemization
Occupation Sales	Employer				
Business Address	5 EDM (1994)				
Type of Contribution: Direct	Loan from a person	1	Fund Raiser	200 - 200 -	
3. Contribution # 4 PAC Receipt? Name & Address	YES 4. Date of	Receip	06/29/16		
Kylie Katteles 4468 Oakwood Dr Okemos MI 48864			9,1	,15.00	, 15.00
5. If over \$100.00 cumulative, please provid	e:			Clieb Hear for	AATS NO 1 NO
Occupation Nurse	Employer			Click Here for	Memo Itemization
Business Address					
Type of Contribution: Direct	Loan from a person	V	Fund Raiser		
	(C		Page Subtotal 1 Total of All Schedules 1A e on last page of Schedule)	\$240.00	
Page 23 of 26	,-		Falls of Garages	Enter this total on line 3a of Summary Page.	è



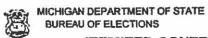
MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number ____029234

CANDIDATE COMMITTEE

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:	PAC Receipt?		YES 4. Date of	Receipt	06/29/16		
Scott Reich							
2233 Delhi NE						,325.00	, 325.00
Holt MI 48842			22.			•	
Occupation Sparrow						Click Here fo	or Memo Itemization
Occupation Sparrow	nospital Medica	_	Employer				
Business Address							J#.
Type of Contribution:	Direct		Loan from a person		Fund Ralser		
3. Contribution #2 Name & Address	PAC Receipt?		YES 4. Date of	Receipt	06/29/16		
Dan Prueter						440.00	440.00
2833 Webster						<u>s</u> 110.00	_s 110.00
Lansing MI 4890	06						
5. If over \$100.00 cum	ulative, please pro	vid	9:			Click Here fo	r Memo Itemization
Occupation Retired		E	nployer				
Business Address			* <u>-10-9</u> 1 - <u>19</u> 1				
Type of Contribution:	Direct		Loan from a person	V	Fund Raiser		
3. Contribution #3 Name & Address:	PAC Receipt?	Ī		No. of Concession,	06/29/16		
Jennifer Spicer							
912 Virginia St S	SF #2					_{\$} 20.00	, 20.00
Grand Rapids M							
5. If over \$100.00 cum		vid	9:			Click Here for	Memo Itemization
Occupation Student		. 1	Employer				
Business Address							
Type of Contribution:	Direct		Loan from a person	V	Fund Raiser		
3. Contribution #4 Name & Address	PAC Receipt?		YES 4. Date of	f Receip	ot 06/29/16		
David Miller							
11251 Plains Rd						, 90.00	90.00
Eaton Rapids M	48827					·	\$
5. If over \$100.00 cum	ulative, please pro	vld	9;			Click Horn for	Memo Itemization
Occupation_Retired		-	Employer			Click Here los	Memo (terrization
Business Address							
Type of Contribution:	Direct		Loan from a person	1	Fund Raiser		
					Page Subtotal	\$545.00	
				Gran	nd Total of Ali Schedules 1A		
			(Comple	te on last page of Schedule)	Enter this total on	J
24 , 26						line 3a of Summary	



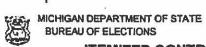
CANDIDATE COMMITTEE

1. Committee I.D. Number _____029234

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

middle initial. Check b	inter contributor's name and address. If contribution is from an individual, enter last name, first name hiddle initial. Check box to indicate if contribution is from a Political Committee or an independent committee (PAC) Report all contributions regardless of amount.				7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt?		YES 4. Date of Receipt 06/29/16		
Name & Address: Tara Palmer					
7304 Talbot Driv	/P			00.00	90.00
Lansing MI 489				\$80.00	§ 80.00
5. If over \$100.00 cum		ovic	ie:	011-1-11 6-	
Occupation Insurance	æ Agent	_	Employer	Click Here to	r Memo Itemization
Business Address					
Type of Contribution:	Direct		Loan from a person		
3. Contribution #2 Name & Address	PAC Receipt?		YES 4. Date of Receipt 06/29/16		
Tracey Flannery	,			40.00	45.00
5361 E Hidden				<u>s</u> 10.00	_s 10.00
East Lansing M	48823				
5. If over \$100.00 cum	ulative, please pr	vld	e:	Click Here for	Memo Itemization
Occupation Retired		_ E	mployer		
Business Address					
Type of Contribution:	Direct		Loan from a person		
3. Contribution #3 Name & Address:	PAC Receipt?		YES 4. Date of Receipt 07/13/16		
Jane Whitacre				50.00	50.00
1111 Bretton Ro	i			<u>50.00</u>	_s 50.00
Lansing MI 489	17			Olista I Issas for	14
5. If over \$100.00 cum	ulative, please pr	rvid	e:	Click Here for	Memo Itemization
Occupation Commiss	sioner	_	Employer		4
Business Address					
Type of Contribution:	Direct		Loan from a person		
3. Contribution # 4 Name & Address	PAC Receipt?		YES 4. Date of Receipt 07/13/16		
Lance Graf					
4419 Carter Rd	E			.100.00	100.00
Stockbridge MI 4	19285				
5. If over \$100.00 cum	(A)	vld	e:	Click Here for	Memo Itemization
Occupation Fiream	Dealer	_	Employer	Olion i fere for	Wellio Refilization
Business Address					
Type of Contribution:	Direct	F	Loan from a person / Fund Raiser		
			Page Subtotal	\$240.00	
	31		Grand Total of All Schedules 1A		
			(Complete on last page of Schedule)	5 -1	J
25 . 2/2				Enter this total on line 3a of Summary	

Page of ale



1. Committee I.D. Number ___029234

CANDIDATE COMMITTEE

485

	x to Indicate if conf	contribution is from an indivi tribution is from a Political C regardless of amount.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:	PAC Receipt?	YES 4. Date of	Receipt	07/13/16		
Dave Bankhead 1262 Otto Rd Charlotte MI 488	13				_{\$} 300.00	_{\$} 300.00
5. If over \$100.00 cum		vide:			A. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
Occupation Retired		Employer			Click Here fo	or Memo Itemization
Business Address				6		
Type of Contribution:	Direct	Loan from a person	V	Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	YES 4. Date of I	Receipt	07/13/16		-
William & Helen 1915 Glass Dr Charlotte MI 488					ş 200.00	<u>\$ 200.00</u>
5. If over \$100.00 cumu	33.5	vide:			Click Here fo	r Memo Itemization
Occupation Retired		Employer				
Business Address	1499		30.2			
Type of Contribution:	Direct	Loan from a person	V	Fund Raiser		
3. Contribution # 3 Name & Address;	PAC Receipt?	YES 4. Date of	Receip	06/30/16		
Miscellaneous Ir	nternet Recei	ipts			s 191.90	<u>s 191.90</u>
5. If over \$100.00 cumu	ilative, please pro	vide:			Click Here for	Memo Itemization
an the constant programme management						
Business Address Type of Contribution:	Direct	Loan from a person	V	Fund Raiser		- 1000 A
3. Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date of	f Receip	ot	is i	1
					\$	\$
5. If over \$100.00 cumu	ilative, please pro	vide:			Click Here for	Memo Itemization
Occupation		Employer			1000 1000 1000 1000 1000 1000 1000 100	
Business Address						
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
		_		Page Subtotal	\$691.90	
		47		nd Total of All Schedules 1A	\$22,315.90	
Page 26 of 26		(Comple	te on last page of Schedule)	Enter this total on line 3a of Summary Page.	.



ITEMIZED OTHER RECEIPTS SCHEDULE 1A-1

CANDIDATE COMMITTEE

Committee I.D. Number 029234
 Committee Name Committee To Re-Elect Tom Reich for Sheriff

4. Date of Receipt Date of Receipt 06/30/16	5. Type of Receipt Loan from a Lending In	1007 F11	6. Amount
Date of Receipt 06/30/18	_ =	estitution	
	Interest		200 00
	milerest		\$_200.00
	Refund \Rebate	Click for Mem	o Itemization Type
Fund Raiser	Other (Specify) Re-I	Deposit	
Date of Receipt	Loan from a Lending in	nstitution	
	Interest		S
	Refund \Rebate	Click for Men	io Itemization Type
Te ve	Other (Specify)		e fronts au march per diese. Luis des des fronts des docts 💌 🗷 speciel e
Pate of Receipt	Loan from a Lending In	stitution	1 1
•	Interest	1	
19	Refund \Rebale	Click for Mem	o Itemization Type
Fund Raiser	Other (Specify)		
ate of Receipt		1	× ×
		stitution	\$
4.			o Itemization Type
Fund Ralser	Other (Specify)		
ate of Receipt	- Loan from a Lending Ins	stitution	** <u>***</u> ***
	Interest		\$
	Refund \Rebale	Click for Mem	o Itemization Type
Fund Ralser	Other (Specify)		
of Receipt	Loan from a Lending In:	stitution	
***************************************	Interest		\$
	Refund \Rebate	Click for Memo	Itemization Type
Fund Ralser	Other (Specify)		
of Receipt	I non from a landing to		
		auuuvon	\$
	Interest		M 22 AV 500
-:c	Refund \Rebate	Click for Memo	Itemization Type
Fund Ralser	Other (Specify)		260
		Page Sublotal	\$200.00
			\$200.00
	(marriprisse and seat)	- La Calcadid)	Enter this total on line 4 of Summary Page
	Fund Raiser ale of Receipt Fund Raiser ale of Receipt Fund Raiser of Receipt Fund Raiser of Receipt Fund Raiser of Receipt	Fund Raiser Other (Specify) Re-I Loan from a Lending fr Interest Refund (Rebate Other (Specify) Interest Refund (Specify) Interest	Fund Raiser Other (Specify) Re-Deposit Date of Receipt Loan from a Lending Institution Interest Refund Rebate Click for Memorate of Receipt Loan from a Lending Institution Interest Refund Rebate Click for Memorate of Receipt Loan from a Lending Institution Interest Refund Rebate Click for Memorate of Receipt Loan from a Lending Institution Interest Refund Rebate Click for Memorate of Receipt Loan from a Lending Institution Interest Refund Rebate Click for Memorate of Receipt Loan from a Lending Institution Interest Refund Rebate Click for Memorate of Receipt Loan from a Lending Institution Interest Refund Rebate Click for Memorate of Receipt Loan from a Lending Institution Interest Refund Rebate Click for Memorate of Receipt Loan from a Lending Institution Interest Refund Rebate Click for Memorate of Receipt Loan from a Lending Institution Interest Refund Rebate Click for Memorate of Receipt Loan from a Lending Institution Interest Click for Memorate of Receipt Loan from a Lending Institution Interest Click for Memorate of Receipt Loan from a Lending Institution Interest Click for Memorate of Receipt Loan from a Lending Institution Interest Click for Memorate of Receipt Loan from a Lending Institution Interest Click for Memorate of Receipt Click for Memorate of Rece



SCHEDULE 1-IK

1. Committee I. D. Number 029234

Committee Name	Committee	To	Re	-Elect	Tom	Reich	for	Sher	i

CANDIDATE COMM			
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.	Type of In-Kind Contribution (Check applicable box) Date of Receipt 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? Yes Name & Address: Larry Treadwell 1269 Porter Charlotte, MI 48813 If over \$100.00 cumulative, please provide: Occupation: law enforcement Employer Name & Business Address: ECSO 1025 Independence Charlotte, MI	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description golf bag 5. Date Of Receipt: 06/24/16 6. Vendor Name & Address:	150 :k Here for Memo t	s 150
Fund Raiser Contribution Contribution # 2 PAC Receipt? Yes Name & Address Jeff Warder 6924 Mulderstraat Grand Ledge, Mi If over \$100.00 cumulative, please provide: Occupation: Jaw enforcement Employer Name & Address: ECSO 1025 Independence Charlotte, Mi	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others Description glock holster 5. Date Of Receipt: 06/24/16 6. Vandor Name & Address: Click	0 s	40
Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Name & Address: Jim Dravenstratt-Moceri 1331 Hosta Court Holt, MI 48842 If over \$100.00 cumulative, please provide:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others Lapel Badge 5. Date Of Receipt: 06/24/16 6. Vendor Name & Address: Click	\$ k Here for Merno II	75 temization
Fund Raiser Contribution	Page Subtotal Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	\$265.00	265.00

Page

Page 1 of 12



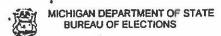
SCHEDULE 1-IK

1. Committee I. D. Number 029234

CANDIDATE COM	AITTEE 2. Committee Name Committee To Re-E	Elect Tom Rei	ch 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? Yes Name & Address: Mid Michigan Emergency Equipment Lansing, MI If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description flashlights 5. Date Of Receipt: 06/24/16 6. Vendor Name & Address:	60 ck Here for Memo I	§ 60
Fund Raiser Contribution			
Contribution # 2 PAC Receipt? Yes Name & Address Micias 4230 W. Saginaw Lansing, MI If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description gift Certificate 5. Date Of Receipt: 06/24/16	<u>!5 </u>	25
✓ Fund Raiser Contribution	6. Vendor Name & Address:	ck Here for Memo II	lemization
Contribution #3 PAC Receipt? Yes Name & Address: Fast Eddie's Oil Change 6219 W. Saginaw Lansing, MI 48917 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4.	\$ ck Here for Memo to	45 ternization
Fund Raiser Contribution			
	Page Subtotal	\$130.00	130.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		6)

Enter this total on line 6 of Summary Page

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SCHEDULE 1-IK

1. Committee I. D. Number 029234

CANDIDATE COMMITTEE 2. Committee Name Committee To Re-Elect Tom Reich for Sheriff					
CANDIDATE COMM 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-Idind 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? Yes Name & Address: *Ziebart 604 N. Creyts Rd Lansing, MI 48917 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description interior detail 5. Date Of Receipt: 06/24/16 6. Vendor Name & Address:	50 ck Here for Memo II	s 50		
Fund Ralser Contribution Contribution # 2 PAC Receipt? Yes Name & Address Lansing Uniform 1141 S. Washington Lansing, MI 48910 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others Description Shirt 5. Date Of Receipt: 06/24/16 6. Vendor Name & Address: Click	ck Here for Memo It	± 20		
Contribution #3 PAC Receipt? Yes Name & Address: Family Tradition Treestands 202 Morrell St Charlotte, MI If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description tree stand Date Of Receipt: 06/24/16 Vendor Name & Address:	SO \$	150		
Fund Raiser Contribution	Page Subtotal	\$220.00	\$220.00		
	Grand Total of all Schedules 1-iK (Complete on last page of Schedule)				

Enter this total on line 6 of Summary Page

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SCHEDULE 1-IK

1. Committee I. D. Number

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U	Z	y	2	J	4	

CANDIDATE COM	WITTEE 2. Committee Name Committee To Re-Elect Tom Reich for Sherif
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 for Election Cycle (Throug date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: Bobcat of Lansing 3237 W. Main St. Lansing, MI 48911 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated s 150 Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description Weedtrimmer 5. Date Of Receipt: 06/24/16 6. Vendor Name & Address: Click Here for Memo Itemization
Fund Raiser Contribution Contribution # 2 PAC Receipt? Yes Name & Address Durobyte 627 E. Lansing Rd Potterville, MI 48876 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description Car Wash kit and 2 oil changes 5. Date Of Receipt: 06/24/16 6. Vendor Name & Address:
✓ Fund Raiser Contribution	Click Here for Memo Itemization
Contribution #3 PAC Receipt? Yes Name & Address: D&G Equipment 110 S. Lincoln Charlotte, MI 48813 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4.
✓ Fund Raiser Contribution	Click Here for Memo Itemization
	Page Subtotal \$350.00 \$350.00 Grand Total of all Schedules 1-IK (Complete on last page of Schedule) Enter this total on line 6 of Summary Page

Page 4 of 12



SCHEDULE 1-IK

1. Committee I. D. Number 029234

CANDIDATE COM	AITTEE 2. Committee Name Committee To	Re-E	lect Tom Rei	ich 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 purchased	were	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: Tom Reich 1855 Winchester Way Eaton Rapids, MI 48827 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4. ☐ Endorsement or Guarantee of Bank Loan ✓ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-Li Description gift basket 5. Date Of Receipt: 06/24/16 6. Vendor Name & Address:	OAN	10	s 10
Fund Raiser Contribution Contribution # 2 PAC Receipt? Yes Name & Address Mike Wriggelsworth	Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others	s 1	00	s 100
3512 N. Clinton Trl Charlotte, MI 48813 If over \$100.00 cumulative, please provide: Occupation: SaleS Employer Name & Address:	Goods or Services Purchased by Candidate or Others- L Description bag, 3 shirts, gloves 5. Date Of Receipt: 06/24/16 6. Vendor Name & Address:			
✓ Fund Raiser Contribution		Clic	k Here for Memo I	ternization
Contribution #3 PAC Receipt? Yes Name & Address: Clinton Wells 700 Clinton St Grand Ledge, MI 48837 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-Leaner Wooden jewelry box 5. Date Of Receipt: 06/24/16 6. Vendor Name & Address:		k Here for Memo I	20
Fund Raiser Contribution			122 as at 240 cs	
6	Page Si Grand Total of all Schedul (Complete on last page of Sch	es 1-lK	\$130.00	\$130.00

Enter this total on line 6 of Summary Page

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SCHEDULE 1-IK

1. Committee I. D. Number 029234

CANDIDATE COMM	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? Yes Name & Address: Jack Cook 3684 W. Howell Rd Mason If over \$100.00 cumulative, please provide: Occupation: retired Employer Name & Business Address:	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description MSU football, baskatball, aliver coins, tool box, Kincaid painting, I 5. Date Of Receipt: 06/24/16 6. Vendor Name & Address:	700 g	700		
Contribution # 2 PAC Receipt? Yes Name & Address Dan Jaroshewich Detroit Lions 222 Republic Dr Allon Park; MI 48101 If over \$100.00 cumulative, please provide: Occupation: Employer, Name & Address:	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description Autograph footbal 5. Date Of Receipt: 06/24/16 6. Vendor Name & Address:	00 s	100		
Contribution #3 PAC Receipt? Yes Name & Address: Tommie Cook 3694 W. Howell Rd Mason, MI 48854 If over \$100.00 cumulative, please provide; Occupation: Employer Name & Address:	4.	\$ s	35 emization		
Fund Raiser Contribution	Page Subtotal	\$835.00	\$835.00		
	Grand Total of all Schedules 1-lk (Complete on last page of Schedule)		ψουσ.συ		

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SCHEDULE 1-IK

1. Committee I. D. Number 029234

Committee To Re-Elect Tom Reich for Sheriff			
CANDIDATE COMM	IITTEE 2. Committee Name Committee 70 1051	_icor Tomittolo	THOI CHOIM
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? Yes Name & Address: Applebeels 54,00.W. Saginaw I-Iw Lansing, IMI 48917 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description 2 gift card 5. Date Of Receipt: 06/24/16 6. Vendor Name & Address:	40 \$	40
Fund Raiser Contribution Contribution # 2 Name & Address Carrabba's 6540 W. SaginaW Lansing, MI 48917 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description 2 gift cards 5. Date Of Receipt: 06/24/16 6. Vendor Name & Address:	50 s	50
✓ Fund Raiser Contribution		lick Here for Memo It	emization
Contribution #3 PAC Receipt? Yes Name & Address: NGG Cinemas 2500 Showtime Dr Lansing, MI 48912 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description Movie passes Date Of Receipt: 06/24/16 Vendor Name & Address:	O \$	20 ternization
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	Grand Total of all Schedules 1-	110.00	110.00

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)	4	32	34	4		

SCHEDULE 1-IK

1. Committee 1. D. Number

O29234

CANDIDATE COMMITTEE

2. Committee Name

Committee To Re-Elect Tom Reich for Sheriff

CANDIDATE COMM	HITEE COMMISSION		
Name and Address from whom received if contribution is from an individual, enter tast 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.	Type of In-Kind Contribution (Check applicable box) Date of Receipt 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? 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:	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description golf, with cart and horse drawn carriage 5. Date Of Receipt: 06/24/16 6. Vendor Name & Address:	300 s	300
Fund Raiser Contribution Contribution # 2 PAC Receipt? Yes Name & Address Cheddar's 5719 W. Saginaw Lansing, MI 48917 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. ☐ Endorsement or Guarantee of Bank Loan ✓ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others LOAN Description gift card 5. Date Of Receipt: 06/24/16 6. Vendor Name & Address:	0 s	10
✓ Fund Raiser Contribution	Clie	, ck Here for Memo Ite	mization
Contribution #3 PAC Receipt? Yes Name & Address: Honey Baked Ham 5601 W. Saginaw Lansing, MI 48917 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4.	\$\$. there for Memo Ite	15 mization
✓ Fund Raiser Contribution	Dog Ottou	1005 00 T	0005.00
	Page Subtotal Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	Enter this total on line 6 of Summ	\$325.00

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SCHEDULE 1-IK 1. Committee I. D. Number 029234

CANDIDATE COMM	AITTEE 2. Committee Name Committee To Re-E	lect Tom Reic	h 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? Yes Name & Address: Outback 707 Brookside Lansing, MI 48917 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description gift cards 5. Date Of Receipt: 06/24/16 6. Vendor Name & Address:	30 s	30 emization
Fund Raiser Contribution Contribution # 2 PAC Receipt? Yes Name & Address Tavem & Tap 101 S. Washington Squ Lansing, MI 48933 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. ☐ Endorsement or Guarantee of Bank Loan ✓ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN Description gift Card 5. Date Of Receipt: 06/24/16 6. Vendor Name & Address:	0 s	30
Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Name & Address: LosTres Amigo 5010 W. Saginaw Lansing, MI 48917 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description gift card 5. Date Of Receipt: 06/24/16 6. Vendor Name & Address: Click	\$_ cx Here for Memo Ite	25 emization
✓ Fund Raiser Contribution	Page Subtotal Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		\$85.00
		Enter this total	

on line 6 of Summary Page

Page 9 of 12



029234

SCHEDULE 1-I			
CANDIDATE COMM	ATTEE 2. Committee Name Committee To Re-	Elect Tom Rei	ch 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.	Type of in-Kind Contribution (Check applicable box) Date of Receipt 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? Yes Name & Address: Finley's Grill 7433 W. Saginaw Lansing, MI 48917 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description gift Card 5. Date Of Receipt: 06/24/16 6. Vendor Name & Address:	20 lick Here for Memo I	\$ 20
Fund Raiser Contribution Contribution # 2 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan		
Name & Address City Limits 2120 E. Saginaw East Lansing, MI 48823 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Goods Donated or Loaned Services Donated	60	60
✓ Fund Raiser Contribution	. CI	ick Here for Memo II	temization
Contribution #3 PAC Receipt? Yes Name & Address: Douglas J Salon 331 E. Grand River East Lansing, MI 48823 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4.	Os	50
✓ Fund Raiser Contribution			
	Page Subtota	130.00	130,00
	Grand Total of all Schedules 1-II		

Enter this total on fine 6 of Summary Page



SCHEDULE 1-IK

1. Committee I. D. Number 029234

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

CANDIDATE COMM	HITEE 2. Commutee Name		
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? Yes Name & Address: Eidorado Golf Course 3750.W. Howell Mason, MI 48854 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description golf for 4 and cart 5. Date Of Receipt: 06/24/16 8. Vendor Name & Address:	120 s	120
Fund Raiser Contribution Contribution # 2 PAC Receipt? Yes Name & Address Horne Depot 936 S. Waverly Lansing, MI 48917 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. ☐ Endorsement or Guarantee of Bank Loan Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others-LOAN Description hand tools - bbq utensils 5. Date Of Receipt: 06/24/16	5 s	25
✓ Fund Raiser Contribution	6. Vendor Name & Address: Clic	☆ Here for Memo Ite	mization
Contribution #3 Name & Address: Mongolian Grill 2080 W. Grand River Okernos, MI 48864 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4.	% Here for Memo Ite	100
Fund Raiser Contribution	Page Subtotal Grand Total of all Schedules 1-iK (Complete on last page of Schedule)	\$245.00	\$245.00
		on line 6 of Sumn	narv

Page



029234

SCHEDULE 1-II		
CANDIDATE COMM	III IEE 2 Consumer Name	e-Elect Tom Reich for Sheriff
 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), Reportal 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? Yes Name & Address: Glenda Cook 3594 W. Howell Rd Mason, M1 48854	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN	s 180. s 180
If over \$100.00 cumulative, please provide: Occupation: Secretary part time Employer Name & Business Address:	Description Eotech HWS, flashlight, knife, hats 5. Date Of Receipt: 06/24/16 6. Vendor Name & Address:	Click Here for Memo Itemization
Fund Raiser Contribution		
Contribution # 2 PAC Receipt? Yes Name & Address	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOA	
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description 5. Date Of Receipt: 6. Vendor Name & Address:	Click Here for Memo Itemization
Fund Raiser Contribution		
Contribution #3 PAC Recelpt? Yes Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated 5. Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others LOAN	\$\$
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description 5. Date Of Receipt: 6. Vendor Name & Address:	Click Here for Memo Hemization
Fund Raiser Contribution		
	Page Subto Grand Total of all Schedules 1 (Complete on last page of Schedu	1K 300500

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SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 029234

3. Name and address of person or vendor to whom paid 4. Purpose (Required Information) 5. Date 5. Date 6. Amount 5. Date 6. Amount 5. Date 6. Amount 6. Date 6. Amount 6. Date 7. Da	CANDIDATE COMMITTEE 2. C.	Committee To Re-Elect	Tom Reicl	n For Sheriff
Name Ingham County Sobriety Court Foundation Address John Nicolucc/Foster, Swift, Collins & Smith PC 313 S Weshington Square Lansing, MI 48933-2193 Fund Raiser Check box if this expenditure is payment of debt or obligation reported on previous statement	Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6, Amount
Address Donation Date Statement	Expenditure #1			
John MicolaucidFreeter, Swift, Collins & Smith PC 313 S Washington Square Lansing, Mil 48933-2193 Fund Raiser Expenditure 82 Name John D Vanator CPA PC Address PO Box 509 Eaton Rapids, Mil 48827-0509 Fund Raiser Expenditure 83 Name Wal-Mart Address Purpose: Candidate Committee Forms Click Here for Memo Itemization Type Total statement Click Here for Memo Itemization Type Total statement Click Here for Memo Itemization Type Total statement Total statement statement Total statement Total statement Total statement statement statement Total statement statement Total statement statement Total statement statement Total statement statement statement Total statement statement statement statement Total statement statement statement Total statement statem	Name Ingham County Sobriety Court Foundation		100 W	\$ 100.00
313 S Washington Square Lansing, MI 48933-2193 Fund Raiser	Address	Purpose: Donation	Date	93
Lansing, MI 48933-2193 Fund Reliser Fund Relis		Click H	ere for Memo it	ternization Type
Expenditure #2 Statement				
Name John D Vanator CPA PC Address Purposa: Candidate Committee Forms Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #3 Name Wal-Mart Address Purpose: Candy - Trunk or Treat Click Here for Memo Itemization Type Donation Purpose: Donation Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name MLK Jr Holliday Commission Address Purpose: Donation Purpose: Donation Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name MLK Jr Holliday Commission Address Po Box 24112 Lansing, MI 48909-4112 Fund Raiser Subtotal this page \$485.72	Fund Raiser			,
Address Purpose: Candidate Committee Forms Date \$145.73 Date Purpose: Candidate Committee Forms Date Click Here for Memo Itemization Type Candress Purpose: Candy - Trunk or Treat Date Septembliure #3 Name Wal-Mart Purpose: Candy - Trunk or Treat Click Here for Memo Itemization Type Charlotte, MI 48813 Fund Raiser Candy - Trunk or Treat Click Here for Memo Itemization Type Charlotte, MI 48813 Fund Raiser Candy - Trunk or Treat Date Septembliure #4 Name Highfields Address Purpose: Donation Donation Date Septembliure is payment of debt or obligation reported on previous statement Expenditure #4 Name Highfields Address Purpose: Donation Donation Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name MLK Jr Holiday Commission Address Purpose: Donation Donation Date Septembliure Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name MLK Jr Holiday Commission Address Purpose: Donation Donation Donation Date Septembliure Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name MLK Jr Holiday Commission Donation Donation Donation Donation Septembliure Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Septemblium Donation Donation Donation Type Check box if this expenditure is payment of debt or obligation reported on previous statement Septemblium Donation Donati	Expenditure #2			
PO Box 509 Eaton Rapids, MI 48827-0509 Fund Ralser Expenditure #3 Name Wal-Mart Address 1680 Packard Hwy Charlotte, MI 48813 Fund Ralser Expenditure #4 Name Highfields Address 5123 Old Plank Road Onondaga, MI 49264 Fund Ralser Expenditure #5 Name MLK Jr Holiday Commission Address Purpose: Donation Cikk Here for Memo Itemization Type Cikk Here for Memo Itemization Type Total Total \$ 56.97 Address Purpose: Candy - Trunk or Treat Cikk Here for Memo Itemization Type Cikk Here for Memo Itemization Type Total	Name John D Vanator CPA PC		10/21/15	\$ 148.75
PO Box 509 Eaton Rapids, MI 48827-0509 Fund Ralser Expenditure #3 Name Wal-Mart Address 1680 Packard Hwy Charlotte, MI 48813 Fund Ralser Expenditure #4 Name Highfields Address 5123 Old Plank Road Onondaga, MI 49264 Fund Ralser Expenditure #5 Name MLK Jr Holiday Commission Address Purpose: Donation Cikk Here for Memo Itemization Type Cikk Here for Memo Itemization Type Total Total \$ 56.97 Address Purpose: Candy - Trunk or Treat Cikk Here for Memo Itemization Type Cikk Here for Memo Itemization Type Total	******	Pumosa: Candidate Committee Forms	Date	
Eaton Rapids, MI 48827-0509 Fund Raiser Check box if this expenditure is payment of debt or obligation reported on previous statement		77701 70 (400	aan faa kiloma li	tomization Time
Check box if this expenditure is payment of debt or obligation reported on previous statement		Click Fi	ele lot Meltio II	enazauon rype
Fund Raiser Statement St	_			
Name Wal-Mart Address 1680 Packard Hwy Charlotte, MI 48813 Fund Relser Expenditure #4 Name Highfields Address Purpose: Donation Purpose: Donation Find Relser Expenditure #5 Name MLK Jr Holiday Commission Address PO Box 24112 Lansing, MI 48909-4112 Fund Relser Fund Relser Each Check box if this expenditure is payment of debt or obligation reported on previous statement 10/28/15 s 56.97 Date \$ 56.97 Date \$ 100.00 Check box if this expenditure is payment of debt or obligation reported on previous statement Check box if this expenditure is payment of debt or obligation reported on previous statement Check box if this expenditure is payment of debt or obligation reported on previous statement Check box if this expenditure is payment of debt or obligation reported on previous statement Check box if this expenditure is payment of debt or obligation reported on previous statement Check box if this expenditure is payment of debt or obligation reported on previous Check box if this expenditure is payment of debt or obligation reported on previous Check box if this expenditure is payment of debt or obligation reported on previous Check box if this expenditure is payment of debt or obligation reported on previous Check box if this expenditure is payment of debt or obligation reported on previous Check box if this expenditure is payment of debt or obligation reported on previous Check box if this expenditure is payment of debt or obligation reported on previous Check box if this expenditure is payment of debt or obligation reported on previous Check box if this expenditure is payment of debt or obligation reported on previous				
Address 1680 Packard Hwy Charlotte, MI 48813 Fund Raiser Expenditure #4 Name Highfields Address 5123 Old Plank Road Onondaga, MI 49264 Fund Raiser Expenditure #5 Name MLK Jr Holiday Commission Address Purpose: Donation Donation 10/29/15 Date \$ 100.00 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name MLK Jr Holiday Commission Address Po Box 24112 Lansing, MI 48909-4112 Fund Raiser Subtolal this page \$485.72	- g			
1680 Packard Hwy Charlotte, MI 48813 □ Fund Reiser Expenditure #4 Name Highfields Address 5123 Old Plank Road Onondaga, MI 49264 □ Fund Reiser Expenditure #5 Name MLK Jr Holiday Commission Address PO Box 24112 Lansing, MI 48909-4112 □ Fund Reiser Expenditure #5 Fund Reiser Citick Here for Memo Itemization Type Donation 10/29/15 Date \$ 100.00 Citick Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name MLK Jr Holiday Commission Address Purpose: Donation Purpose: Donation 12/07/15 Date \$ 80.00 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Subtolal this page \$485.72	Name Wal-Mart		10/28/15	\$ 56.97
Charlotte, MI 48813 ☐ Fund Reiser Expenditure #4 Name Highfields Address 5123 Old Plank Road Onondaga, MI 49264 ☐ Fund Reiser Expenditure #5 Name MLK Jr Holiday Commission Address Purpose: Donation Click Here for Memo Itemization Type Gebt or obligation reported on previous statement Expenditure #5 Name MLK Jr Holiday Commission Address Po Box 24112 Lansing, MI 48909-4112 ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type Subtolal this page \$ 80.00 Click Here for Memo Itemization Type Subtolal this page \$ 485.72	Address	Purpose: Candy - Trunk or Treat	Date	
Fund Reiser Subtolal this page Subtolal this	1680 Packard Hwy	Click H	ere for Memo II	temization Type
Expenditure #4 Name Highfields Address Purpose: Donation Purpose: Donation Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name MLK Jr Holiday Commission Address PO Box 24112 Lansing, MI 48909-4112 Fund Raiser Subtolal this page \$485.72	Charlotte, MI 48813	Check box if this expenditure is payment of		
Expenditure #4 Name Highfields Address Purpose: Donation Purpose: Donation Purpose: Donation Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name MLK Jr Holiday Commission Address PO Box 24112 Lansing, MI 48909-4112 Fund Raiser Subtolal this page \$485.72	Fund Reiser			
Address Purpose: Donation Purpose: Donation Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name MLK Jr Holiday Commission Address PO Box 24112 Lansing, MI 48909-4112 Fund Raiser Subtolal this page \$485.72	Expenditure #4			
Address Purpose: Donation Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name MLK Jr Holiday Commission Address PO Box 24112 Lansing, MI 48909-4112 Fund Raiser Fund Raiser Donation Date \$80.00 Click Here for Memo Itemization Type Click Here for Memo Itemization Type Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Subtolal this page \$485.72	Name Highfields		10/29/15	- 400 00
Since the statement of		Donation	Dale	\$ 100.00
Onondaga, MI 49264 Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name MLK Jr Holiday Commission Address Purpose: Donation Purpose: Donation Click Here for Memo Itemization Type Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Subtolal this page \$485.72	27 AV 1921 (Sa)	Purpose:		
Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name MLK Jr Holiday Commission Address Purpose: Donation Purpose: Donation Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Subtotal this page \$485.72		Click H	ere for Memo I	temization Type
Expenditure #5 Name MLK Jr Holiday Commission Address PURPOSE: Donation Purpose: Donation Purpose: Donation Purpose: Donation Purpose: Donation Purpose: Donation Purpose: Section 12/07/15 5 80.00 Click Here for Memo Itemization Type Check box If this expenditure is payment of debt or obligation reported on previous statement Subtotal this page \$485.72	Onondaga, wii 43204			
Name MLK Jr Holiday Commission Address Purpose: Donation Purpose: Donation Purpose: Donation Click Here for Memo Itemization Type Check box If this expenditure is payment of debt or obligation reported on previous statement Subtotal this page \$485.72	Fund Raiser		1900	
Address Purpose: Donation Date S 80.00 Purpose: Donation Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Subtotal this page \$485.72	Expenditure #5			
Purpose: DONAUON Click Here for Memo Itemization Type Lansing, MI 48909-4112 Check box If this expenditure is payment of debt or obligation reported on previous statement Subtotal this page \$485.72	Name MLK Jr Holiday Commission		12/07/15	- 00 00
PO Box 24112 Lansing, MI 48909-4112 Click Here for Memo Itemization Type Check box If this expenditure is payment of debt or obligation reported on previous statement Subtotal this page \$485.72	Address .	Purpose: Donation	Date	2 RO'00
Lansing, MI 48909-4112 [Check box If this expenditure is payment of debt or obligation reported on previous statement Subtotal this page \$485.72	PO Box 24112	i consumer en	lere for Memo	temization Type
Fund Raiser statement Subtotal this page \$485.72	Lansing, MI 48909-4112	Check box if this expenditure is payment of		
\$400.72	Fund Raiser			
	- ×	Subto	tal this page	\$485.72
Grand Total of all Schedules 18 (Complete on last page of Schedule)				

Enter this total on line 8a of Summary Page

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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

	4. Purpose (Required Information)	5. Date	6. Amount
3. Name and address of person or vendor to whom paid	- Pupose (Required information)	J. Dulo	
Expenditure #1		40/45/45	
Name Rotary Club of Charlotte		12/15/15	\$ 44.00
Address	Purpose: Dues	Date	
PO Box 484	Western A. 12	tere for Memo II	emization Type
Charlotte, MI 48813-0484		INTO INT INTOING II	
Chanced in 100 to 5 for	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2			
Name Rotary Club of Charlotte		01/05/16	\$ 234.00
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Dues	Date	201.00
Address	Purpose: Dues		
PO Box 484	Click I	tere for Memo II	temization Type
Charlotte, MI 48813-0484			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name St Michael's K of C Council #7311	1	01/11/16	- 150 00
	Purpose: Ad-Donation	Date	s <u>150.00</u>
Address	Purpose: Au-Dorlation		
345 Edwards St	Click i	lere for Memo I	temization Type
Grand Ledge, Mi 48837	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
—), Townships (a.	statement		
Expenditure #4	- III		4
Name Michigan Sheriff's Association		02/01/16	\$ 78.44
Address	Purpose: Shirts	Date	
	Pulpose.		
620 S Capitol Ave Ste 320a	Click	lere for Memo I	temization Type
Lansing, MI 48933	Check box if this expenditure is payment of		
Mountain the second sec	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name Crime Stoppers of Michigan	,	02/01/16	- 000 00
Address	Purpose: Donation	Date	\$ 200.00
740 May St Lansing, ML48006	100000000		Itemization Type
Lansing, MI 48906	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement	g 2 <u>1</u> 3	
	Subtr	otal this page	\$706.44
	Grand Total of all	Schedules 18	
	(Complete on last pag		200
			Enter this total

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ITEMIZED EXPENDITURES SCHEDULE 1B **CANDIDATE COMMITTEE**

1. Committee J. 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
Expanditure #1 Name Charlotte Lithograph		02/16/16	\$ 93.81
Address	Purpose: Golf Flyers/Envelopes	Date	
144 South Cochran	Click H	ere for Memo I	temization Type
Charlotte, MI 48813	Check box if this expenditure is payment of debt or obligation reported on previous		
Expenditure #2	statement		
Name US Post Office	•	02/16/16	\$ 98.00
Address	Purpose: Stamps	Date	
117 W Lovett St	Click H	ere for Memo I	temization Type
Charlotte, MI 48813	Check box if this expenditure is payment of		
✓ Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3	TOTO CART		
Name Eaton County Information Systems		02/17/16	\$ 25.00
Address	Purpose: Laptop	Date	,
1045 Independence Blvd	Click H	ere for Memo I	emization Type
Charlotte, MI 48813	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement provided on previous		
Expenditure #4			
Name The Hundred Club		02/18/16	\$ 100.00
Address	Purpose: Donation	Date	¥ 100.00
3315 S. Pennsylvania Ave.		iem for Mamo i	temization Type
Lansing, MI 48910	/	I OHIBIN IOI BIB	mustamus sha
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name Charlotte Lithograph		02/24/16	\$ 36.80
Address	Purpose: Golf Flyers	Date	+ 20.00
144 South Cochran	Click 1	lere for Memo !	temization Type
Charlotte, MI 48813	Check box if this expenditure is payment of debt or obligation reported on previous statement		
		tal this page	\$353.61
	Grand Total of all 5 (Complete on last page		
	(and the second	Enter this total

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ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

	02923	
Committee L D Number	ar ozozo	

1. Committee I. D. Nur	nber UZUZUT
2. Committee Name	Committee To Re-Elect Tom Reich For Sheriff

3. Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	8. Amount
Expenditure #1			
Name Susan G Komen		03/08/16	\$ 100.00
5- FQ	Purpose: Donation	Date	\$ 100.00
Address	Purpose:		
2922 Fuller NE Ste 107B	Click Here for Memo Itemization Type		
Grand Rapids, MI 49505	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2	Section 1991		
Name Eaton County Five-O 5K Run/Walk	*	03/17/16	400.00
zaton obanty i wo o or real work	Donation	Date	\$ <u>100.00</u>
Address	Purpose: Donation		
1401 Elmwood Rd.	Click I	Here for Memo	Itemization Type
Lansing MI 48917			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name Best Buy		03/22/16	s 158.99
Address	Purpose: Microsoft Office	Date	3 130.33
	Purpose:		
5216 W Saginaw Hwy Lansing, Ml 48917	Click Here for Memo Itemization Type		
Lansing, IVII 40317	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4		141	
Name Best Buy	-	03/23/16	
500.00)		Date	\$ 275.59
Address	Purpose: Campaign Laptop	Udus	
5216 W Saginaw Hwy			
Lansing, MI 48917	10.000.000	Here for Merrio I	temization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name US Post Office		04/06/16	
EST THE REI	Purpose: Stamps	Date	\$ 49.00
Address	Purpose:	-atc	
117 W Lovett St	Click Here for Memo Itemization Type		
Charlotte, MI 48813	Check box if this expenditure is payment of debt or obligation reported on previous		
✓ Fund Raiser	statement		
	Subtr	otal this page	\$683.58
	Conné Tatal - (- H	Cohadulas 42	+000.00
Grand Total of all Schedules 18 (Complete on last page of Schedule)			
Enter this total			

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Page 4 10