

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

May 16, 2016

Brian D. Booker 4465 Stone Creek Court Saginaw, Michigan 48603

Dear Mr. Booker:

The Department of State (Department) received a formal complaint filed by Joseph Tomczyk against you, alleging that you violated the Michigan Campaign Finance Act (MCFA), 1976 PA 388, MCL 169.201 et seq. A copy of the complaint and supporting documentation is provided as an enclosure with this letter.

The MCFA requires committees to file periodic campaign finance statements and reports. MCL 169.233. The failure to file a single campaign statement may trigger late filing fees. MCL 169.233(7).

The Act additionally requires filed campaign finance statements and reports to be complete and accurate. MCL 169.233. A candidate who knowingly files an incomplete or inaccurate statement or report may be subject to a civil fine of up to \$1,000.00. MCL 169.233(10). A candidate who knowingly omits or underreports a contribution or expenditure may be subject to a civil fine of up to \$1,000.00, or the amount of the undisclosed contribution or expenditure, whichever is greater. MCL 169.233(11).

Mr. Tomczyk alleges that you have filed to file a report and filed an incomplete or inaccurate report.

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

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

A copy of your reply will be provided to Mr. Tomczyk, who will have an opportunity to submit a rebuttal statement to the Department. After reviewing all of the statements and materials provided by the parties, the Department will determine whether "there may be reason to believe

Brian D. Booker May 16, 2016 Page 2

that a violation of [the MCFA] has occurred [.]" MCL 169.215(10). Note that the Department's enforcement powers include the possibility of entering a conciliation agreement or conducting an administrative hearing.

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

Sincerely,

Lori A. Bourbonais Bureau of Elections

Michigan Department of State

Seri A Bombonas

c: Joseph J. Tomczyk

Reset Form

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

Please print or type all information.

Section I. Complainant		A STATE OF THE PARTY OF THE PAR
Joseph J. Tomczyk		Daytime Telephone Number 517-230-6866
Mailing Address PO Box 113		
St. Johns	State	^{Zip} 48879
Section 2. Alleged Violator		
Brian D. Booker		
Mailing Address 4465 Stone Creek Court		
Saginaw	State	^{Zip} 48603
Section 3. Alleged Violations (Use additional sheet	tif more space i	s needed.)
Section(s) of the MCFA violated: Section 26(1)(e) [MC		
Explain how those sections were violated: Itemized Contributions Schedule 1A: Fifty-f	ive (55) indiv	vidual contributions are listed.
None list the Contributor's street address.		
Evidence that supports those allegations (attach copies of pertinent doc See Attached Exhibit, Exhibit Pages 3-16	uments and other info	ormation)

Reset Form

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

Please print or type all information.

Section 1. Complainant		
Joseph J. Tomczyk		Daytime Telephone Number 517-230-6866
Mailing Address PO Box 113		
St. Johns	State MI	^{Zip} 48879
Section 2. Alleged Violator		
Brian D. Booker		
Mailing Address 4465 Stone Creek Court		
Saginaw Saginaw	State MI	48603
Section 3. Alleged Violations (Use addit	ional sheetiff more space	is needed.)
Section(s) of the MCCEA adults. It	(e) [MCL 169.226)	
Explain how those sections were violated:		
Itemized Contributions Schedule 1A	A: Cumulative cont	ributions for Trisha Ogg
are not listed.		
	'	
Evidence that supports those allegations (attach copies of p See Attached Exhibit, Exhibit Page		formation)
		36_10;
	- 0 E a.c.	
	-	

Reset Form

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

Please print or type all information.

Section I. Complainant		
Joseph J. Tomczyk		Daytime Telephone Number 517-230-6866
Mailing Address PO Box 113		
St. Johns	State	^{Zip} 48879
Section 2. Alleged Violator		
Brian D. Booker		
Mailing Address 4465 Stone Creek Cou	ırt	
City Saginaw	State MI	^{Zip} 48603
Section 3. Alleged Violations (Use add	litional sheet if more space	is needed.)
Sanda de estable RECEA adalando	1)(e) [MCL 169.226	
Explain how those sections were violated: Itemized In-Kind Contributions Sc	hedule 1-IK: Eight (8) separate contributions
listed. No listing shows the date of	of receipt, contributo	or's street address, or vendor
name & address.		
Evidence that supports those allegations (attach copies of See Attached Exhibit, Exhibit Page		nformation):
	340 - 52	
21		
	100 100 20	
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Reset Form

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

Please print or type all information.

Section I. Complainant		
Joseph J. Tomczyk		Daytime Telephone Number 517-230-6866
Mailing Address PO Box 113		
St. Johns	State MI	^{Zip} 48879
Section 2. Alleged Violator		L=23 0 1217-72 - 46 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Brian D. Booker		
Mailing Address 4465 Stone Creek Court		
Saginaw	State	^{Zip} 48603
Section 3. Alleged Violations (Use additional she	tif more space	is needed.)
Section(s) of the MCFA violated: Section 26(1)(e) [Mc		
Explain how those sections were violated: Itemized In-Kind Contributions Schedule 1	-IK: Allen O	gg (Exhibit Page 4) & Karen
Lawrence-Webster (Exhibit Pages 6 & 15)	direct conti	ributions were not listed in
Cumulative Totals.		
Evidence that supports those allegations (attach copies of pertinent door See Attached Exhibit, Exhibit Pages 19-20		formation):
		AN 188 187 187 188 1

Reset Form

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

Please print or type all information.

Section 1. Complainant			
Your Name Joseph J. Tomczyk		Daytime Telephone Number 517-230-6866	
Mailing Address PO Box 113		•	
St. Johns	State MI	^{Zip} 48879	
Section 2. Alleged Violator			
Brian D. Booker			
Mailing Address 4465 Stone Creek Court			
City Saginaw	State MI	^{Zip} 48603	
Section 3. Alleged Violations (Use additional shee	ttifimore space	is needed.)	
Section(s) of the MCFA violated: Section 26(1)(e) [MCFA violated:			
Explain how those sections were violated: Itemized In-Kind Contributions Schedule 1-	IK: Allen Og	g & Karen Lawrence-Webster	
Occupation, Employer Name & Address is	not listed		
Evidence that supports those allegations (attach copies of pertinent doc See Attached Exhibit, Exhibit Pages 19-20		formation):	
		×	

Reset Form

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

Please print or type all information.

Section 1. Complainant		
Your Name Joseph J. Tomczyk		Daytime Telephone Number 517-230-6866
Mailing Address PO Box 113		
St. Johns	State MI	^{Zip} 48879
Section 2. Alleged Violator		
Brian D. Booker		
Mailing Address 4465 Stone Creek Court	_	
Saginaw Saginaw	State MI	^{Zip} 48603
Section 3. Alleged Violations (Use additional shee	t if more space i	s needed.)
Section(s) of the MCFA violated: Section 33(1)(c) [MC	P	
Explain how those sections were violated: Fund Raiser Schedule 1F: If this fund-raiser was h	eld on 7/1/201	15 (as indicated in the filed report),
a Campaign Report for the period ending 7/20/2015	should have be	een filed. This item should not have
been included in a report for the period en	ding Octobe	er 20, 2015.
Evidence that supports those allegations (attach copies of pertinent doc See Attached Exhibit, Exhibit Page 27	uments and other inf	ormation)
	- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	

0.00	1 4 20 1200 15 00	1. 10			201
Sect	ion 4. Certification (Requ	uired)			
	I certify that to the best a reasonable inquiry u complaint is supported	nder the circumsta			
X	Joseph 9	Tomeza	5	/2/2016	
	Signature of Complainant			Date	
Sect	ion 5. Certification witho	ut Evidence (Supp	plemental to Sect	tion 4)	
sectio under	on 15(6) of the MCFA (Men 4 of this form be included the circumstances, you are idence, you may also make I certify that to the best of grounds to conclude that contentions are likely to opportunity for further in	led in every competunable to certify to the following cert of my knowledge, at the following specific the supported by e	laint. However, that certain facturification: information, or accifically identification are after a resistance after a resista	, if, after a reasonable al contentions are sup belief, there are fed factual reasonable	inquiry
x					
	Signature of Complainant			Date	
respon to \$1,0	n 15(8) of the MCFA provid sible for a civil violation of 00.00 and some or all of the I violator as a direct result o	the MCFA. The percent of the contract of the c	erson may be req by the Michigan	uired to pay a civil fin	e of up

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

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

Revised 06/03/2011



Authority granted under P.A. 388 of 1976



FOR OFFICIAL USE ONLY

Exhibit Page 1

FILED SAGINAW COUNTY, M

CANDIDATE COMMITTEE **COVER PAGE**

COVER PAGE		2015 OCT 27 P 4: 0	
Report must be legible, typed or printed in link and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement covers Fro		
1. Committee I.D. Number	4. Candidate Last Name	First Name COMMITY CLERK	
20150101736	Booker	Brian D	
2. Committee Name	4a. Office Sought including District # or Community Served (If applicable) EPUTY CLERK_ Shoriff		
Committee to Elect Brian D. Booker Sherif			
5. Committee's Mailing Address	4b. County of Residence SA		
	6. Treasurer's Name & Resid	· ·	
4465 Stone Creek Court	Karen L. Lawrence-Webster		
Saginaw, Michigan 48603	219 Superior		
i	Saginaw, Michigan	48602	
Area Code and Phone 9895292573			
If the address in this how is different from the annual to		j	
mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	Area Code & Phone 9897	997150	
7. Treasurer's Business Address			
219 Superior	Designated Record keeper)	's Name and Mailing Address (If the committee has a	
Saginaw, Michigan 48602			
3		1	
**	ł		
	<u> </u>	×	
Area Code and Phone 9897997150			
9. TYPE OF STATEMENT	Area Code and Phone	9e.	
Required O	NLY if candidate ballot for the		
Pre-Election or Post-Election Statement relates to:	namotici file	By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here	
	priv	by discharged and forgiven, and no longer collectible from the committee. The committee has no oustanding assets,	
o runary		owes no tates fees or has any oustanding debt.	
General XOctober C	uarterly	Further, if the dissolution cannot be appoint that this ha	
Convention		Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Walver.	
Special 9c.	I Statement ()		
School	Coverage Year	Effective date of dissolution	
Caucus gd. Amen	iment to Campaion Statement	<u></u>	
Comp	lete Item 9a, 9b, 9c or 9e to e which Statement is being	Note: The disposition of residual funds must be reported on	
amend	ed.)	Schedule 18 and the Summary Page.	
Date of Election, Convention or Caucus			
August 2, 2016	İ		
		8	
10. Verification: NWe certify that all reasonable diligence was used imylour knowledge and belief the contents are true, accurate and co	n the preparation of this stateme	ent and attached schedules (if any) and to the best of	
Current Treasurer or Karen Lawrence-Webster	Van WW		
Designated Record keeper Type or Print Name	Signature	rence Webst 10/26/2015	
Brian D. Booker	6-5		
Candidate	1001)		
Type or Print Name	Clanation		



1. Committee I.D. Number 20150101736

SUMMARY PAGE

CANDIDATE COMMITTEE	2. Committee Name Committee to	Elect Brian Booker
3. Contributions	Calumn I This Period	Column II Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 3,888.00	4
b. Uniternized (less than \$20,01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	- 1 252
c. Subtotal of "Contributions"	(3c.) \$ \$3,888.00	(18.) \$ \$0.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) s \$0.00	(19,) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$3,888.00	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$591.98	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6) EXPENDITURES	(7.) \$ \$0.00	(22.) \$
8. Expenditures		
a. Itemized (Schedule 18, Column 6)	(8a.) \$ _\$3,762.07	4,
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	-
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ \$0.00	-
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$3,762.07	(23.) \$
NCIDENTAL EXPENSE DISBURSEMENTS Officeholders Only)	%	
Disbursements a. Ilemized (Schedule 1C, Column 6)	(10a.) \$ \$0.00	8
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ \$0.00	
1. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)		-
EBTS AND OBLIGATIONS 2. Debts and Obligations	(11.) \$ \$0.00	(24.) \$ \$0.00
a. Owed by the Committee (Schedule 1E)	(12a.)\$_\$0.00	
b. Owed to the Committee (Schedule 1E)	/17h \ C	-
	(12b.) \$BALANCE STATEMENT	
Ending Balance of last report filed (Enter zero if no previous reports have been filed.) Amount received during reporting period	(13.) \$ \$0.00	
(Line 5, Total Contributions & Other Receipts) SUBTOTAL Add lines 13 and 14	(14.) + \$ \$3,888.00	
Amount expended during reporting period (Add lines 9 and 11)	(15.) = \$ \$3,888.00	_
ENDING BALANCE (Subtract line 16 from line 15)	(16.) - \$ \$3,762.07 (17.) \$ \$125.93	_
•	(17.) \$ 4120.33	*

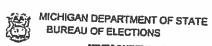


CANDIDATE COMMITTEE

1. Committee I.D. Number _____2015010173

2. Committee Name Committee to Elect Brian Booker She

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 7/24/2015		
Hall, David	•	
	400.00	400.00
	ş 100.00	s 100.00
5. If over \$100.00 cumulative, please provide:	Olimbata I I ama di	
Occupation Employer	Click Here to	or Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/28/2015 Name & Address	<u> </u>	
Lawrence-Webster, Karen		
	_s 15.00	, 15.00
	3	3
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		· ····································
Business Address		
Type of Contribution:		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 7/20/2045		
		:
Hayes, Frances	s 30.00	30.00
		\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		-
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 7/30/2015		
Opperman, David		20
	_s 15.00	15.00
	\$	\$
5. If over \$100.00 cumulative, please provide:	OU-L. H.	
OccupationEmployer	Click Here for	Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	160.00	
	100.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
Page 1 of 14	Enter this total on line 3a of Summary	



1. Committee I.D. Number 2015010173

CANDIDATE COMMITTEE

2. Committee to Elect Brian Booker She

Enter contributor's name and address. If contribution is from an individual, enter test 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. 3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 7/20/2004.	6. Amount	7. Cumulative for Election Cycle for Eacl Contributor (Through date of receipt)
Name & Address: 4. Date of Receipt 7/30/2015		- COLO OF TOCKSPL)
Hinton, Dawn	_	
5. If over \$100.00 cumulative, please provide:	s_15.00	\$ 15.00
Occupation Employer	Click Here	for Memo Itemization
Business Address		
Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/30/2015		
Ogg, Allan	GE 00	
	s_65.00	_ s_65.00
5. If over \$100.00 cumulative, please provide: Occupation Employer	Click Here	for Memo Itemization
OccupationEmployerBusiness Address		
Type of Contribution: Albimet		
Lean from a person Fund Raiser Contribution #3 PAC Receipt? YES 4. Date of Receipt 7/30/2015		
Booker, Shirley	\$ 15.00	_{\$} 15.00
. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
ccupation Employer		
usiness Address		
ype of Contribution: Direct Loan from a person Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7/30/2015		
Vells, Lawrence		
	00.05	
***************************************	s 20.00	s_20.00
if over \$100.00 cumulative, please provide:		
ccupation Employer	Click Here for	Memo Itemization
isiness Address		
ype of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	115.00	
Grand Total of All Schedules 14	0.00	-
(Complete on last page of Schedule)	Enter this total on	J
$\frac{2}{\sqrt{14}}$	line 3a of Summary	
	Page.	Exhibit Page 4



CANDIDATE COMMITTEE

1. Committee I.D. Number ______2015010173

2. Committee Name	Committee to	Elect	Brian	Booker	She

Enter contributor's name and addramiddle initiat. Check box to indicat Committee (PAC) Report all contribution # 1 PAC Re	outions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Eac Contributor (Through date of receipt)
Name & Address:	celpt? YES 4. Date of	Receipt 7/30/2015		(Cate of receipt)
Tatum, Willomena				
P 18			_s 10.00	10.00
5. If over \$100.00 cumulative, plea				
Occupation	Employer		Click Here	for Memo Itemization
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Ralser		
3. Contribution #2 PAC Rec		Receipt 7/30/2015		
Name & Address		7730/2015		~ ~~
Jackson, JoeAnn				
		€	, 20.00	20.00
			\$	\$ 20.00
i. If over \$100.00 cumulative, pleas	e provide:		Click Harris	an Manas II
Occupation	Employer	i .	Click Liefe I	or Memo Itemization
Business Address				
ype of Contribution: V Direct				
Contribution # 3 PAC Recei	Loan from a person pt? YES 4. Date of R	Fund Raiser aceipt 7/30/2015		
Booker, Brian			-	
oner, Bridge			, 347.00	0.47.00
			3 - 17.00	s 347.00
if over \$100.00 cumulative, please	provide:		Click Here for	r Memo Itemization
ccupation				Memo Remización
siness Address				
ype of Contribution: 📝 Direct	Loan from a person			
Contribution #4 PAC Recei		Fund Raiser		
me & Address	ot? YES 4. Date of R	eceipt 7/30/2015		
oleman, Hurley				
			400.00	
			ş 100.00	s 100.00
lf over \$100.00 cumulative, please	provide:			
cupation	Employer		Click Here for	Memo Itemization
siness Address				
ype of Contribution: // virect	Loan from a person	Fund Raiser		
 -		Page Subtotal	477.00	
	_		477.00	
	(Con	Grand Total of All Schedules 1A plete on last page of Schedule)		
3 of 14	,	and toda of orriginis)	Enter this total on	;
lo			fine 3a of Summary Page.	E 1220
			3	Exhibit Page 5



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number ______2015010173

CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Brian Booker She

Enter contributor's name and address. If contribution is from an individual, enter last name, first middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount. 3. Contribution#1 PAC Receivt?	dent Election Cycle for E. Contributor (Through)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 8/6/2015	date of receipt)
Lawrence-Webster, Karen	
5. If over \$100.00 cumulative, please provide:	\$ 25.00 \$ 40.00
Occupation Employer	Click Here for Memo Itemization
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
PAC Receipt? YES 4. Date of Receipt 8/6/2015	
Reynolds, Yolonda	
	\$ 25.00 \$ 25.00
. if over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
ccupation Employer	
usiness Address	
ype of Contribution: Losn from a person V Fund Raiser	
Contribution #3 PAC Receipt? YES 4. Date of Receipt 8/6/2015	12
afel, Cathy	s 50.00
if over \$100.00 cumulative, please provide:	0.111
	Click Here for Memo Itemization
siness Address Employer	
ype of Contribution: Direct	IC
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7/30/2015	
ewitt, William	
	\$ 20.00 \$ 20.00
if over \$100.00 cumulative, please provide:	Clieb Harry C. 10
cupation Employer	Click Here for Memo Itemization
siness Address	
pe of Contribution. Direct Loan from a person V Fund Raiser	-
Page S	Subtotal 120.00
Grand Total of All Schedu (Complete on last page of Sch	iles 1A
4_ of	Enter this total on line 3a of Summary
	Exhibit Page 6

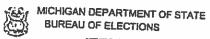


1. Committee I.D. Number 2015010173

CANDIDA	ATE CO	MMITTEE
---------	--------	---------

2. Committee Name Committee to Elect Brian Booker She

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
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 8/6/2015		date of receipt)
Beverly, Richard	-	
	4=	
E If over \$400.00 and the	s 15.00	_ <u>\$ 15.00</u>
5. If over \$100.00 cumulative, please provide: Occupation	Click Here	for Memo Itemization
Occupation Employer Business Address	Short Here	ror wemo itemization
Type of Contribution: A private		
Pulo Raiser		
Name & Address PAC Receipt? YES 4. Date of Receipt 8/6/2015		
Simon, Tawanya		
	_s 25.00	25.00
5. If over \$100.00 cumulative, please provide:	-	
	Click Here for	or Memo ttemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #3 PAC Receipt? Direct	95	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8/6/2015		
Turner, Diane		
	\$ 6.00	s 6.00
5. If over \$100.00 cumulative, please provide:	Cliek Heen So	
	Circk Hele io	r Memo Itemization
Susiness Address Employer		
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution # 4 PAC Receipt? YES 4 Date of Receipt 7/20/2045		
fordan, Carla		}
	_{\$} 25.00	25.00
. If over \$100.00 cumulative, please provide:	700	*
Occupation Employer	Click Here for	Memo Itemization
dusiness Address		
V Turio (valsa)		
	71.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
5 1/6	Enter this total on	•
	line 3a of Summary	

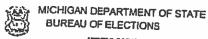


1. Committee I.D. Number ____2015010173

CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Brian Booker Sha

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 Constitution of the contribution is from a Political Constitution of the contribution is from a Political Constitution of the contribution of the	CHARACTER TO L.	iect brian Booker S
Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Eac Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 8/6/2015		data of receipt)
Johnson, Freddie	-	
5. If over \$100.00 cumulative, please provide:	s 70.00	
	CC-la L1-	
Occupation Employer Business Address	Click Here	for Memo Itemization
Type of Contribution		
Coabitude to Fund Raiser		8
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/6/2015	= 4	0
Dale, Lorman		
	60.00	
	\$ 60.00	_ \$ 60.00
5. If over \$100.00 cumulative, please provide:	Olinia	
OccupationEmployer	Click Here 1	for Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution # 3		
Name & Address: PAC Receipt? YES 4. Date of Receipt 8/6/2015	•	
Webb, Cecilia	•	
	_{\$} 25.00	, 25.00
Hower \$400 on aumulation	· · · · · · · · · · · · · · · · · · ·	
. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
ype of Contribution: Direct Loan from a person		
Contribution # 4 PAGE - A FE		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7/30/2015		
illard, Christine		
· · · · · · · · · · · · · · · · · · ·	E0.00	
Marie Anna	\$ 50.00	<u>\$_50.00</u>
If over \$100.00 cumulative, please provide:		
ccupationEmployer	Click Here for	Memo Itemization
isiness Address		2
ing of Contillary		
ype of Contribution:		
Page Subtotal	205.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule) L	Enter this total on	J
e = 6 of 4	line 3a of Summary	
	Page.	Exhibit Page 8



CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Brian Booker She

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. 3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt P. 15 (2004).	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address:		•
Patterson, Maurice		
5. If over \$100.00 cumulative, please provide:	s 20.00	\$ 20.00
OccupationEmployer	Click Here	for Memo Itemization
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/22/2015		
Balls, Michael	•	
	, 100.00	_ 100.00
If owner \$400 ca	4	_ \$
. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
OccupationEmployer		
usiness Address	10	
ype of Contribution: Direct Loan from a person Fund Raiser Contribution #3 PAC Receipt?		
libbs, Demond	\$ 25.00	\$ 25.00
If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
ccupationEmployer		
siness Address		
Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 8/22/2015		
addis, James		
	25.00	05.05
f over \$100.00 exemplation of	\$ 25.00	s_25.00
f over \$100.00 cumulative, please provide:	Oliela Dece	
cupation Employer	Click Here for	Memo Itemization
siness Address		
pe of Contribution: V Direct Loan from a person Fund Raiser	-	
Page Subtotal	170.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	J
- 7 of 14	line 3a of Summary	
	Page.	Exhibit Page 9

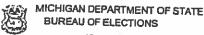


1. Committee I.D. Number 2015010173

CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Brian Booker She

Enter contributor's name and address. If contribution is from an individual, enter last name, fil middle initial. Check box to indicate if contribution is from a Political Committee or an Independent (PAC) Report all contributions regardless of amount.	irst name, 6. Amount ndent	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 8/25/2015	5	T date of teoespity
Zackrie, Carrie Jackson		
	50.00	50.00
E K	s_50.00	<u>\$ 50.00</u>
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Employer		TO MEMO REMIZATION
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/25/2015 Name & Address		
Flournoy, Athen		
	<u>\$</u> 25.00	_ s 25.00
5. If over \$100.00 cumulative, please provide:		
	Click Here t	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Ralser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8/22/215		
Cabine, Melissa	s 100.00	s 100.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 8/25/2015		
Vinson, Brenda		
	\$ 100.00	s 100.00
5. If over \$100.00 cumulative, please provide:		:
Occupation Employer	Click Here fo	r Memo Itemization
Business Address		1
Type of Contribution: Direct Loan from a person Fund Raiser	2	
Page	e Subtotal 275.00	
Grand Total of All Sche	27 0.00	-
(Complete on last page of S	Schedule) L	J
Page 8 of [4]	Enter this total on line 3a of Summary	
	Page.	Exhibit Page 10



1. Committee I.D. Number _____2015010173

CANDIDATE COMMITTEE Committee to Elect Brian Booker She 2. Committee Name 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 6. Amount 7. Cumulative for Committee (PAC) Report all contributions regardless of amount. Election Cycle for Each Contributor (Through date of receipt) 3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 8/27/2015 Name & Address: Howell, Russell 50.00 50.00 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation _ Business Address Type of Contribution: | | Direct Loan from a person Fund Ralser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/27/2015 Name & Address Foxx, Juanita **25.00** 25.00 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation _ **Business Address** Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #3 PAC Receipt? 4. Date of Receipt 8/22/215 Name & Address: Lawrence, Glendorah _s 25.00 25.00 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation_ Business Address Type of Contribution: Loan from a person **Fund Raiser** 3. Contribution #4 PAC Receipt? 4. Date of Receipt 8/25/2015 Name & Address Manning, Beatrice 50.00 50.00 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation_ Employer Business Address Type of Contribution: | I Direct Loan from a person Fund Raiser Page Subtotal 150.00

Page 9 of 14

Grand Total of All Schedules 1A (Complete on last page of Schedule) Enter this total on line 3a of Summary

Page. Exhibit Page 11



CANDIDATE COMMIT	TEE
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2. Committee Name Committee to Elect Brian Booker She

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
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 8/27/2015		date of receipt)
Williams Bettis, Ceylon	- 0	
	_s 25.00	s 25.00
5. if over \$100.00 cumulative, please provide:		
OccupationEmployer	Click Here t	or Memo Itemization
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/27/2015		
Platko, Gloria		
i idito, Gioria	_s 50.00	, 50.00
	\$	\$ 00.00
5. If over \$100.00 cumulative, please provide:	Click Haro fo	or Memo Itemization
Occupation Employer	Olick Hele IC	n Memo Kemization
Business Address		
Type of Containing and Maria and Maria		
Coats not a person Fund Raiser		
Name & Address: PAC Receipt? YES 4. Date of Receipt 8/22/215		
Lawrence, Pauline		
	_{\$} 25.00	, 25.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 8/25/2015	<u></u>	
Houston-Philpot, Kimberly		
·	25.00	25.00
P. Marian Babbaran and A. Marian Babbaran and	2	\$
5. If over \$180.00 cumulative, please provide:	Click Hara for	Memo Itemization
Occupation Employer	Olick Liele 10	Wellio Remization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	405.00	
i	125.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
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ITEMIZED CONTRIBUTIONS

2015010173

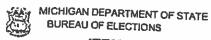
SCHEDULE 1A	1. Committee I.D. Num	ber	
			t Brian Booker Sh
Enter contributor's name and address. If contribution is from an individual, entended initial. Check box to indicate if contribution is from a Political Committee Committee (PAC) Report all contributions regardless of amount.	er last name, first name e or an Independent	e, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt Name & Address:	9/5/2015		
Daniel, Desmon			
		_s 50.00	_s 50.00
5. If over \$100.00 cumulative, please provide:			<u> </u>
Occupation Employer		Click Here fo -	r Memo Itemization
Business Address			
Type of Contribution: ✓ Direct Loan from a person	und Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt State & Address	9/5/2015		
Mosher, Michael		\$ 20.00	ş 20.00
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
OccupationEmployer			
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
Contribution #3 PAC Receipt? YES 4. Date of Receipt Name & Address:	3/22/215		
Turner, John		_{\$} 150.00	s 150.00
		entrate in the	
5. If over \$100.00 cumulative, please provide;		Click Here for	Memo Itemization
Occupation Retired Employer Urban League			
Business Address N/A Type of Contribution: Direct	Pro-I Date:		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt	Fund Raiser 8/25/2015		
Ruth, Carl		_	
		<u>\$ 100.00</u>	s100.00
5. If over \$100.00 cumulative, please provide:			
Occupation Employer		Click Here for	Memo Itemization
Business Address			
Type of Contribution:	und Ralser		

Page 11 of 14

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

Page Subtotal 320.00

Enter this total on line 3a of Summary



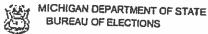
1. Committee I.D. Number ______2015010173

TOTIL DOLL IA	ommittee I.D. Number
CANDIDATE COMMITTEE 2. Co	ommittee Name Committee to Elect Brian Booker
middle Initial. Check box to Indicate if contribution is from an Individual, enter last Committee (PAC) Report all contributions regardless of amount.	st name, first name, an Independent 6. Amount 7. Cumulative for Election Cycle for E Contributor (Through
Contribution # 1 PAC Receipt? YES 4. Date of Receipt 9/2 Name & Address:	
Jenkins, Marvin	
5. If over \$100.00 cumulative, please provide:	\$ 50.00 \$ 50.00
Occupation Employer	Click Here for Memo Itemization
Business Address	- The state of the
Type of Contribution: ✓ Direct Loan from a person Fund F	Rajeor
Contribution #2 PAC Receipt? YES 4. Date of Receipt 9/25	
Booker, Brian	12013
	s 150.00 s 497.00
if over \$100.00 cumulative, please provide:	
ccupation Employer	Click Here for Memo Itemization
siness Address	
pe of Contribution: Direct Loan from a person Fund F	Palene
Contribution # 3 PAC Receipt? YES 4. Date of Receipt 8/22/	
urpin, Roger and Karen	
	s 100.00 s 100.00
f over \$100.00 cumulative, piease provide:	Click Here for Memo Itemization
cupation Employer_	to Membridation
iness Address	
pe of Contribution: Direct Loan from a person Fund R	
contribution # 4 PAC Receipt? YES 4. Date of Receipt 8/25/	2015
loman, Linda	
OVER \$100.00 august ()	\$ 25.00 \$ 25.00
over \$100.00 cumulative, please provide:	
upationEmployer	Click Here for Memo Itemization
ness Address	
e of Contribution: Direct Loan from a person Sunday	

Page 12 of 14

Page Sublotal 325.00 Grand Total of All Schedules 1A (Complete on last page of Schedule)

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2015010173

1. Committee I.D. Number Committee to Elect Brian Booker She CANDIDATE COMMITTEE 2. Committee Name 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 6. Amount 7. Cumulative for Committee (PAC) Report all contributions regardless of amount. Election Cycle for Each Contributor (Through 3. Contribution # 1 date of receipt) PAC Receipt? YES 4. Date of Receipt 10/6/2015 Name & Address: Lawrence-Webster, Karen _s 50.00 90.00 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation ; Employer_ Business Address Type of Contribution: | Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? IYES 4. Date of Receipt 10/6/2015 Name & Address Patterson, Rudy 100.00 100.00 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation _ Employer_ Business Address Type of Contribution:

√ Direct Loan from a person **Fund Raiser** 3. Contribution #3 PAC Receipt? 4. Date of Receipt 10/20/2015 YES Name & Address: Tivis, Tierra ,50.00 \$ 50.00 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation Employer_ Business Address Type of Contribution: Direct Loan from a person **Fund Raiser** 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt Name & Address 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation. Employer Business Address Type of Contribution: 1 Direct Loan from a person Fund Raiser Page Subtotal 200.00

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

Page 13 14

Enter this total on line 3a of Summary Page:



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number	2015010173

Page.

CANDIDATE COMMITTEE 2. Committee Name	Committee to Elect Brian Booker Sha
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.	ne, 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 8/6/2015	
Ogg, Trisha	
	465.00
5. If over \$100.00 cumulative, please provide:	\$
Occupation Employer	Click Here for Memo Itemization
Business Address	_
Type of Contribution: Direct Loan from a person V Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9/16/201	15
Ogg, Trisha	s 620.00
	\$ \$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 9/29/2015	
Ogg, Trisha	····
	\$ 90.00
P. M. augus Béan an	Clieb blood for Many Mark 1
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	
. Contribution # 4 PAC Receipt? YES 4. Date of Receipt	4)
Name & Address	
	\$s
i. If over \$100.00 cumulative, please provide;	
Occupation Employer	Click Here for Memo Itemization
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	*
Page Subt	otal 1,175.00
Grand Total of All Schedules	1,170.00
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Page of	line 3a of Summary



ITEMIZED OTHER RECEIPTS SCHEDULE 1A-1

CANDIDATE COMMITTEE

1. Committee I.D. Number 20150101736

3. Name & Address From Wi		2. Committee Name Committee to Elect Brian Booker Sh
Receipt #1	om Received 4. Date of Receipt Date of Receipt	5. Type of Receipt 6. Amount
Name & Address:	Date of Receipt	Loan from a Lending institution
		Interest \$
		Refund Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
Receipt #2 Name & Address:	Date of Receipt	Loan from a Lending Institution
		Interest s
		Refund \Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
Receipt #3 Name & Address:	Dale of Receipt	Loan from a Lending Institution
		Interest \$
		Refund Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
Receipt #4 Name & Address:	Date of Receipt	
		Loan from a Lending Institution
		Interest \$
	16	Refund \Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
leceipt #5 lame & Address:	Date of Receipt	Loan from a Lending Institution
		Interest \$
		Refund \Rebate Click for Memo Itemization Type
	П	
ecelpt #6	Fund Raiser Date of Receipt	Other (Specify)
lame & Address:		Loan from a Lending Institution
		Interest 5
		Refund \Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
ceipt #7 ime & Address:	Date of Receipt	
		Loan from a Lending Institution \$
		Interest
	_	Refund \Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
		Page Subtotal
		Grand Total of All Schedules 1A -1
		(Complete on last page of Schedule)

Enter this total on line 4 of Summary Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 20150101736

CANDIDATE COM	MITTEE 2. Committee Name Committee to Ele	ect Brian Book	er 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 (Throug date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: Joiner, Will 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-LOAN Description Tent for Announcement 5. Date Of Receipt:	100.00	100.00
Fund Ralser Contribution	6. Vendor Name & Address:	lick Here for Memo II:	emization
Contribution # 2 PAC Receipt? Yes Name & Address Joiner, Jerusha	Goods or Services Purchased by Candidate or Others- LOAN	100.00 s	100,00
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description Tent for Announcement 5. Date Of Receipt: 6. Vendor Name & Address:	2	
Fund Raiser Contribution	CH	ick Here for Memo Ite	mization
Contribution #3 PAC Receipt? Yes Name & Address: Hibbard, Terri	Goods or Services Purchased by Candidate or Others	00.00 s_	200.00
Employer Name & Address:	Goods or Services Purchased by Candidate or Others- LOAN Description 8 tickets for Union Civica banquet Date Of Receipt: Cite Ci	ck Here for Memo Ite	mization
Fund Raiser Contribution			
	Page Subtotat Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		400.00

Page 1 of 3

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ITEMIZED IN-KIND CONTRIBUTIONS

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

2015010736

CANDIDATE COM	WITTEE 2. Committee Name Committee t	o Eleci	Brian Boo	ker 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 service purchased	s were	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: Hibbard, Terri If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	4.	*	9.36	_{\$} 259.36
Fund Raiser Contribution	6. Vendor Name & Address:	Click	d Here for Memo	ltemization
Contribution #2 PAC Receipt? Yes Name & Address Ogg, Allan	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-	s_45	5.00	ş 45.00
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description Democrat party banquet ticket 5. Date Of Receipt: 6. Vendor Name & Address:	ħ		
Fund Raiser Contribution		Click	Here for Memo	Hemization
Contribution #3 PAC Receipt? Yes Name & Address: Ogg, Allan	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others	ş_42.6	62	87.62
	IGoods or Services Purchased by Candidate or Others- L Description 8 tickets for Union Civica banqu 5. Date Of Receipt: 6. Vendor Name & Address:	et_	Here for Mema	Itemization
Fund Ralser Contribution				
	Page S Grand Total of all Schedu (Complete on last page of Sc	iles 1-liK	146.98 Enter this total	

Page 2 of 3

Exhibit Page 19

Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number

CANDIDATE COM	31 151 2 2 2 2	ct Brian Book	er 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). 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: Lawrence-Webster, Karen If over \$100.00 cumulative, please provide: Occupation:	Goods Danzled or Language Sections Densited	15.00	ş_15.00
Employer Name & Business Address: Fund Raiser Contribution	5. Date Of Receipt: 6. Vendor Name & Address: Cl	ick Here for Memo ti	temization
Contribution # 2 PAC Receipt? Yes Name & Address Hibbard, Terri	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	30.00 s	289.36
if over \$100.00 cumulative, please provide; Occupation: Employer Name & Address:	Description PRIDE parade entry fee 5. Date Of Receipt: 6. Vendor Name & Address:	ck Here for Memo II	emization
Fund Raiser Contribution			
Contribution #3 PAC Receipt? Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: State of Michigan Saginaw, Michigan Fund Raiser Contribution	4.	\$ ck Here for Memo Ite	emization
	Page Subtotal Grand Total of all Schedules 1-IK (Complete on tast page of Schedule)	45.00 591.98 Enter this total on line 6 of Summ	nary
Page 3 of 3		Exhibit Pa	ge 20



MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

ITEMIZED IN-KIND EXPENDITURES

SCHEDULE 1B - IK

20150101736

1. Committee I. D. Number **CANDIDATE COMMITTEE** 2. Committee Name Committee to Elect Brian Booker Sheriff 3. Name and Address of person to whom goods or 4. Type of In-Kind Expenditure services were donated or transferred. 6. Fair Market 5. Date: (Check appropriate box and fill in description) Expenditure #1 Value Donation of goods or services to a Ballot Name & Address: Question Committee Donation of assets to tax exempt charitable Institution Date Donation of assets to Political Party Committee Other Click Here for Memo Itemization Type Description Expenditure #2 Donation of goods or services to a Ballot Name & Address: Question Committee Donation of assets to tax exempt charitable Institution Date Donation of assets to Political Party Committee Click Here for Memo Itemization Type Description: Expenditure #3 Donation of goods or services to a Ballot Name & Address: **Question Committee** Donation of assets to tax exempt charitable institution Donation of assets to Political Party Committee Other Click Here for Memo Itemization Type Description: Expenditure #4 Donation of goods or services to a Ballot Name & Address: Question Committee Donation of assets to tax exempt charitable Donation of assets to Political Party Committee Other Click Here for Memo Itemization Type Description: Expenditure #5 Donation of goods or services to a Ballot Name & Address: Question Committee Donation of assets to tax exempt charitable institution Date Donation of assets to Political Party Committee Click Here for Memo Itemization Type Other Description: Page Subtotal 0 Grand Total of all Schedules 1B-IK 0 (Complete on last page of Schedule) Enter this total on line 7 of the Summary Page ___ of \

Page



EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES

SCHEDULE 1 B - G

1. Committee I.D. Number 20150110736

Exhibit Page 22" Page

CANDIDATE COMMITTEE

CANDIDATE COMMITTEE

2. Committee Name

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The -Vote activity in them 4f.

ALL EXPENDITURES ARE DEPORTED TO BE TENED.

ALL EXPENDITURE	S ARE REQUIRED TO BE ITEMIZED		ous additity in
Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
Expenditure #1	a. Election Day Busing of Voters To The Polls	1	
Name & Address;	Crection Day dustrig or voters to the Polis		
	b. Slate Cards c. Challengers		
	d. Poll Watchers e. Poll Workers		
İ	e. Poi vydrkers		S
	_	Date	
	f. Get-Out-The Vote Activity (Specify):		
For Activity Type b-f, check one:	Click	Here for Memo I	temization Type
☐ In-Kind ☐ Independent			
- Independent			
If in support of, or in opposition to, a ballot proposal, check one:	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	acot or any denote tehoriza out his Alona 219/644910		
Support Oppose			
Statewide Proposal Name			
Expenditure #2	Local Proposal NameInd	dicate County	
Name & Address;	a. Election Day Busing of Voters To		
	The Polls		
	b. Slate Cards c. Challengers		
	d. Poli Watchers e. Poli Workers	Dete	. \$
	f. Get-Out-The Vote Activity (Specify):	Date	
	Click I	Here for Memo Ito	amization Type
For Activity Type b-f, check one:			
In-Kind Independent			
If in support of, or in opposition to, a ballot proposal, check one:	Check box if this expenditure is payment of		
	debt or obligation reported on previous statement		
Support Oppose			
Statewide Proposal Name Loc	al Proposal NameIndica	te County	
Expenditure #3			
Name & Address:	Election Day Busing of Voters To The Polls		
	b. Slate Cards c. Challengers		
	d. Poli Watchers e. Poli Workers	Date	\$
	f. Get-Out-The Vote Activity (Specify):		
For Activity Type b-f, check one:	Click H	fere for Memo Ite	mization Type
In-Kind Independent			34
If in exponent of leader and the second second	Check box if this expenditure is payment of		
If in support of, or in opposition to, a ballot proposal, check one: Oppose	debt or obligation reported on previous statement		
Statewide Proposal Name			
Local Maria	cal Proposal Name Ind	dicate County	
	Sub	total this page ()
	Grand Total of all Sc	hedules 1B-G))
	(Complete on last pag	de ou conscorie C	
1 1			Enter total on Line 8b
age of			Sugnifiery Page



INCIDENTAL OFFICE EXPENSE DISBURSEMENTS SCHEDULE 1C

Committee I. D	Number	201	501	101	73

CANDIDATE COMMITTEE	Committee to	Elect Brian Booker
(For use by officeholders only)	2. Committee Name	
3. Name and address of person to whom disbursement was made	Description of Disbursement (Be specific & you may assign a disbursement code*)	5. Date 6. Amount of Disbursement
Disbursement # 1 Name & Address:	Purpose	121
		_
		\$
		Click for Memo Itemization Type
Check box if this disbursement is payment of debt or obligatio reported on previous statement	Disbursement Code	-
Disbursement # 2 Name & Address:	Purpose	
		\$
		Date
		Click for Memo Itemization Type
	The same of the sa	16 28
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code	-
	Fund Raiser	
Disbursement # 3 Name & Address:	Purpose	
		\$
7×		Date
		Click for Memo Itemization Type
	Disbursement Code	
Check box if this disbursement is payment of debt or obligation reported on previous statement	Fund Raiser	15
Disbursement # 4 Name & Address:	Purpose	
		\$
		Date
		Click for Memo Itemization Type
Charles Williams	8 14	
Check box if this disbursement is payment of debt or obligation eported on previous statement	Disbursement Code Fund Raiser	
		Subtotal this page 0
	Grand To (Complete on	tal of all Schedules 1C last page of Schedule)
200		Enter this total on line 10a of

*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; incidental Office Expense Disbursements ONLY

Exhibit Page 23

Summary Page



DEBTS	AND	OBI	LIGA	TIONS
	CHE	HIC	F 1E	•

Page

20150101736 1. Committee I.D. Number

Committee to Elect Brian D. Booker **CANDIDATE COMMITTEE** 2. Committee Name This Schedule itemizes: Debts and obligations owed by or forgiven the committee b. Debts and obligations owed to or forgiven by the committee. OR (Check either a or b. Use only for the purpose checked.) 3. Name and Mailing Address of person, vendor or 4. Type of Obligation 7. Date and amount of financial institution to whom debt is owed. 8. Cumulative 9. Outstanding (Description) each payment payment to Balance at close 5. Indicate date debt was Check box to indicate whether debt is owed to an of this period date on debt incurred incorporated business. If debt is a bank loan, please (item 6 minus 6. Indicate original amount provide information regarding the endorsers or Item 8) of debt guarantors, if any. Debt #1 Corp? Yes Owed to or by: 4. Type:__ 5. Date Debt Was Incurred; S 6. Original Amount of Debt: FORGIVEN If bank loan, name of endorser or guarantor. Amount Endorsed: \$ Debt #2 Corp? Owed to or by: 4. Туре:_ 5. Date Debt Was Incurred: 6. Original Amount of Debt: S **FORGIVEN** \$ If bank loan, name of endorser or guarantor. Amount Endorsed: \$ Debt #3 Yes Owed to or by: 4. Type: 5. Date Debt Was Incurred: 6. Original Amount of Debt: \$ FORGIVEN If bank loan, name of endorser or guarantor: Amount Endorsed: \$ 0 Page Subtotal (Outstanding debt) Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee) Enter this total on line 12a "owed A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of by or line 12b this Campaign Statement or it was forgiven during the period covered by this Campaign Statement. "owed to" of the

Summary Page



FUND RAISER SCHEDULE 1F

1. Committee I.D. Number 20150101736

CANDIDATE CO	ITTIMMC	EE 2. Cor	nmittee Name Committee to E	Elect Brian Booker Sheriff
	- USE	SEPARATE SH	EET FOR EACH EVENT	
3. Date Event Was Held	4. Number	of Individuals Attending sting (whichever is	5. Type of Fund Raising Activity	Address and Name (if any) of the place where the activity was held.
08/27/15	greater)	25	Mantando	219 Superior
			Meet and Greet	Private Residence
7. Total Contributions		\$350.00		
8. Other Receipts		\$0.00		
9. Gross Receipts (Add lines 7 a	and 8)	\$350.00		
10. Total Cost of Event		\$250.00		
(Total Cost includes In-Kind Con				4
11. Check if event was a joir	nt fund rais	ser and complete the	following:	
Co-Sponsor(s)		Contribution S	plit	Expenditure Split (%)
			·· ·	
The committee is an a				
period covered by the Car	o tile a s mpaign St	eparate Fund Raiser atement.	Schedule for each fund raising	g event held during the
Receipts and expenditure	s listed on	a Fund Daises Cal-	dule must also be reported on (1-IK), Itemized Expenditures	the Itemized Contributions Schedule (1B) and the
Each committee that partie	cipated in	a joint fund raiser mu	ust file a Fund Raiser Schedule	for the event.



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number 20150101736

		Committee Name Committee to	
		SHEET FOR EACH EVENT	
3. Date Event Was Held	Number of Individuals Attend or Participating (whichever is greater)	5. Type of Fund Raising Activity	Address and Name (if any) of the place where the activity was held.
08/27/15			Borchard Park
	50	Meet and Greet	Private Residence
7. Total Contributions	\$220.00		
8. Other Receipts	\$0.00		
9. Gross Receipts (Add lines 7	and 8) \$220.00		*
 Total Cost of Event Total Cost includes In-Kind Co 	\$200.00 ntributions and All Expenditu	ures Made For the Event	<i>i</i> 5
	int fund raiser and complete		
Co-Sponsor(s)	Contributio		Expenditure Split (%)
			
The committee is require period covered by the Ca	ed to file a separate Fund Ra	aiser Schedule for each fund raisin	ig event held during the
Receipts and expenditure	es listed on a Fund Dalons	Schedule must also be reported on fule (1-IK), Itemized Expenditures	
Each committee that part	licipated in a joint fund raise	r must file a Fund Raiser Schedule	e for the event.
ge 2 of 3			



Page 3 of 3

FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

20150101736

2. Committee Name Committee to Elect Brian Booker Sheriff - USE A SEPARATE SHEET FOR EACH EVENT -3. Date Event Was Held 4. Number of Individuals Attending 5. Type of Fund Raising Activity or Participating (whichever is 6. Address and Name (If any) of the place where the activity was held. greater) 07/01/15 NA na T-Shirts Private Residence \$1,175.00 7. Total Contributions 8. Other Receipts \$0.00 \$1,175.00 9. Gross Receipts (Add lines 7 and 8) 10. Total Cost of Event \$1,127.84 (Total Cost includes In-Kind Contributions and All Expenditures Made For the Event) 11. Check if event was a joint fund raiser and complete the following: Co-Sponsor(s) Contribution Split Expenditure Split (%) (%) The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement. Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions

Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the

Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.



Page ____ of ___

ITEMIZED EXPENDITURES SCHEDULE 1B

20150101736 1. Committee I. D. Number

CANDIDATE COMMITTEE 2	2 Committee Name Committee to Elect Brian Booker Sheriff			
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount	
Expenditure #1 Name Lawrence-Webster, Karen		8/1/201	s 594.00	
Address 210 Superior	Purpose: T-Shirts	Date	\$ 584.00	
219 Superior Saginaw, Michigan	i 📇	Here for Memo	Itemization Type	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement			
Expenditure #2				
Name Sandlot Sports		8/7/201	\$ 508.80	
Address	Purpose: T-Shirts	Date		
9790 Gratiot Saginaw, Michigan	Click H	lare for Memo	Itemization Type	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement			
Expenditure #3				
Name Saturday Travlers		8/10/20:	• 405 00	
Address	Purpose: Advertisement	Data	\$ <u>125.00</u>	
1080 River Forest Drive				
Saginaw, Michigan	11 1	ere for Memo	Itemization Type	
Fund Raiser	LCheck box if this expenditure is payment of debt or obligation reported on previous statement			
Expenditure #4	PAGE TION			
Name U. S. Postmaster		04000		
Address	1	8/10/20: Date	\$ 98.00	
	Purpose: Stamps	Date		
Saginaw, Michigan	Click He	ere for Memo I	ternization Type	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement			
Expenditure #5			2//	
^{Name} Lawrence-Webster, Karen		0140100.		
Address	Purpose: Printed Materials	8/10/20: Date	\$ <u>30.00</u>	
Fund Raiser	Click He Check box if this expenditure is payment of debt or obligation reported on previous statement	ore for Memo I	temization Type	
	Sublots	il this page	1,345.80	
	Grand Total of all So (Complete on last page of	:hedules 1B of Schedule)		

Enter this total on line 8a of Summary Page



SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

20150101736

CANDIDATE COMMITTEE	2. Committee Name Committee to Elect Brian Booker Sheriff
3. Name and address of person or vendor to whom paid	Purpose (Required Information) 5. Date 6. Amount
Expenditure #1 Name NAACP Address Saginaw, Michigan	Purpose: Advertisement 8/31/20 s 200.00 Click Here for Memo Itemization Type
Fund Reiser Expenditure #2	Check box if this expenditure is payment of debt or obligation reported on previous statement
Name US Postmaster Address Saginaw, Michigan	Purpose: P. O. Box rental Date \$ 33.00
Fund Raiser Expenditure #3	Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement
Name Sandiot Sports Address Saginaw, Michigan	Purpose: T-Shirts 9/5/201 \$ 265.00 Click Here for Memo Itemization Type
Fund Raiser Expenditure #4	Check box if this expenditure is payment of debt or obligation reported on previous statement
Name Lawrence-Webster, Karen Address 219 Superior Saginaw, Michigan Fund Ralser	Purpose: Signs/Business Cards Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous
Expenditure #5 Name Sandiot Sports Address	Statement Purpose: T-Shirts 9/16/20: Statement 9/16/20: Statement 9/16/20: Statement 9/16/20: Statement
Saginaw, Michigan Fund Raiser	Purpose: 1-3/11/15 Date 0/19.04 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement
	Grand Total of all Schedules 1B (Complete on last page of Schedule)

Page A of 4

Enter this total on line 8a of Summary Page Exhibit Page 29



SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

20150101736

CANDIDATE COMMITTEE 2. Committee Name Committee to Elect Brian Booker Sheriff 3. Name and address of person or vendor to whom paid 4. Purpose (Regulred Information) 5. Date Expenditure #1 Name Saginaw County Democratic Party 9/30/20: \$ 50.00 Purpose: Advertisement Saginaw, Michigan Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #2 Name Diamond Harris 9/30/20; s 325.00 Purpose: Marketing Services Address Saginaw, Michigan Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #3 Name Staples \$ 113.88 Address Purpose: Car Magnets Saginaw, Michigan Click Here for Memo Itemization Type ICheck box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #4 Name Saginaw County Democratic Party \$ 100.00 Address Purpose: Advertisement Click Here for Memo Itemization Type Saginaw, Michigan Check box if this expenditure is payment of debt or obligation reported on previous ___ Fund Raiser statement Expenditure #5 Name Copy Quick s 15.00 Purpose: Printed Material Address Click Here for Memo Itemization Type Saginaw, Michigan Check box if this expenditure is payment of debt or obligation reported on previous **Fund Raiser** statement Subtotal this page 603.88 Grand Total of all Schedules 18 (Complete on last page of Schedule)

> Enter this total on line 8a of Summary Page Exhibit Page 30

Page 3 of 4



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1, Committee I, D, Number 20150101736

2. Committee Name	Committee	to	Elect	Brian	Booker	Sheriff
					_	

Name and address of person or vendor to whom paid	2. Committee Name		ter Snentt
Expenditure #1	Purpose (Required Information)	5. Date	6. Amount
Name Walmart			
valman		9/30/20:	's 6.12
Address	Purpose: Supplies	Date	0.12
Saginaw, Michigan		Mara for Marin	
	I ⊏		o Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		•
Expenditure #2	statement		
Name Diamond Harris			 -
Diamond Harifs		8/22/20:	s 325.00
Address	Purpose: Marketing Services	Date	
Saginaw, Michigan			
	Click	riere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
Expenditure #3	statement previous		
•			
Name US Postmaster	1	10/23/2	t
Address	Purpose: Stamps	Date	\$ <u>29.40</u>
Saginaw, Michigan	Purpose: Contribs	Date	
	Click H	lere for Memo	Itemization Type
O	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name			
Address		Date	\$
	Purpose:	Dulo	-
	Click H	ere for Memo	Itemization Type
	Check box if this expenditure is payment of	are to memo	nemization type
Fund Raiser	debt or obligation reported on previous		
Expenditure #5	statement		
Name			
Address	Ригроse:	Date	\$
			=
	Check box if this expenditure is payment of	ere for Memo	Itemization Type
Fund Raiser	debt or obligation reported on previous		
	Subtota	al this page	360.52
	Grand Total of all So		371-207
	(Complete on last gage)	or Schadula L	2 (10d U/1

Page 4 of 4

Enter this total on line 8a of Summary Page Exhibit Page 31



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

June 9, 2016

Joseph J. Tomczyk P.O. Box 113 St. Johns, Michigan 48879

Dear Mr. Tomczyk:

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

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

Sincerely,
17EUA Bombonous

Lori A. Bourbonais Bureau of Elections

Michigan Department of State

c: Brian Booker



mail

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

May 16, 2016

Brian D. Booker 4465 Stone Creek Court Saginaw, Michigan 48603

Dear Mr. Booker:

The Department of State (Department) received a formal complaint filed by Joseph Tomczyk against you, alleging that you violated the Michigan Campaign Finance Act (MCFA):1976 PA 388, MCL 169.201 et seq. A copy of the complaint and supporting documentation is provided as an enclosure with this letter.

The MCFA requires committees to file periodic campaign finance statements and reports. MCL 169.233. The failure to file a single campaign statement may trigger late filing fees. MCL 169.233(7).

The Act additionally requires filed campaign finance statements and reports to be complete and accurate. MCL 169.233. A candidate who knowingly files an incomplete or inaccurate statement or report may be subject to a civil fine of up to \$1,000.00. MCL 169.233(10). A candidate who knowingly omits or underreports a contribution or expenditure may be subject to a civil fine of up to \$1,000.00, or the amount of the undisclosed contribution or expenditure, whichever is greater. MCL 169.233(11).

Mr. Tomczyk alleges that you have filed to file a report and filed an incomplete or inaccurate report.

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

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

A copy of your reply will be provided to Mr. Tomczyk, who will have an opportunity to submit a rebuttal statement to the Department. After reviewing all of the statements and materials provided by the parties, the Department will determine whether "there may be reason to believe

Brian D. Booker May 16, 2016 Page 2

that a violation of [the MCFA] has occurred [.]" MCL 169.215(10). Note that the Department's enforcement powers include the possibility of entering a conciliation agreement or conducting an administrative hearing.

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

Sincerely,

Lori A. Bourbonais Bureau of Elections

Michigan Department of State

c: Joseph J. Tomczyk

Reset Form

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

Please print or type all information.

Your Name Joseph J. Tomczyk		Daytime Telephone Number 517-230-6866
Mailing Address PO Box 113	iling Address	
City	G: 4	
St. Johns	State MI	^{Zip} 48879
Section 2. Alleged Violator		Value descriptions
Name Brian D. Booker	and the second second	
Mailing Address 4465 Stone Creek Court		
Saginaw	State	^{Zip} 48603
Section 3. Alleged Violations (Use additional sho		
Section(s) of the MCFA violated: Section 26(1)(e) [M	1CL 160 226/	4\/-\\
		1)(e)]
Explain how those sections were violated: temized Contributions Schedule 1A: Fifty-		
Explain how those sections were violated:	-five (55) indi	vidual contributions are liste
Explain how those sections were violated: temized Contributions Schedule 1A: Fifty-	-five (55) indi	vidual contributions are liste
Explain how those sections were violated: temized Contributions Schedule 1A: Fifty-	-five (55) indi	ry for the over sight 1
Explain how those sections were violated: Itemized Contributions Schedule 1A: Fifty- None list the Contributor's street address. Evidence that supports those allegations (attach copies of pertinent de	-five (55) indi	ry for the over sight 1
Explain how those sections were violated: Itemized Contributions Schedule 1A: Fifty- None list the Contributor's street address. Evidence that supports those allegations (attach copies of pertinent de	-five (55) indi	ry for the over sight 1
Explain how those sections were violated: Itemized Contributions Schedule 1A: Fifty- None list the Contributor's street address. Evidence that supports those allegations (attach copies of pertinent de	-five (55) indi	ry for the over sight 1
Explain how those sections were violated: Itemized Contributions Schedule 1A: Fifty- None list the Contributor's street address. Evidence that supports those allegations (attach copies of pertinent de	-five (55) indi	ry for the over sight 1

Reset Form

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

Please print or type all information.

in the

	Section 1. Complainant				
	Your Name Joseph J. Tomczyk	Daytime Telephone Number 517-230-6866			
	Mailing Address PO Box 113		377-250-0000		
	St. Johns	State MI	^{Zip} 48879		
	Section 2. Alleged Violator				
	Brian D. Booker				
	Mailing Address 4465 Stone Creek Court				
:	Saginaw Saginaw	State MI	48603		
	Section 3. Alleged Violations (Use additional shee	bilimore space is	needed.)		
	Section(s) of the MCFA violated: Section 26(1)(e) [MC				
/	Explain how those sections were violated: Itemized Contributions Schedule 1A: Cumulative contributions for Trisha Ogg				
-	are not listed. It's Funda	raiser –	T-Shirts		
_					
_	Evidence that supports those allegations (attach copies of pertinent doct See Attached Exhibit, Exhibit Page 16	uments and other infor	mation):		
-					
-					
7.					
		es — 3-91			
_					

Reset Form

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

Please print or type all information.

Sectional. Complainant		《种类》,"种类型,种类型。"	
Your Name Joseph J. Tomczyk		Daytime Telephone Number 517-230-6866	
Mailing Address PO Box 113			w
St. Johns	State M1	^{Zip} 48879	
Section 2. Alleged Violator			
Brian D. Booker			
Mailing Address 4465 Stone Creek Cour	t		
City Saginaw	State	Zip 48603	550
Section 3. Alleged Violations (Use addi	itional sheet if more space	is needed.)	4 10 24
Explain how those sections were violated: Itemized In-Kind Contributions Sch listed. No listing shows the date of			
name & address.			
Evidence that supports those allegations (attach copies of See Attached Exhibit, Exhibit Page	-	uformation):	
15 - 16 - 17 - 17 - 17 - 17 - 17 - 17 - 17			
37772 -			

Reset Form

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

Please print or type all information.

11 - 7,

Section 1, Complainant			
Your Name Joseph J. Tomczyk		Daytime Telephone Number 517-230-6866	or the second of second
Mailing Address PO Box 113		1 011-230-0000	
St. Johns	State M1	^{Zip} 48879	
Section 2. Alleged Violator			
Brian D. Booker			
Mailing Address 4465 Stone Creek	Court		
City Saginaw	State	^{Zip} 48603	
Section 3: Alleged Violations (U			
temized In-Kind Contribution Lawrence-Webster (Exhibit P			
vidence that supports those allegations (attach of See Attached Exhibit, Exhibit	copies of pertinent documents and other		
1.			
in — — ing.			

Reset Form

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

Please print or type all information.

Section A. Complainant		
Your Name Joseph J. Tomczyk		Daytime Telephone Number 517-230-6866
Mailing Address PO Box 113		
St. Johns	State MI	^{Zip} 48879
Section 2. Alleged Violator	reversi lab	
Brian D. Booker	27000-	
Mailing Address 4465 Stone Creek Court		
City Saginaw	State	^{Zip} 48603
Section 3. Alleged Violations (Use additional sh	eet.if more snace	is needed.)
Section(s) of the MCFA violated: Section 26(1)(e) [N		
Explain how those sections were violated: Itemized In-Kind Contributions Schedule 1	-IK: Allen Og	gg & Karen Lawrence-Webst
Occupation, Employer Name & Address	is not listed	
Evidence that supports those allegations (attach copies of pertinent of See Attached Exhibit, Exhibit Pages 19-2		nformation)
		•
8		

Reset Form

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

Please print or type all information.

Sectional: Complainant		
Joseph J. Tomczyk		Daytime Telephone Number 517-230-6866
Mailing Address PO Box 113		
St. Johns	State MI	Zip 48879
Section 2. Alleged Violator		
Brian D. Booker		
Mailing Address 4465 Stone Creek Court	-372	
Saginaw Saginaw	State MI	^{Zip} 48603
Section 3. Alleged Violations (Use additional shoe	ulimore spacelis	needed
Section(s) of the MCFA violated: Section 33(1)(c) [MC		
Explain how those sections were violated: Fund Raiser Schedule 1F: If this fund-raiser was he	8 1 3 eld on 7/ 1/20 1	
a Campaign Report for the period ending 7/20/2015	should have bee	en filed. This item should not have
been included in a report for the period en	ding October	20, 2015.
Evidence that supports those allegations (attach copies of pertinent doct See Attached Exhibit, Exhibit Page 27	uments and other info	rmation);
	<u> </u>	
		42

Sect	ion A. Certification (Require	u)	
		r the circumstances, ed	ation, and belief, formed after ach factual contention of this
X	Signature of Complement	meyle	5/2/2016
IS AFI	ion 5. Gertification without E		it Section New Addition to the section of the secti
sectio under	n 4 of this form be included i	in every complaint. He able to certify that certify following certification by knowledge, informate following specifically supported by evidence	tion, or belief, there are identified factual after a reasonable
X			
	Signature of Complainant		Date
respon to \$1,0	sible for a civil violation of the	MCFA. The person ma penses incurred by the N	complaint with a false certification is by be required to pay a civil fine of up Michigan Department of State and the t.

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

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

Revised 06/03/2011



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

CANDIDATE COMMITTEE **COVER PAGE**

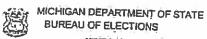
FILED SAGINAW COUNTY, N FOR OFFICIAL USE ONLY 2015 OCT 27 P 4: 0

Report must be legible, typed or printed in link a the treasurer (or designated record keeper) and	and signed by	3. This Statement covers Fr	OD,	2015 OCT 27 P 4:
1. Committee I.D. Number	candidate.	4. Candidate Last Name	June 1, 2015 to O	ctober 23153015ALTENBACH
20150101736		Booker Booker	First Name	COMMITY CLERK
2. Committee Name	4a. Office Sought Including	4a. Office Sought Including District # or Community Served (If applicable DEPUTY CLERK		
Committee to Elect Brian D. Boo	ker Sherif			
5. Committee's Mailing Address		4b. County of Residence S		55
4465 Stone Creek Court		6. Treasurer's Name & Resi		
Saginaw, Michigan 48603		Karen L. Lawrence 219 Superior	-vveoster	}
dis		Saginaw, Michigan	48602	Ä.
Area Code and Phone 9895292573 If the address in this box is different from the commalling address on the Statement of Organization, be sent to this address by the filing official.	nittee mail may	Area Code & Phone 9897	79074 <i>5</i> à	ĘŚ
7. Treasurer's Business Address				
219 Superior		Designated Record keeper Designated Record keeper)	r's Name and Mailing Address (If t	he committee has a
Saginaw, Michigan 48602		_= '(11)		
				1
1				
Area Code and Phone 9897997150		A C 1 1 1		
9. TYPE OF STATEMENT	<u> </u>	Area Code and Phone	9e.	
9a. X Pre-Election OR 9b. Post-Election	Required ONL is not on the b	Y if candidate		E-j
Pre-Election or Post-Election Statement relates to:	current year:	allottor the	By checking this Item I/We or by the committee to the candidate by discharged and femilian	ertify any outstanding debt
	July Quarter	ulo.	by discharged and forgiven, and the committee. The committee h	no longer collectible from
Primary	Tanià cinause	пу	owes no lates fees or has any ou	as no custanding assets, standing debt
General	X October Qu	arterly	İ	
Convention			Further, if the dissolution cannot considered a request for the Rep	te granted, that this be
Special	9c. —			
School	9c. Annual S	Statement ()	Effective date of dissole	
Caucus	ou 🗀 Amanda	Coverage Year	Cuerave date of 012201	UKON
	(Camale	nent to Campaign Statement te Item 9a, 9b, 9c or 9e to	N 12	
	Indicate amended	which Statement is being	Note: The disposition of residual Schedule 18 and the Summary P	unds must be reported on
Date of Election, Convention or Caucus		···,	- House to and the Summary P	age.
August 2, 2016				.A.
				4
Verification: fiWe certify that all reasonable diligen hybour knowledge and belief the contents are true, ac	ce was used in t	he preparation of this stateme	nt and attached schedules (if any)	and to the best of
urrent Treasurer or lesignated Record keeper Karen Lawrence		1/- 1000	15	
Type or Print Name		Signature	rence-Webst 1	0 26 2015
Brian D. Booker	,	SOT		10.00
Type or Print Name		Signature	Date	0-27-15
A salle a state				



1. Committee I.D. Number 20150101736

SUMMARY PAGE CANDIDATE COMMITTEE	2. Committee Name Committee to	Elect Brian Booker
RECEIPTS 3. Contributions	Column I This Period	Column II
a. Itemized (Schedule 1A - Column 5)	(3a.) \$ 3,888.00	Cumulative this election cycl
b. Unitemized (less than \$20.01 each - no Schedule) c. Subtotal of "Contributions"	(3b.) \$ NOT APPLICABLE (3c.) \$ \$3,888.00	(18.) \$_\$0.00
4. Other Receipts (Schedule 1A -1, Column 6) 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(4.) s \$0.00 (5.) s \$3,888.00	(19.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES		(20.) \$
6. In-Kind Contributions (Schedule 1-IK, Column 7) 7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(6.) s \$591.98	(21.) \$
EXPENDITURES	(7.) s \$0.00	(22.) \$
Expenditures Itemized (Schedule 1B, Column 6)	(8a.) \$ \$3,762.07	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	
c. Uniternized (less than \$50.01 each - no Schedule) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(8c.) \$ \$0.00 (9.) \$ \$3,762.07	
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)	(5.)	(23.) \$
Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ \$0.00	3
b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS	(106.)s \$0.00	×
(Add Line 10a + Line 10b) DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11,) \$ \$0.00	(24.) \$ \$0.00
a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E)	(12a.) \$ \$0.00	
	(12b.) \$BALANCE STATEMENT	
3. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 4. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 5. SUBTOTAL Add lines 13 and 14 5. Amount expended during reporting period (Add lines 9 and 11)	(13.) \$ \$0.00 (14.) + \$ \$3,888.00 (15.) = \$ \$3,888.00	-
7. ENDING BALANCE (Subtract line 16 from line 15)	(16.) - \$ \$3,762.07 (17.) \$ \$125.93	-



ITEMIZED CONTRIBUTIONS

SCHEDULE 1A

1. Committee I.D. Number ______2015010173

CANDIDATE	COMMITTEE
-----------	-----------

2. Committee Name Committee to Elect Brian Booker She

Enter controllions name and address 15	Sommittee to Ele	ct Brian Booker She
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. 3. Contribution # 1 PAC Receipt?	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 7/24/2015		T date of receipt)
Hall, David 2205 Montgomery Street	-	4.6
Saginaw, MI 5. If over \$100.00 cumulative, please provide:	ş 100.00	s 100.00
Occupation Employer	Click Here fo	or Memo Itemization
Business Address		-
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/28/2015		
Lawrence-Webster, Karen 219 Supenor Saginaw, MI 48602	s 15.00	_{\$} 15.00
5. If over \$100,00 cumulative, please provide:	Click Here for	Memo Itemization
OccupationEmployer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 7/30/2015		
Hayes, Frances 2 Salem Court 5 agin (44) MT-118(2)	s 30.00	§ 30.00
Saginaw, MI4860) 5. If over \$100.00 cumulative, please provide:	Click Here for I	Memo Itemization
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	5	
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7/30/2015		
Opperman, David 3401 Peale Drive	9.	
Saginaw, MI 48602 i. If over \$100.00 cumulative, please provide:	s 15.00	\$ 15.00
Occupation Employer	Click Here for M	lemo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	100.00	
×	160.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
age 1 of 14	Enter this total on line 3a of Summary	
** ***********************************	Page.	nibit Page 3



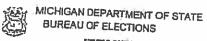
MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number

2015010173

1, Comn	nittee I.D. Number 2015010173
CANDIDATE COMMITTEE	Committee to Flori B
middle initial. Check box to indicate if contribution is from an individual, enter last no Committee (PAC) Report all contributions regardless of amount. 3. Contribution # 1	ame, first name, ndependent 6. Amount 7. Cumulative for Election Cycle
1/30/2	2015 date of receipt)
Hinton, Dawn 135 Reynick Averuse Saginawi MI 48602 5. If over \$100.00 cumulative, please provide:	_{\$} 15.00 _{\$} 15.00
Occupation Employer	Click Horn for he
Business Address	Click Here for Memo Itemization
Type of Contribution: ✓ Direct Loan from a person Fund Raise	0.00
3. Contribution #2 PAC Receipt? Types 4 Bat 4 Ba	
	J15
Saginau m I 48603	s 65.00 s 65.00
5. If over \$100.00 cumulative, please provide:	
Occupation Employer	Click Here for Memo Itemization
Business Address	
Type of Contribution: Direct Loan from a person Fund Raise	
3. Contribution #3	
Name & Address: 7/30/20	15
Booker, Shirley 5630 Brock way	
Saginary of the	<u>\$ 15.00</u>
Saginau . MI 48638 5. If over \$100.00 cumulative, please provide:	9
	Click Here for Memo Itemization
OccupationEmployerBusiness Address	
Type of Contributions 7.7 av	
Fund Raiser	
ame & Address PAC Receipt? YES 4. Date of Receipt 7/30/201	15
Vells, Lawrence	
2800 Germain Drive	00:04
> commany the	s 20.00 20.00
if over \$100.00 cumulative, please provide:	
eccupationEmployer	Click Here for Memo Itemization
usiness Address	
ype of Contribution: 🗸 Direct Loan from a person Fund Raiser	
P	age Subtotal 115 00
	110.00
Grand Total of All So (Complete on last page of	of Schedule)
ge 2 of 14	Enter this total on line 3a of Summary Page.



CANDIDATE COMMITTEE

1. Committee I.D. Number __2015010173

CANDIDATE COMMITTEE 2. Committee Name	Committee to El	ect Brian Booker S
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 Eac
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 7/30/2015		Contributor (Through date of receipt)
Tatum, Willomena 3475 Horman Sau Drive Saginaw m I 48603 5. If over \$100.00 cumulative, please provide:	_{\$} 10.00	_s 10.00
Occupation Employer	Click Here	for Memo Itemization
Dustriess Address	•	To mento herrization
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/30/2015		
Jackson, JoeAnn 3126 Livingston		÷ .
Sagman MI 1180 11	ş_20.00	s 20.00
5. If over \$100.00 cumulative, please provide: Occupation Employer	Click Here fo	or Memo Itemization
Business Address		
ype of Contribution: ✓ Direct Loan from a person Fund Raiser		
. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 7/30/2015		7
Booker, Brian 14465 Stone Creek Court Sag (naw, MI 48603 . If over \$100.00 cumulative, please provide:	s 347.00	s 347.00
ccupationEmployer	Click Here for	Memo Itemization
ype of Contribution:		9
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7/30/2015	34743	
oleman, Hurley 587 Delta Drive	100.00	
over \$100.00 cumulative, please provide:	s 100.00	\$ 100.00
ccupation Employer	Click Here for N	Memo Itemization
siness Address		
Page Subtotal	477.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
e 3 of 114	Enter this total on line 3a of Summary	

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MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

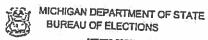
ITEMIZED CONTRIBUTIONS SCHEDULE 1A

SCHEDULE 1A 1. Committee I.D. N	umber2015010173	}
CANDIDATE COMMITTEE 2 Committee Name	Committee to Fle	ect Brian Booker St
Enter contributor's name and address. If contribution is from an Individual, enter last name, first na middle 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
Name & Address: 8/6/2015		I date of receipt)
Lawrence-Webster, Karen 219 Supervoo Sag Maw MJ 48 602 5. If over \$100.00 cumulative, please provide:	ş_25.00	_{\$} 40.00
Occupation Employer	Click Here t	or Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	-	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/6/2015		
	_	
Reynolds, Yolonda 2006 Sharp St Saginaw m I 48602	_{\$} 25.00	_{\$} 25.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
OccupationEmployer		TOTAL RESIDENCE
Business Address		•
Type of Contribution: Loan from a person V Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8/6/2015	9	
Tafel, Cathy 6701 Hart Rd Saginaw MI 48609 5. If over \$100.00 cumulative, please provide:	s 50.00	§ 50.00
	Onor Hele IO	Metrio itemization
Business Address		
Type of Contribution: Direct Direct	•	
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7/30/2015		
Hewitt, William 18100 Colony Farm Circle Plymouth MI 48170 i. If over \$100.00 cumulative, please provide:	_{\$} 20.00	ş_20.00
Occupation Employer	Click Here for I	Memo Itemization
Business Address	_	j
Type of Contribution: Direct Loan from a person Fund Raiser		
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Grand Total of All Schedules 1	<u> </u>	
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Enter this total on line 3a of Summary

Exhibit Page 6

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1. Committee I.D. Number 2015010173

CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Brian Booker She

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 Countribution.	ommittee to E	lect Brian Booker S
Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Beverly, Richard	45.00	
5. If over \$100.00 cumulative, please provide:	s_15.00	s 15.00
Occupation Employer	Click Here	for Memo Itemization
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser	50	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/6/2015		
Simon, Tawanya		
909 Oak Street	25.00	0=
5491mm MI 48602	s 25.00	ş 25.00
i. If over \$100.00 cumulative, please provide:	Click Here f	or Memo Itemization
Occupation Employer	Chok Here I	or ivierno itemization
Business Address		
ype of Contribution: ✓ Direct Loan from a person Fund Raiser		
. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8/6/2015		
Furner, Diane 04 Woodward Drive	_{\$} 6.00	ç 6.00
Saginary, MI 48601		-
If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
ccupation Employer usiness Address		
ype of Contribution: / Direct		
Contribution # 4		
me & Address 1730/2015		
ordan, Carla 45 S. Outer Drive		
Saginaw MI 48601	_s 25.00	25.00
If over \$100.00 cumulative, please provide:		3
cupation Employer	Click Here for	Memo Itemization
siness Address		
pe of Contribution: Direct Loan from a person Fund Ralser		i
	71.00	
Grand Total of All Schedules 1A	/ 1.00	
(Complete on last page of Schedule) L		
9of	Enter this total on line 3a of Summary Page.	

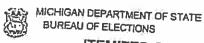


MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee L.D. Number 2015010173

CANDIDATE COMMITTEE 2. Committee Name	Committee to E	lect Brian Booker St
middle initial. Check box to indicate if contribution is from an individual, enter last name, first name. Committee (PAC) Report all contributions regardless of amount.	me, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through
Name & Address: Johnson, Freddie 3824 Chipping Norton Ct. Saginaw MI, 48603		date of receipt)
5 ag inaw MI 48603 5. If over \$100.00 cumulative, please provide:	_{\$} 70.00	_{\$} 70.00
OccupationEmployer Business Address	Click Here	for Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/6/2015	-	TV
Dale, Lorman 7258 Belle Medde 5+, 5. If over \$100.00 cumulative, please provide:	\$ 60.00	s 60.00
OccupationEmployer	Click Here	for Memo Itemization
Type of Contribution:	:	
Webb, Cecilia 3216 Walters Drive Saginaw, MI 4860/ 5. If over \$100.00 cumulative, please provide: Occupation Employer	\$ 25.00 Click Here fo	\$ 25.00 r Memo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7/30/2015		
Dillard, Christine 3135 Tausend 5+ Saginaw MI 48601 5. If over \$100.00 cumulative, please provide:	§ 50.00	_{\$_} 50.00
Occupation Employer	Click Here for	Memo Itemization
Type of Contribution:		
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		Exhibit Page 8



SCHEDULE 1A	1. Committee I.D. Number	2015010173	
CANDIDATE COMMITTEE	Co.		t Brian Booker She
Enter contributor's name and address. If contribution is from an individual, er middle initial. Check box to indicate if contribution is from a Political Committee (PAC) Report all contributions regardless of amount. 3. Contribution # 1 PAC Receipt? YES 4 Date of Receipt.	ter last name, first name, se or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Patterson, Maurice 4216 Parsons Walk	8/6/2015	ş.	cale of receipt)
5. If over \$100.00 cumulative, please provide:		s_20.00	\$ 20.00
Occupation Employer		Click Here for	Memo Itemization
Type of Contribution: Direct Loan from a person	und Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt E	40.7		4.0
Balls, Michael 20 Delray Street Saginaw, MZ 4860/ 5. If over \$400.00 cumulative, please provide:		ş 100.00	s 100.00
OccupationEmployer		Click Here for N	Memo Itemization
Business Address		F 12	
Type of Contribution: Direct Loan from a person F	und Raiser		\$
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8			
Tibbs, Demond	2210		
Saginawim I 4 8602	:	25.00	\$ 25.00
Occupation		Click Here for Me	mo Itemization
Business Address Type of Contribution: Direct Loan from a person Fu	nd Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 8/			
Gaddis, James 2701 E. Martin Luther Kin Saginau MI 48601 5. If over \$100.00 cumulative, please provide:		25.00 s	25.00
Occupation Employer		Click Here for Men	no Itemization
Business Address	94		100
Type of Contribution: Direct Loan from a person Fund	Raiser		

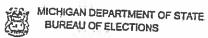
Page 7 of 14

Page Subtotal

170.00

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

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2015010173

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3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 8/25/2015 Zackrie, Carrie Jackson 8 0 7 0 T + a wa 9 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	SCHEDULE 1A 1. Committee	e I.D. Number 201501017	3
middle intitial. Check box to indicate if contribution is from an individual, enter last name, first name. Committee (PAC) Report all contributions regardless of amount. 3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 8/25/2015 Zackrie, Carrie Jackson S. If over \$400.00 cumulative, please provide: Cocupation Employer Flournoy, Athen S. If over \$400.00 cumulative, please provide: Cocupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution: Direct Loan from a person Fund Raiser 3. Contribution: Direct Loan from a person Fund Raiser Click Here for Memo Itemization occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution: Direct Loan from a person Fund Raiser Click Here for Memo Itemization occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution: Direct Loan from a person Fund Raiser 3. Contribution: Direct Loan from a person Fund Raiser 3. Contribution: Direct Loan from a person Fund Raiser 3. Contribution: Direct Loan from a person Fund Raiser 3. Contribution: Direct Loan from a person Fund Raiser 3. Contribution: Direct Loan from a person Fund Raiser 3. Contribution: Direct Loan from a person Fund Raiser Click Here for Memo Itemization occupation Employer Sag Inawa May 148633 S. If aver \$100.00 cumulative, please provide: Click Here for Memo Itemization occupation Employer Business Address Click Here for Memo Itemization occupation Employer	CANDIDATE COMMITTEE 2. Committee	Committee to Ele	ed Brian Booker C
Name & Address: Zackrie, Carrie Jackson Solution of the Wa Solu	Enter contributor's name and address. If contribution is from an individual, enter last name, middle initial. Check box to indicate if contribution is from a Political Committee or an indep Committee (PAC) Report all contributions regardless of amount.	first name, 6. Amount endent	7. Cumulative for Election Cycle for Each Contributor (Through
Zackrie, Carrie Jackson S	Name & Address: YES 4. Date of Receipt 8/25/201	15	I date of receipt)
Cocupation Employer Click Here for Memo Itemization Surveys Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/25/2015 Flournoy, Athen Surveys Address Flournoy, Athen Surveys Address Flournoy, Athen Surveys Address Flournoy, Athen Surveys Address Flournoy, Athen Surveys Address Flournoy, Athen Surveys Address Click Here for Memo Itemization Surveys Address Click Here for Memo Itemization Surveys Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution: Direct Loan from a person Fund Raiser 3. Contribution: Pack Address: Cabine, Melissa Ballentae Drive Surveys Address Surveys 100.00 Surveys 100.00 Surveys Address Click Here for Memo Itemization Click Here for Memo Itemization Currents Surveys 100.00 Survey	Zackrie, Carrie Jackson		<u>\$</u> _50.00
Business Address Type of Contribution: Pac Receipt? PAC Receipt? PAC Receipt 8/25/2015 Flournoy, Athen	Continuent	00-1-11	
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/25/2015 Flournoy, Athen 5863 Deep hirst Drive Saginaw mI it8638 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Cocupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution: Point Loan from a person Fund Raiser 3. Contribution: Pac Receipt? YES 4. Date of Receipt 8/22/215 Cabine, Melissa Ballentae Drive Saginaw mI 48603 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Click Here for Memo Itemization Click Here for Memo Itemization Click Here for Memo Itemization Cocupation Employer Business Address Click Here for Memo Itemization Cocupation Employer Business Address Click Here for Memo Itemization			for Memo Itemization
Flournoy, Athen 5863 Deep hirst Drive Saginaw mil 48638 5. If over \$100.00 cumulative, please provide: Occupation Employer_ Business Address Type of Contribution: Direct	Type of Contribution: Direct Loan from a person Fund Raiser		
5. If over \$100.00 cumulative, please provide: Occupation Employer Click Here for Memo Itemization Employer Click Here for Memo Itemization Employer Employer Fund Raiser Type of Contribution: Direct		2.7	
OccupationEmployer	509 IN aw MI 48638	-	
Business Address Type of Contribution: Direct		Click Here fo	or Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8/22/215 Cabine, Melissa Ballentae Drive \$100.00 \$100.00 Saginary MI 48603 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemizatio Occupation Employer			
3. Contribution #3 Name & Address: Cabine, Melissa 3883 Ballentae Drive Saginau m T 48603 5. If over \$100.00 cumulative, please provide: Cick Here for Memo Itemizatio Occupation Employer	Type of Contribution: Direct		
Cabine, Melissa 3883 Ballentae Drive Saginaw m I 48603 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address	3 Contribution #3	<u> </u>	
Occupation Employer Business Address Type of Contribution Employer	Cabine, Melissa 3883 Ballentine Drive Saginary MJ 48603		3
Business Address Type of Contribution File Contr	OccupationEmployer		World Remization
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 8/25/2015	Type of Contribution: Direct Loan from a person Fund Raiser		
Vinson, Brenda 2803 Adams Blud Saginaum T 48602 5. If over \$100.00 cumulative, please provide:	linson, Brenda 2803 Adams Blud Saginaw m I 48602		s_100.00
Occupation Employer Click Here for Memo Itemization	Promotion	Click Here for i	Memo Itemization
Business Address			
Type of Contribution: ✓ Direct Loan from a person Fund Raiser	Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Page Subtotal 275.00	Page	Subtotal 275 nn	
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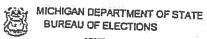
MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

Committee to Flect Brian Bookes

Enter contributor's name and address 15 and the state of	On Thicke to Life	or plight pooker Sik
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 8/27/2015		r date of receipt)
Howell, Russell 1 E. Hannum Blvd Saginaw MI 48602 5. If over \$400.00 cumulative, please provide:	_{\$} 50.00	_{\$} 50.00
Occupation Employer_	Click Here	for Memo Itemization
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser	< *	<i>3</i> .
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/27/2015		
Foxx, Juanita 3200 Murray Hill Drive 5cg Inaw MI4860/ 5. If over \$100.00 cumulative, please provide:	\$ 25.00	\$ 25.00
OccupationEmployer	Click Here fi	or Memo Itemization
Business Address		V 8
Type of Contribution: Direct Loan from a person Fund Raiser		25
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8/22/215		
Lawrence, Glendorah 2755 Claur mourt Prive Saginaw MI 48603 5. If over \$200.00 cumulative, please provide:	s 25.00 Click Here for	\$ 25.00
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 8/25/2015		
Manning, Beatrice 2619 Martin Luther King Blud E Saginaw, MI48601 5. If over \$100.00 cumulative, please provide:	§ 50.00	\$_50.00
Occupation Employer	Click Here for	Memo Itemization
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Page Sublotal	150.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
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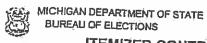


2015010173

Evhihit Page 12

Page.

1. Committee I.D. Numb	per2010010173	25
CANDIDATE COMMITTEE 2 Committee Name	Committee to Ele	ct Brian Booker Sh
chief 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
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 8/27/2015		date of receipt)
Williams Bettis, Ceylon	- ,	
Saginaw m I 4860 1 5. If over \$100.00 cumulative, please provide:	s_25.00	s 25.00
Occupation Employer	Click Here f	or Memo Itemization
Business Address		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/27/2015		
Platko, Gloria		
2374 S. Outer Drive	_{\$} 50.00	_s 50.00
Sagina MI 48601 5. If over \$100.00 cumulative, please provide:		3
OccupationEmployer	Click Here fo	r Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8/22/215		
Lawrence, Pauline	- 	
3486 Linger Lane Saginary, MI 48601	_{\$} 25.00	\$ 25.00
i. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
OccupationEmployer		TOTAL DESCRIPTION
usiness Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 8/25/2015		
Houston-Philpot, Kimberly 4706 Blossom Circle Midland MT 48642 If over \$100.00 cumulative, please provide:		
hidland in The	s 25.00	25.00
. If over \$100.00 cumulative, please provide:		\$
Occupation Employer	Click Here for I	Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
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Grand Total of All Schedules 1A		
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1. Committee I.D. Number 2015010173

CANDIDATE COMMITTEE

Committee to Elect Brian Booker Sh

CANDIDATE COMMITTEE 2. Committee Name	Committee to Ele	ct Brian Booker She
middle initial. Check box to indicate 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
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 9/5/2015		date of receipt)
Daniel Desmon		
3147 Setting Sun Blug		
Saginaw, MI 48603	50.00	s 50.00
5. If over \$100.00 cumulative, please provide:	\$	\$ 00.00
Occupation Employer	Click Here f	or Memo Itemization
Business Address	-	
Type of Contribution: I Disast		
2 Constitute 40		
Name & Address PAC Receipt? YES 4, Date of Receipt 9/5/2015		
Mosher, Michael		
300 5 Henry Street	, 20.00	00.00
Bay C. B. Wat	\$	s 20.00
300 S. Henry Street Bay Caty, MT 48706		V - V F
Occupation Employer	Click Here fo	r Memo Itemization
Business Address		j
Turn of Cookings [7]-		
Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8/22/215		
Jumer, John 33 Ardmore Lane	_ 	150.00
5. If over \$100.00 cumulative, please provide:	\$	s 150.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Retired Employer Urban League	or stand the	TEATHER STORY
Business Address N/A		
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution #4		<u> </u>
lame & Address YES 4. Date of Receipt 8/25/2015	8	
Ruth, Carl		
1432 Cedar Street	100.00	
Saginawi MI 48601	s 100.00	s_100.00
i. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here for N	lemo Itemization
Business Address		
Type of Contribution: V Direct Loan from a person Fund Ralser	£ 50	
Page Subtofal	1000.00	1
	320.00	
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geor_L	line 3a of Summary Page.	
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MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number 2015010173

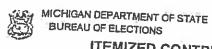
CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Brian Booker She

CANDIDATE COMMITTEE 2. Committee Name	Committee to Ele	ect Brian Booker S
middle Initial. Check box to Indicate if contribution is from an Individual, enter last name, first name Committee (PAC) Report all contributions regardless of amount.	e, 6. Amount	7. Cumulative for Election Cycle for Fact
3. Contribution # 1 PAG Receipt? YES 4. Date of Receipt 9/25/2015 Jenkins, Marvin	73	Contributor (Through date of receipt)
923 Canterbury Drive Sag inaw, mI 48638 5. If over \$100.00 cumulative, please provide:	s 50.00	_{\$} 50.00
OccupationEmployer	Click Here	for Memo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9/25/2015	8	4
Booker, Brian 4465 Stone Creek Cout Saginawi MI 48603 5. If over \$100.00 cumulative, please provide:	_s _150.00	s 497.00
Occupation Employer	Click Here fo	r Memo Itemization
Business Address Type of Contribution: ✓ Direct Loan from a person Fund Raiser 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt Contribution # 3		_
Turpin, Roger and Karen 3318 Gretchen St Saginaw MI 4860/ 5. If over \$100.00 cumulative, please provide:	\$ 100,00 Click Here for	s 100.00 Memo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4		
Name & Address Holoman, Linda 5812 Inverness Circle Midland, MI 48642 5. If over \$100.00 cumulative, please provide:	_{\$} 25.00	s_25.00
Occupation Employer	Click Here for M	lemo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	325.00	

Page 12 of 14

Enter this total on line 3a of Summary Page.



1. Committee I.D. Number 2015010173

CANDIDATE COMMITTEE

CANDIDATE COMMITTEE 2. Committee Name	Committee to FI	ect Brian Booker S
region initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount. 3. Contribution # 1	6, Amount	7. Cumulative for Election Cycle for Eac Contributor (Through
Marine & Address: 10/6/2015		date of receipt)
Lawrence-Webster, Karen		Na.
219 Superior		
5. If over \$100.00 cumulative, please provide:	_{\$} 50.00	s 90.00
Occupation Thomas A A Vo 11.	Click Here	for Memo Itemization
Business Address 4800 Fashus Square Blad Steel Type of Contribution: Direct Loan from a person Find Polena	220 Sagu	
Type of Contribution: V Direct Loan from a person Fund Raiser	eo agu	icu m7
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/6/2015		48602
	- 93	
Patterson, Rudy		
1823 Handley	, 100.00	, 100.00
5. If over \$100,00 cumulative, please provides	3	\$ 100.00
produce:	Click Have to	
Occupation Employer	Click Lete 10	r Memo Itemization
Business Address		
ype of Contribution: ✓ Direct Loan from a person Fund Raiser		
Contribution #3		
ame & Address: YES 4. Date of Receipt 10/20/2015		
ivis, Tierra		
5191 Gatesborn Dr 5	_s 50.00	00
5191 Gatesboro Dr. 5 Saginaw, MI 48603	\$ 00.00	_{\$} 50.00
If over \$100.00 cumulative, please provide:	Click Hora for	Maria D. J. J.
cupationEmployer	Chek Hele tor	Memo Itemization
siness Address		
pe of Contribution: Direct	4	
Contribution #4 PAC Parties I		
ne & Address 4. Date of Receipt	RN	
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		4.0
	s	
f over \$100.60 cumulative, please provide:		\$
Cupation	Click Here for M	lemo Itemization
Linbioyet	OHOW I ICHE TOT IN	remo itemization
iness Address		1
pe of Contribution: V Direct Loan from a person Fund Raiser		[
Page Subtotal 2	200.00	
Grand Total of All Schedules 14		
(LUMPIRE NO SIRIUM)	Folorithia to the	
13 of 14	Enter this total on ine 3a of Summary	
f	age	11.10



2015010173 1. Committee I.D. Number

CANDIDATE COMMITTEE Committee to Elect Brian Booker She 2. Committee Name 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 5. Amount 7. Cumulative for Committee (PAC) Report all contributions regardless of amount. Election Cycle for Each Contributor (Through 3. Contribution # T PAC Receipt? date of receipt) 4. Date of Receipt 8/6/2015 Name & Address: Ogg, Trisha 465.00 Occupation Click Here for Memo Itemization Employer, **Business Address** Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address Ogg, Trisha 1085 s 620.00 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation. Employer_ Business Address_ Type of Contribution: Direct Loan from a person **Fund Raiser** Contribution # 3 PAC Receipt? 4. Date of Receipt 9/29/2015 Name & Address: Ogg, Trisha s 90.00 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation **Employer Business Address** Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? 4. Date of Receipt Name & Address If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation Employer _ **Business Address** Type of Contribution: Direct Loan from a person Fund Raiser

> Page Subtotal 1.175.00 Grand Total of All Schedules 1A (Complete on fast page of Schedule)

3.888.00

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Page.

14 14 Page of



ITEMIZED OTHER RECEIPTS SCHEDULE 1A-1

CANDIDATE COMMITTEE

1. Committee I.D. Number 20150101736

3. Name & Address From Wh		2 Committee Name Committee to Elect Brian Bo	POVE
Receipt #1 Name & Address:	Date of Receipt	Loan from a Lending Institution	mount
19) 92			
	9 4	Interest \$	3.0
		Refund Rebate Click for Memo Itemiza	ition Tvr
Receipt #2	Fund Raiser	Other (Specify)	
Name & Address:	Date of Receipt	Loan from a Lending Institution	
		Interest \$	
		Refund Rebate Click for Memo Itemiza	ition Typ
	Fund Raiser	Other (Specify)	
Receipt #3	Dale of Receipt		
lame & Address:	Bale of Receipt	Loan from a Lending Institution	
		Interest \$	
		Refund Rebate Click for Memo Itemizat	lion Typ
	Fund Raiser	Other (Specify)	
leceipt #4 lame & Address:	Date of Receipt		
	·	Loan from a Lending Institution	
		Interest 5	
			ion Type
natat MC	Fund Raiser	Other (Specify)	
ceipt #5 me & Address:	Date of Receipt	Loan from a Lending Institution	
		Interest S	-
		Refund Rebate Click for Memo Itemizati	on Type
	Fund Raiser	Other (Specify)	
elpt#6	Date of Receipt		
me & Address:		Loan from a Lending Institution	
•		Interest S	
		Refund \Rebate Click for Memo Itemization	п Туре
	Fund Raiser	Other (Specify)	
lipt #7 e & Äddress:	Date of Receipt		
a a nadicas,		Loan from a Lending Institution	
		S	
		Interest	
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	Fund Raiser	Other (Specify)	
		Page Subteful	
7			
		Grand Total of All Schedules 1A -1 (Complete on last page of Schedule)	
		(, 3, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5,	
1 (Enter this line 4 of 5	



ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK

1. Committee I. D. Number 20150101736

CANDIDATE COM	IMITTEE 2 Committee Name Committee to Fle	ct Brian Booker 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). Report all in-kind contributions.	Type of In-Kind Contribution (Check applicable box) Date of Receipt	7. Amount or Fair Market Value 8. Cumulative for Election Cycle (Through date in Item 5
Contribution # 1 PAC Receipt? Ye Name & Address: Joiner, Will O Z O N . Ways ide Sag In aw MI 48 603 If over \$100.00 cumulative, please provide. Cocupation: Employer Name & Business Address:	Goods Donaled or Loaned Services Donaled Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description Tent for Announcement 5. Date Of Receipt: 7/28/	100.00 \$ 100.00
Fund Raiser Contribution Contribution # 2 PAC Receipt? Yes Name & Address	4. Endorsement or Guarantee of Bank Loan	ick Here for Memo Itemization
Joiner, Jerusha 4020 /V Way Side Sagnaw MI 4860 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Goods or Services Purchased by Candidate or Others- LOAN Description Tent for Announcement 5. Date Of Receipt: 7/28/20/5 6. Vendor Name & Address:	00.00 \$ 100.00
Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Name & Address: Hibbard, Terri	Sag Incom, m I 48603 4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated \$ 200 Goods or Services Purchased by Candidate or Others	
The state of Augusta,	Goods or Services Purchased by Candidate or Others- LOAN Description 8 tickets for Union Civica banquet 5. Date Of Receipt: 6. Vendor Name & Address: Click	k Here for Memo Itemization
Fund Raiser Contribution	Page Subtotal	400.00
Page 1 at 3	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	400.00 400.00 Enter this total on line 6 of Summary Page



Page 2 of 3

ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK

1. Committee I. D. Number 20150101736

CANDIDATE COM	MITTEE 2. Committee Name	Committee to Fler	t Brian Booker 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 5. Date of Receipt 6. Name & Address of Vendor from who purchased	applicable box)	7. Amount or Fair Market Value 8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: Hibbard, Terri PAC Receipt? Yes Page & Address: Hibbard, Terri PAC Receipt? Yes Name & Address: Hibbard, Terri PAC Receipt? Yes Name & Ell Receipt Yes Name & Ell	Goods or Services Purchased by Ca	Services Donated sindidate or Others Indidate or Others-LOAN	59.36 \$ 259.36
Saginaw MT 48603 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: Refugal	4. Endorsement or Guarantee of Bai Goods Donated or Loaned Sel Goods or Services Purchased by Cal Goods or Services Purchased by Cal Description Democrat party bar 5. Date Of Receipt: 9///6 6. Vendor Name & Address:	rvices Donated Indidate or Others \$ 45 Indidate or Others LOAN	130 .00 \$ 45.00
Name & Address: Ogg, Allan 5/80 McCartyRd	Goods or Services Purchased by Cand	ank Loan ces Donated \$ 42.6	Here for Memo Remization 17.2.62 2.87.62
Employer Name & Address: Latred 5.	Goods or Services Purchased by Cand Description 8 tickets for Union C Date Of Receipt: 0/ / / 6 Vendor Name & Address:	ivica banquet Co	parade parade lere for Memo Itemization
	Grand To (Complete o	Page Subtotal 1. Otal of all Schedules 1-IK n last page of Schedule)	46.98

Enter this total on line 6 of Summary Page



ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK

OOTTEDGEL		
CANDIDATE COM	MITTEE 2. Committee Name Committee to Ele	ect-Brian-Booker 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 FACs). Report all in-kind contributions. 	Type of In-Kind Contribution (Check applicable box) Date of Receipt	7. Amount or 8. Cumulativ for Election
Contribution #1 PAC Receipt? Ye	s 4. Endorsement or Guarantee of Bank Loan	
Name & Address: Lawrence-Webster, Karen 219 Superior Saginaw mI 486	Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others	15.00 _s 16.00
Occupation: Thancal Adviso Employer Name & Business Address:	Description Thank you Notes 5. Date Of Receipt: 8/1/2015	
AXA Havisors 4800 Fashun Square Sagnaw Fund Raiser Contribution	6. Vendor Name & Address: (13/10) MI-4860 4	lick Here for Memo Itemization
Contribution # 2 PAC Receipt? Yes		**************************************
Name & Address Hibbard Terri	4. Endorsement or Guarantee of Bank Loan Goods Donaled or Loaned Services Donaled	30.00 s 289.36
7740 Bell Road	- Candidate of Others	\$ 209.30
Birch Run, MI 48416 If over \$100.00 cumulative, please provide: Occupation:	Goods or Services Purchased by Candidate or Others- LOAN Description PRIDE parade entry fee	
Employer Name & Address:	5. Date Of Receipt: 10/1/2015	
80 W 100	6. Vendor Name & Address:	
Fund Raiser Contribution	Cli	ck Here for Memo Itemization
Contribution #3 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan	
Name & Address:	Goods Donated or Loaned Services Donated \$	
	Goods or Services Purchased by Candidate or Others	\$
If over \$100.00 cumulative, please provide:	Goods or Services Purchased by Candidate or Others- LOAN	
Occupation:	Description	
Employer Name & Address:	5. Date Of Receipt:	
State of Michigan	6. Vendor Name & Address:	hat a second
Saginaw, Michigan	Cito	k Here for Memo Itemization
C .,gan		
Fund Raiser Contribution		
	Page Subtotal	45.00
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MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

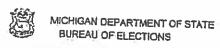
ITEMIZED IN-KIND EXPENDITURES SCHEDULE 1B - IK

CANDIDATE COMMITTEE

20150101736

1. Committee I. D. Number Committee to Flect Brian Booker Shari

Name and Address of person to whom goods or services were donated or transferred.	2. Committee Name Committee to Elect Brian 4. Type of In-Kind Expenditure (Check approximately 1997) 5. Date:	6. Fair Mar
Expenditure #1 Name & Address:	Donation of goods or services to a Railet	Value
	Question Committee Donation of assets to tax exempt charitable Institution Date Donation of assets to Political Party Committee	\$
	Other	o Itemization Type
Expenditure #2		
Name & Address:	Donation of goods or services to a Bailot Question Committee Donation of assets to tax exempt charitable institution	\$
	Donation of assets to Political Party Committee Other Click Here for Memo	Itemization Type
xpenditure #3	4. Donation of goods or services to a Rully	- 11
łame & Address:	Question Committee Donation of assets to tax exempt charitable institution	s
	Date Date Other Description:	Itemization Type
penditure #4		
me & Address:	Donation of goods or services to a Ballot Question Committee Donation of assets to tax exempt charitable Institution Data Donation of assets to Political Party Committee	\$
	Other Click Here for Memo I	temization Type
enditure #5 ne & Address:	Donation of goods or services to a Ballot Question Committee Donation of assets to tax exempt charitable institution	s
	Date Donation of assets to Political Party Committee Other Click Here for Memo II	emization Type
	Description:	
	Page Subtotal	0
	Grand Total of all Schedules 1B-Ik (Complete on last page of Schedule)	0
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EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES SCHEDULE 1 B - G

1. Committee (D. Number 20150110736

Exhibit Pade 22ry Page

CANDIDATE	1. Committee I.D. Number 20100	110730
CANDIDATE COMMITTEE	Committee	to Elect Brian £
USE THIS FORM TO REPORT EXPENDITURES MADE FOR CHALLENGERS, POLL WATCHERS, POLL WORKERS, AN		
CHALLENGERS, POLL WATCHERS, POLL WORKERS, AN HEM 4f. ALL EXPENDITURE	D GET-OUT-THE VOTE ACTIVITY. Describe the specific	S, FOR SLATE CARDS,
Name and address of person or vendor to whom the		to oct-out-file-vote activity if
expenditure was made	4. Type of Activity.	5. Date 6. Amo
Expenditure #1	8. Election Day Busing of Volum To The Day	5. 56.C
Name & Address:	a. Election Day Busing of Voters To The Polls	
1	b State Cards c. Challengers	
}	b. Slate Cards c. Challengers	
	d Poll Watchers e Poll Workers	
	d. Poll Watchers e. Poll Workers	dr.
		Date
	f. Get-Out-The Vole Activity (Specify):	- 4.0
2 5:		
For Activity Type b-f, check one:	Click	Here for Memo Itemization Ty
In-Kind Independent		
	Charle San Jesus Bullion	
if in support of, or in opposition to, a ballot proposal, check one:	Check box if this expenditure is payment of debt or obligation reported on previous statement	
	and or abigation reported on previous statement	
Support Oppose		
m. 1. m		
Statewide Proposal Name	Local Proposal Name Ind	landa Ø
Expenditure #2	Ind	icate County
Name & Address:	a. Election Day Busing of Voters To	
	The Polls	
	b. Slate Cards c. Challengers	
	d. Poll Watchers e. Poll Workers	\$
		Date
	f. Get-Out-The Vote Activity (Specify):	
For Activity Type b-f, check one:	Click H	ere for Memo Itemization Type
In-Kind Independent		
	Charles Server	
If in support of, or in opposition to, a ballot proposal, check one:	Check box if this expenditure is payment of debt or obligation reported on previous statement	
Support Oppose	Tost of conganott reported on previous statement	
Statewide Proposal Name		
xpenditure #3	cal Proposal Name Indicate	Gounty
experiorure #3		
militio de Participas,	a. Election Day Busing of Voters To	
	b. Slate Cards c. Challengers	
	d. Poli Watchers e. Poli Workers -	\$
		Pold
or Activity Type b-f, check one:	f. Get-Out-The Vote Activity (Specify):	
	Click He	re for Memo Itemization Type
In-Kind Independent		,,-
f in support of, or in opposition to, a ballot proposal, check one:	Check box if this expenditure is payment of	
Support Oppose Oppose	debt or obligation reported on previous statement	
plantide floore at Manager		
atewide Proposal NameLo	ical Proposal Nameindic	ate County
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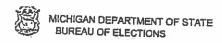
INCIDENTAL OFFICE EXPENSE **DISBURSEMENTS** SCHEDULE 1C

1. Committee I. D. Number	20150101736

· · · · · · · · · · · · · · · · · · ·	. Committee Name	Committee to El	ect Brian Bo	ooker
3. Name and address of person to whom disbursement was made	4. Description (Be specific disburseme	n of Disbursement : & you may assign a ent code*)	5. Date	6. Amount of Disbursemen
Disbursement # 1 Name & Address;	Purpose			
			Date Cilck for Memo	\$lternization Type
Check box if this disbursement is payment of debt or obligation reported on previous statement Disbursement # 2 Name & Address;	Disbursement Co Fund R	deaiser		
			Date	s
Check box if this disbursement is payment of debt or obligation eported on previous statement	Disbursement Cod		Click for Memo It	emization Type
lisbursement # 3 lame & Address:	Purpose	<u>-</u>	20	
* al			Date	\$
		. (Click for Memo Ite	mization Type
Check box if this disbursement is payment of debt or obligation ported on previous statement	Disbursement Co	de		
ibursement # 4 ime & Address:	Purpose			
		·	Date Click for Memo Ite	\$ mizalion Type
Check box if this disbursement is payment of debt or obligation orted on previous statement.	Disbursement Code			
			ubtotal this page	0
SE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CO	DES	(Complete on last page	all Schedules 1C age of Schedule)	Enter this total on line 10a of Summary Page

*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; incidental Office Expense Disbursements ONLY



DEBTS AND OBLIGATIONS	1. Committee I.D. Number 2015	0101736		
SCHEDULE 1E				
CANDIDATE COMMITTEE	2. Committee Name Committee	to Elect Brian D.	Booker	
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the	(Check either a or b. Use only for the or	is and obligations owed <u>to</u> o upose checked.)	r forgiven <u>by</u> the co	mmittee.
Name and Mailing Address of person, vendor of financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, ple provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was	7. Date and amount of each payment	8. Cumulative payment to dale on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by;	. 4. Туре:	s		
*	5. Date Debt Was Incurred:	s		ļ.
	6. Original Amount of Debt:		s	\$
	s	<u> </u>		FORGIVEN
If bank loan, name of endorser or guarantor:		<u> </u>		
Debt #2 Corp? Yes		Amo	unt Endorsed: \$	
Owed to or by:	4. Type:	\$		3
	J. Date Deut Was incurred;	\$		
	6. Original Amount of Debt:	<u> </u>	s	\$
	\$	<u>\$</u>		FORGIVEN
If bank loan, name of endorser or guarantor.				
Debt #3 Com? Vec	T	Amo	ount Endorsed: \$	
Owed to or by:	4. Type:	s	1	
	5. Date Debt Was Incurred:	s		
	6. Original Amount of Debt:	\$		\$
	5	5		FORGIVEN
If bank loan, name of endorser or guarantor:		\$ =		
		Ame	ount Endorsed: \$	
		Page Subtotal (Outstanding debt)	0
	(Complete on last page of Schedule sho	Grand Total of owing armounts owed by or	all Schedules 1E to the committee)	0
A debt or obligation must be shown on this Sche this Campaign Statement or It was forgiven durin	edule if there was an outstanding among the period covered by this Campai	ount owed on it at the closing Statement.	ing date of	Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page



FUND RAISER SCHEDULE 1F 1. Committee I.D. Number 20150101736

CANDIDATE CO	OMMITTEE 2. Cor	nmittee Name Committee to E	lect Brian Booker Of Just
	- USE A SEPARATE SH	EET FOR EACH EVENT -	cor brian booker Sheriff
3. Date Event Was Held	Number of Individuals Attending or Participating (whichever is	5. Type of Fund Ralsing Activity	6. Address and Name (If -)
08/27/15	greater)	W.	place where the activity was held. 219 Superior
	25	Meet and Greet	
7. Total Contributions	\$350.00	0 0	Y Private Residence
8, Other Receipts	\$0.00	- N	
9. Gross Receipts (Add lines 7 ar	nd 8) \$350.00	6	
10. Total Cost of Event (Total Cost includes In-Kind Conf	\$250.00		:
11. Check if event was a join	it fund raiser and complete the	Made For the Eventy	
Co-Sponsor(s)			
55 Sportosi(5)	Contribution Sp (%)	lit	Expenditure Split (%)
	=		
			
		<u></u>	
			
Schedule (1A), Itemized In- Summary Page.	listed on a Fund Raiser Sched Kind Contributions Schedule (Schedule for each fund raising e ule must also be reported on the 1-IK), Itemized Expenditures Sci t file a Fund Raiser Schedule fo	e Itemized Contributions
aof_3		repar concedit in	i uie even(.



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE		F 1. Cor	1. Committee I.D. Number 20150101736			
		2. Con	2. Committee Name Committee to Elect Brian Booker Sheriff			
	- USE A S	EPARATE SH	EET FOR EACH EVENT			
3. Date Event Was Held	Number of Informating greater)	dividuals Attending	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held.		
08/27/15		50	Meet and Greet	Borchard Park		
			West and Greet	Private Residence		
7. Total Contributions	\$2	220.00				
8. Other Receipts	\$0	0.00				
9. Gross Receipts (Add lines 7 a	nd 8) \$2	20.00		.47		
10. Total Cost of Event (Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)				4		
The committee is required period covered by the Car	to file a sepa	Contribution Sp (%)	Schedule for each fund raising	Expenditure Split (%)		
Receipts and expenditure	listed on a E	and Determine	Schedule for each fund raising dule must also be reported on (1-IK), Itemized Expenditures 5			

Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.



FUND RAISER SCHEDULE 1F

1. Committee I.D. Number 20150101736

CANDIDATE COM	MITTEE 2 Com	Committee to 5	Elect Brian Booker Sheriff
- [USE A SEPARATE SH	EET FOR EACH EVENT	Lieut Brian Booker Sheriff
4.	Number of Individuals Attacks		
col. / - core	Participating (whichever is safer)	5. Type of Fund Raising Activity	Address and Name (If any) of the place where the activity was held.
-07/01/15 8/1/2015			NA
	na 	T-Shirts	
7 Total Cartillan	\$1,175.00		Private Residence
7. Total Contributions	Ψ1,175.00		
8. Other Receipts	\$0.00	· 	
9. Gross Receipts (Add lines 7 and 8	\$1,175.00	51	
10. Total Cost of Event	\$1,127.84		ii.
(Total Cost includes In-Kind Contribu	itions and All Expenditures I	Made For the Event)	
11. Check if event was a joint fur	nd raiser and complete the f	ollowing.	
Ca-Sponsor(s)			Y NE
, -	Contribution Spl (%)	lit.	Expenditure Split
			(%)
			
	5 8		00 11
The committee is required to fit period covered by the Campaig	le a separate Fund Raiser S	chadula foi t. c	
"CUCIDIS 200 PYDADDITURAS CAL	edian a cultura a		
Receipts and expenditures liste Schedule (1A), Itemized In-Kind Summary Page.	eu on a Fund Raiser Schedu d Contributions Schedule (1	le must also be reported on the	e Itemized Contributions
	•	A TANADA TABOLIGICA CO	DEDUKE CIBL and the
Each committee that participate	a joint lund raiser must	file a Fund Raiser Schedule fo	or the event.



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

20150101736

CANDIDATE COMMITTEE 2. Committee Name Committee to Flect Brian Booker Sheriff				
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount	
Expenditure #1 Name Lawrence-Webster, Karen Address 219 Superior Saginaw, Michigan Fund Ralser Expenditure #2	Purpose: T-Shirts Ctick Check box if this expenditure is payment of debt or obligation reported on previous statement		\$ 584.00	
Name Sandlot Sports Address 9790 Gratiot Saginaw, Michigan Fund Raiser Expenditure #3	Purpose: T-Shirts Click Check box if this expenditure is payment of debt or obligation reported on previous statement		\$ 508.80	
Name Saturday Travlers Address 1080 River Forest Drive Saginaw, Michigan Fund Raiser	Purpose: Advertisement. Click For Check box if this expenditure is payment of debt or obligation reported on previous	8/10/20: Date	\$ 125.00	
Expenditure #4 Name U. S. Postmaster Address Saginaw, Michigan Fund Ralser	Purpose: Stamps Click H. Check box if this expenditure is payment of debt or obligation reported on previous statement	8/10/20 Date	\$ 98.00 emization Type	
Expenditure #5 Name Lawrence-Webster, Karen Address Fund Raiser	Purpose: Printed Materials	8/10/20: Date	\$ 30.00	
	Subtot Grand Total of all S (Complete on last page	chedules 18	1,345.80	

Enter this total on line 8a of Summary Page

Exhibit Page 28



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Brian Booker Sheriff

Name and address of person or vendor to whom paid	2. Committee Name Committee to Elect I	3rian Book	er Sheriff
Expenditure #1	4. Purpose (Required Information)	5. Date	6. Amount
Name NAACP		100	
Address		8/31/20:	. 000 6-
Saginaw, Michigan	Purpose: Advertisement	Date	\$ 200.00
- Jaginaw, Michigan	Cual		
	Check boy if this owner for	nere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	*	
Expenditure #2	sidienest		
Name US Postmaster	į.	0.00 4.1-	
Address	B 0 5	8/31/20:	s 33.00
Saginaw, Michigan	Purpose: P. O. Box rental	Date	
	Cilab L	dam for the	
	Check box if this apposed to	iera iot wawo [lemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3	aratement		
Name Sandlot Sports		1	9
Address		9/5/201	0.000.00
Saginaw, Michigan	Purpose: T-Shirts	Date	\$ 265.00
- Managan	C9-4-11		
	Luleck box if this exponditure to	ere for Memo Ite	mization Type
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4	1 Statement		
Lawrence-Webster, Karen			
Address	9)/6/20 1	n 004 nn
219 Superior	Purpose: Signs/Business Cards	Date	\$ 334.83
Saginaw, Michigan			
30 to 120	Click Her	e for Memo Item	nization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
penditure #5	statement statement		
Sandlot Sports			
ddress	0	16/20:	
1937	Purpose: T-Shirts	Date Date	\$ 619.04
aginaw, Michigan			
		for Memo Itemi	ization Type
Fund Raiser	debt or obligation reported on previous statement		
	- American		
	Subtotal II	nis page 1	451.87
	Grand Total of all Sche	dules 18	
	(Complete on last page of S	ichedule)	
		Ent	er this total

Page A of 4

Enter this total on line 8a of Summary Page Exhibit Page 29



Page 3 of 4

ITEMIZED EXPENDITURES SCHEDULE 1B

1, Committee I. D. Number

20150101736

CANDIDATE COMMITTEE	Committee to Flect Br	ian Book	er Sheriff
3. Name and address of person or vendor to whom paid	4. Purposa (Required Information)	5. Date	6. Amount
Expenditure #1			
Address Saginaw County Democratic Party Address Saginaw, Michigan	Purpose: Advertisement	9/30/20: Date	s 50.00
oughter, mongan	Click)	lere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2	1		
Name Diamond Harris	Madati O	9/30/20:	\$ 325.00
Address	Purpose: Marketing Services	Date	
Saginaw, Michigan	Click H	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		1.
Expenditure #3			
Name Staples		9/30/20	s 113.88
Address	Purpose: Car Magnets	Date	8
Saginaw, Michigan	Click He	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4	Sisternate		
Name Saginaw County Democratic Party		9/6/201	98
Address	Purpose: Advertisement	Date	\$ 100.00
Saginaw, Michigan	Click He	ere for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name Copy Quick		10/6/20:	
Address	Purpose: Printed Material	Date	\$ 15.00
Saginaw, Michigan		ere for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	- S. S. S.	
	Subtota	al this page	603.88
	Grand Total of all So (Complete on last page of		

Enter this total on line 8a of Summary Page

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ITEMIZED EXPENDITURES SCHEDULE 1B

t. Committee I. D. Number 20150101736

CANDIDATE COMMITTEE 2. Committee Name Committee to Elect Brian Booker Sheriff 3. Name and address of person or vendor to whom paid 4. Purpose (Required Information) 6. Amount Expenditure #1 Name Walmart s 6.12 Address Purpose: Supplies Saginaw, Michigan Click Here for Memo Itemization Type Check box if this expenditure is payment of Fund Raiser debt or obligation reported on previous statement Expenditure #2 Name Diamond Harris s 325.00 Address Purpose: Marketing Services Saginaw, Michigan Click Here for Memo Itemization Type Check box if this expenditure is payment of Fund Raiser debt or obligation reported on previous statement Expenditure #3 Name US Postmaster Address \$ 29.40 Purpose: Stamps Saginaw, Michigan Click Here for Memo Itemization Type Check box if this expenditure is payment of Fund Raiser debt or obligation reported on previous statement Expenditure #4 Name Address Purpose: Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous ☐ Fund Raiser statement Expenditure #5 Name Address Click Here for Memo Itemization Type Check box if this expenditure is payment of Fund Raiser debt or obligation reported on previous statement Subtotal this page 360.52

> Grand Total of all Schedules 1B (Complete on last page of Schedule)

Enter this total on line 8a of Summary Page

Bann 4 . 4



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

August 26, 2016

Brian D. Booker 4465 Stone Creek Court Saginaw, Michigan 48603

Dear Mr. Booker:

The Department of State (Department) has completed its investigation of the complaint filed against you by Joseph Tomczyk, which alleged certain violations of the Michigan Campaign Finance Act (MCFA or Act), 1976 PA 388, MCL 169.201 *et seq*. This letter concerns the disposition of Mr. Tomczyk's complaint.

Mr. Tomczyk filed his complaint on May 9, 2016. You filed a written response on June 1, 2016, and Mr. Tomczyk did not file a rebuttal statement with the Department.

The Act requires candidates to file periodic campaign finance statements and reports. MCL 169.233. The failure to file a single campaign statement may trigger late filing fees. MCL 169.233(7).

The MCFA also requires filed campaign finance statements and reports to be complete and accurate. MCL 169.233. A candidate who knowingly files an incomplete or inaccurate statement or report may be subject to a civil fine of up to \$1,000.00. MCL 169.233(10). A candidate who knowingly omits or underreports a contribution or expenditure may be subject to a civil fine of up to \$1,000.00, or the amount of the undisclosed contribution or expenditure, whichever is greater. MCL 169.233(11).

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

Mr. Tomczyk alleged that on your 2015 October campaign finance statement you failed to list contributors' addresses; failed to list cumulative contributions for Trisha Ogg, Allen Ogg, and Karen Lawrence-Webster; failed to list dates of receipt, contributors' addresses, and vendors names and address for in-kind contributions; and failed to list the occupations and employer names and addresses for Allen Ogg and Karen Lawrence-Webster. Mr. Tomczyk further alleged that you reported holding a fund-raiser on July 1, 2015, which triggered the need for your committee to file a 2015 July campaign finance statement, which you failed to file.

Brian D. Booker August 26, 2016 Page 2

In your response you indicated that these omissions were oversights, and you provided an amended 2015 October campaign statement to the Department. This amended report appears to contain all of the required information.

Additionally, you amended the report to reflect that the fundraiser originally reported with a July 1, 2015 date actually occurred on August 1, 2015. This August date appears plausible based on the dates reported for some of your contributions or expenditures. In particular, you have stated that this fundraiser involved t-shirts and your original filing reported an expenditure for those shirts on August 1, 2015. Because no evidence has been provided to the Department to the contrary, the Department takes you at your word that this fundraiser actually occurred on August 1, 2015.

Based on your amended report, it appears that your committee made its first contribution or expenditure on July 24, 2015. The closing date for the 2015 July campaign finance statement was July 20, 2015. Because the committee's first contribution or expenditure occurred after that date, you did not owe the 2015 July campaign finance statement. Therefore, this portion of Mr. Tomczyk's complaint is dismissed.

The evidence does support a reason to believe that your original 2015 October campaign statement was incomplete. However, when the omissions of addresses, employers, vendors, dates, and cumulative amounts were brought to your attention, an amended campaign statement addressing these omissions was promptly provided to the Department.

Because these alleged violations were quickly corrected, in accordance with the Department's authority to informally resolve complaints through corrective action, MCL 169.215(10), the Department now issues this warning letter.

The Department is advising you that section 33 requires you to timely file complete and accurate campaign finance statements and reports which disclose all contributions and expenditures made during the reporting period. Please be advised that this notice has served to remind you of your obligation under the Act to file complete and accurate statements, and may be used in future proceedings as evidence that tends to establish a knowing violation of the Act. A candidate who knowingly files an incomplete or inaccurate statement or knowingly omits or underreports a contribution or expenditure may be subject to civil fines of up to \$1,000.00 or the amount of the undisclosed contribution or expenditure, whichever is greater. MCL 169.233(10), (11).

The Department further notes that it is not the proper filing official for your 2015 Amended October statement. The Department contacted the Saginaw County Clerk who confirmed that this statement had not, as of this writing, been filed with her office. The Department directs you to file your amended statement with the Saginaw County Clerk and to provide the Department with a date-stamped copy or some other receipt from the County Clerk's office which provides evidence of the filing. Once you have filed your amended statement with the County Clerk and provided this evidence, the Department will consider this matter closed.

¹ The Saginaw County Clerk is the proper filing official for a candidate for an office voted on wholly within Saginaw County. MCL 169.236(6).

Brian D. Booker 'August 26, 2016 Page 3

Finally, the Department is aware that you were not successful in the primary election and suggests that you may want to take the steps necessary to dissolve your committee if you have not already done so to avoid needing to file any further required statements.

Sincerely,

Lori A. Bourbonais Bureau of Elections

Michigan Department of State

Bombonas

c: Joseph J. Tomczyk