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

May 16, 2016

William Federspiel
2159 Manchester Drive
Saginaw, Michigan 48609

Dear Sheriff Federspiel:

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 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).

The Act further prohibits a committee from accepting or expending an anonymous contribution. MCL 169.241(2). A knowing violation of this section is a misdemeanor punishable by a fine up to $1,000.00, imprisonment for up to 90 days, or both. MCL 169.241(4).

The MCFA also prohibits a corporation or labor organization from making a contribution to a committee other than a ballot question committee. MCL 169.254. A knowing violation of this section is a felony, punishable by a fine of not more than $5,000.00 or imprisonment. MCL 169.254(4). Additionally, Michigan Administrative Rule 169.35 prohibits the treasurer of a committee, other than a ballot question committee, from accepting a contribution written on a check from a corporate account. A person who violates this provision may be subject to a civil fine of up to $1,000.00 per violation plus triple the amount of each improper contribution. MCL 169.215(11), (15).

Mr. Tomczyk alleges that you have filed incomplete or inaccurate reports and that you have accepted contributions from prohibited sources.

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 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, conducting an administrative hearing, or referring this matter to the Attorney General for enforcement of the criminal penalty provided in section 41(4) of the Act.

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

Michigan Department of State
Campaign Finance Complaint Form

Reset Form

2016 MAY -9 PM 4:13

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

Please print or type all information.

I allege that the MCFA was violated as follows:

Section 1. Complainant		
Your Name: Joseph J. Tomczyk		Daytime Telephone Number: 517-230-6866
Mailing Address: PO Box 113		
City: St. Johns	State: MI	Zip: 48879

Section 2. Alleged Violator		
Name: William Federspiel		
Mailing Address: 2159 Manchester Dr.		
City: Saginaw	State: MI	Zip: 48609

Section 3. Alleged Violations (Use additional sheet if more space is needed.)

Section(s) of the MCFA violated: Section 26(2) [MCL 169.226(2)]

Explain how those sections were violated:

Summary Page: Column II (Cumulative This Election Cycle) is blank.

Evidence that supports those allegations (attach copies of pertinent documents and other information):

See Attached Exhibit, Exhibit Page 2

Michigan Department of State
Campaign Finance Complaint Form

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.

I allege that the MCFA was violated as follows:

Section 1. Complainant		
Your Name: Joseph J. Tomczyk		Daytime Telephone Number: 517-230-6866
Mailing Address: PO Box 113		
City: St. Johns	State: MI	Zip: 48879

Section 2. Alleged Violator		
Name: William Federspiel		
Mailing Address: 2159 Manchester Dr.		
City: Saginaw	State: MI	Zip: 48609

Section 3. Alleged Violations (Use additional sheet if more space is needed.)

Section(s) of the MCFA violated: Section 26(1)(j) [MCL 169.226(1)(j)]

Explain how those sections were violated:

Summary Page: Item 6a shows Itemized Expenditures of $7,382.36. There is no filing of Schedule 1B, Itemized Expenditures to support these disbursements.

Evidence that supports those allegations (attach copies of pertinent documents and other information):

See Attached Exhibit, Exhibit Page 2

Michigan Department of State
Campaign Finance Complaint Form

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.

I allege that the MCFA was violated as follows:

Section 1. Complainant		
Your Name Joseph J. Tomczyk		Daytime Telephone Number 517-230-6866
Mailing Address PO Box 113		
City St. Johns	State MI	Zip 48879

Section 2. Alleged Violator		
Name William Federspiel		
Mailing Address 2159 Manchester Dr.		
City Saginaw	State MI	Zip 48609

Section 3. Alleged Violations (Use additional sheet if more space is needed.)

Section(s) of the MCFA violated: Section 26(1)(e) [MCL 169.226(1)(e)]

Explain how those sections were violated:

Itemized Contributions Sch. 1A has one hundred sixty-one (161) separate contributions listed. None of the listings show anything in Item 7 (Cumulative for the Election Cycle for Each Contributor).

Evidence that supports those allegations (attach copies of pertinent documents and other information):

See Attached Exhibit, Exhibit Pages 4-7 & 13-48

Michigan Department of State
Campaign Finance Complaint Form

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.

I allege that the MCFA was violated as follows:

Section 1. Complainant		
Your Name Joseph J. Tomczyk		Daytime Telephone Number 517-230-6866
Mailing Address PO Box 113		
City St. Johns	State MI	Zip 48879

Section 2. Alleged Violator		
Name William Federspiel		
Mailing Address 2159 Manchester Dr.		
City Saginaw	State MI	Zip 48609

Section 3. Alleged Violations (Use additional sheet if more space is needed.)

Section(s) of the MCFA violated: Section 26(1)(e) [MCL 169.226(1)(e)]

Explain how those sections were violated:

Itemized Contributions Sch. 1A: There are two anonymous contributions for $20.00 each for a total of $40.00. No name or address is listed.

Evidence that supports those allegations (attach copies of pertinent documents and other information):

See Attached Exhibit, Exhibit Page 31

Michigan Department of State
Campaign Finance Complaint Form

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.

I allege that the MCFA was violated as follows:

Section 1. Complainant		
Your Name: Joseph J. Tomczyk		Daytime Telephone Number: 517-230-6866
Mailing Address: PO Box 113		
City: St. Johns	State: MI	Zip: 48879

Section 2. Alleged Violator		
Name: William Federspiel		
Mailing Address: 2159 Manchester Dr.		
City: Saginaw	State: MI	Zip: 48609

Section 3. Alleged Violations (Use additional sheet if more space is needed.)

Section(s) of the MCFA violated: Section 54(1) [MCL 169.254(1)]

Explain how those sections were violated:

Itemized Contributions Sch. 1A: Contribution of $120.00 from Local Union #557, International Brotherhood of Electrical Works is a labor organization.

Evidence that supports those allegations (attach copies of pertinent documents and other information):

See Attached Exhibit, Exhibit Page 4, 51, & 52

Website Posting of history and contact information for the Union Local

Michigan Department of State
Campaign Finance Complaint Form

Reset Form

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Please print or type all information.

I allege that the MCFA was violated as follows:

Section 1. Complainant		
Your Name: Joseph J. Tomczyk		Daytime Telephone Number: 517-230-6866
Mailing Address: PO Box 113		
City: St. Johns	State: MI	Zip: 48879

Section 2. Alleged Violator		
Name: William Federspiel		
Mailing Address: 2159 Manchester Dr.		
City: Saginaw	State: MI	Zip: 48609

Section 3. Alleged Violations (Use additional sheet if more space is needed.)

Section(s) of the MCFA violated: Section 54(1) [MCL 169.254(1)]

Explain how those sections were violated:

Itemized Contributions Sch. 1A: Contribution of $300.00 from Lake State Railway.

This is a Domestic Profit Corporation as researched through the Michigan Department of Licensing and Regulatory Affairs (http://www.dleg.state.mi.us)

Evidence that supports those allegations (attach copies of pertinent documents and other information):

See Attached Exhibit, Exhibit Pages 6, 49, & 50

Michigan Department of State
Campaign Finance Complaint Form

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.

I allege that the MCFA was violated as follows:

Section 1. Complainant		
Your Name Joseph J. Tomczyk		Daytime Telephone Number 517-230-6866
Mailing Address PO Box 113		
City St. Johns	State MI	Zip 48879

Section 2. Alleged Violator		
Name William Federspiel		
Mailing Address 2159 Manchester Dr.		
City Saginaw	State MI	Zip 48609

Section 3. Alleged Violations (Use additional sheet if more space is needed.)

Section(s) of the MCFA violated: Section 26(1)(e) [MCL 169.226(1)(e)]

Explain how those sections were violated:

Itemized Contributions Sch. 1A: $100.00 contribution from David Ortega. There is no address listed.

Evidence that supports those allegations (attach copies of pertinent documents and other information):

See Attached Exhibit, Exhibit Page 4

Section 4. Certification (Required)

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

X Joseph J. Tomczak 5/2/2016

Signature of Complainant Date

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

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

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

X _____ _____

Signature of Complainant Date

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

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

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

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

FILED SAGINAW COUNTY, MI 2015 OCT 28 A 9:21 SUSAN KALIENBACH COUNTY CLERK BY DEPUTY CLERK

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

3. This Statement covers From: 07/21/15 Up 2 10/20/15

1. Committee I.D. Number
101232

2. Committee Name
Federspiel for Sheriff

4. Candidate Last Name: Federspiel First Name: William M.I.: L

4a. Office Sought Including District, Jurisdiction or Community Served (If applicable)
Sheriff

4b. County of Residence SAGINAW

5. Committee's Mailing Address
P.O. Box 5281
Saginaw, MI 48603

Area Code and Phone (989) 714-0968
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

6. Treasurer's Name & Residential Address
Mandy Federspiel
2159 Manchester Dr.
Saginaw, MI 48609

Area Code & Phone (989) 714-0968

7. Treasurer's Business Address
N/A

Area Code and Phone

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)
N/A

Area Code and Phone

9. TYPE OF STATEMENT

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

Pre-Election or Post-Election Statement relates to:

☐ Primary
☐ General
☐ Convention
☐ Special
☐ School
☐ Caucus

Date of Election, Convention or Caucus

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

☐ July Quarterly
☒ October Quarterly

9c. ☐ Annual Statement (_____) Coverage Year

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

9e. Dissolution of Candidate Committee

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

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

Effective date of dissolution

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

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

Current Treasurer or Designated Record keeper: Mandy B. Federspiel (Type or Print Name), Mandy B Federspiel (Signature) Date 10/20/15

Candidate: William L. Federspiel (Type or Print Name), (Signature) Date 10/20/15

Exhibit Page 1

Authority granted under P.A. 388 of 1976

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 101232

SUMMARY PAGE
CANDIDATE COMMITTEE

2. Committee Name Committee To Elect Bill Federspiel Sheriff

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) $	11,435.00	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $	$11,435.00	(18.) $
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) $	$0.00	(19.) $
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) $	$11,435.00	(20.) $
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) $	$0.00	(21.) $
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) $	$0.00	(22.) $
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) $	$7,382.36	
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.) $	$7,382.36	(23.) $
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) $	$0.00	
b. Unitemized (less than $50.01 each - no Schedule)	(10b.) $	$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) $	$0.00	(24.) $
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) $	$0.00	
b. Owed to the Committee (Schedule 1E)	(12b.) $	$0.00	

BALANCE STATEMENT

13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) $	$2,699.61
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + $	$11,435.00
15. SUBTOTAL Add lines 13 and 14	(15.) = $	$14,134.61
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $	$7,382.36
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	$6,752.25

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee to Elect Bill Federspiel Sheriff

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held	4. Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held.
09/11/15	75	Golf Outing	Beech Hollow 7494 Hospital Rd Freeland, MI 48623 ☐ Private Residence

7. Total Contributions $5,625.00

8. Other Receipts $0.00

9. Gross Receipts (Add lines 7 and 8) $5,625.00

10. Total Cost of Event $3,513.00
(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 Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 8-31-15

Name & Address:
Pratt, Jeff
10021 S. Graham Rd
St Charles MI 48655

$ 300.00 $

5. If over $100.00 cumulative, please provide:

Occupation Bus Owner Employer Acorn Tree Service

Click Here for Memo Itemization

Business Address 10021 S. Graham Rd St Charles MI 48655

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 8-31-15

Name & Address
Tiggleman, Craig F
800 E Narlock Rd
Maple City MI 49664

$ 300.00 $

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation V.P Employer Canteen Services

Business Address 905 N. Church St Tekonsha MI 49092

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 8-31-15

Name & Address:
Rancilio Leonard Jr
38609 Groesbeck Hwy
Clinton Twp, MI 48035

$ 900.00 $

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Mgr Employer Rancillo + Assoc.

Business Address 36809 Groesbeck Hwy Clinton Twp MI 48035

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 8-31-15

Name & Address
Ferchau, Luann
2621 W. Moore Rd
Saginaw MI 48601

$ 300.00 $

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Retired Employer

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal 1800.00

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

Enter this total on line 3a of Summary Page.

Exhibit Page 4

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15

Name & Address:
McDonald III, Thomas W.
11940 Spencer Rd
Saginaw MI 48609

$300.00 $

5. If over $100.00 cumulative, please provide:

Occupation Manager Employer McDonald Ford

Business Address 6790 Midland Rd Freeland MI 48623

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15

Name & Address
Stoltenberg, Jeanette
612 Mill Creek Ct
Clio MI 48420

375.00 $ $

5. If over $100.00 cumulative, please provide:

Occupation Supervisor Employer Corizon Health Services

Business Address 6452 Millennium Dr #100, Lansing 48917

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15

Name & Address:
McInerney, Susanne
6555 Tridkelin Rd
Saginaw MI 48609

$300.00 $

5. If over $100.00 cumulative, please provide:

Occupation Retired Employer

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15

Name & Address
Hart, Philip J.
918 Blanchard Dr
Flint MI 48503

$300.00 $

5. If over $100.00 cumulative, please provide:

Occupation Undersheriff Employer Saginaw County

Business Address 618 Cass St Saginaw MI 48602

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

Page Subtotal 1275.00

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

Enter this total on line 3a of Summary Page.

Exhibit Page 5

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? [ ] YES 4. Date of Receipt 9-11-15

Name & Address:
Lake State Railway
750 N. Washington Ave
Saginaw MI 48607

$ 300.00 $ _____

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [ ] Direct [ ] Loan from a person [X] Fund Raiser

3. Contribution #2 PAC Receipt? [ ] YES 4. Date of Receipt 9-11-15

Name & Address
Stevens, Kevin
11377 Hillbridge Ct
Freeland, MI 48623

$ 300.00 $ _____

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Lieutenant Employer Saginaw County

Business Address 618 Cass St Saginaw MI 48602

Type of Contribution: [ ] Direct [ ] Loan from a person [X] Fund Raiser

3. Contribution # 3 PAC Receipt? [X] YES 4. Date of Receipt 9-11-15

Name & Address:
Plumbers + Steamfitters 85 P.A.C.

$ 300.00 $ _____

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [ ] Direct [ ] Loan from a person [X] Fund Raiser

3. Contribution # 4 PAC Receipt? [ ] YES 4. Date of Receipt 9-11-15

Name & Address
Beyerlein, Heather
8721 Wilderness
Freeland MI 48623

$ 75.00 $ _____

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: [ ] Direct [ ] Loan from a person [X] Fund Raiser

Page Subtotal 975.00

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

Enter this total on line 3a of Summary Page.

Exhibit Page 6

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15

Name & Address:
Dexter, Lance
2040 Cornerstone Dr
Mt. Pleasant MI 48858

$ 75.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation Circuit Ct. Admin Employer Saginaw City
Business Address 111 S. Michigan Ave Saginaw MI 48602
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15

Name & Address
Stamann, Karen M.
1815 Cass St
Saginaw MI 48602

$ 75.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation Circuit Ct Employer Saginaw City
Business Address 111 S. Michigan Ave Saginaw MI 48602
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15

Name & Address:
Beyersdorf, Stephanie
3810 N. Thomas Rd
Freeland MI 48623

$ 75.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation Circuit Ct Employer Sag City
Business Address 111 S. Michigan Ave Saginaw MI 48602
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15

Name & Address
Maddox, Dawn
2326 Morgan St
Saginaw MI 48602

$ 75.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation Circuit Ct Employer Sag City
Business Address 111 S. Michigan Ave Saginaw MI 48602
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal 300.00

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

Enter this total on line 3a of Summary Page.

Exhibit Page 7

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15

Name & Address:
McColgan, John
111 S. Michigan Ave
Saginaw MI 48602

$ 75.00 $

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Prosecutor Employer Saginaw County

Business Address 111 S. Michigan Ave Sag MI 48602

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15

Name & Address
Boyd, Chris
111 S. Michigan Ave
Saginaw MI 48602

$ 75.00 $

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Asst. Prosecutor Employer Saginaw County

Business Address 111 S. Michigan Ave Sag MI 48602

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15

Name & Address:
Rousseau, Charlie
111 S. Michigan Ave
Saginaw MI 48602

$ 75.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Atty Gen Office Employer Sag Cty

Business Address 111 S Michigan Ave, Sag MI 48602

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15

Name & Address
Stevenson, Blair
111 S. Michigan Ave
Saginaw MI 48602

$ 75.00 $

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Employer Sag Cty

Business Address 111 S. Michigan Ave Saginaw MI 48607

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal 300.00

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

Enter this total on line 3a of Summary Page.

Exhibit Page 8

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15 Name & Address: Fields, Bud 103 Woodlawn St Charles MI 48655 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	$ 75.00	$ ____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15 Name & Address Llamas, Dyana 2329 Starlite Dr Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	$ 75.00	$ ____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15 Name & Address: Waterman, JJ 2329 Starlite Dr Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	$ 75.00	$ ____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15 Name & Address Fields, Ron 119 Woodlawn Dr St Charles MI 48655 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	$ 75.00	$ ____ Click Here for Memo Itemization

Page Subtotal 300.00

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

Enter this total on line 3a of Summary Page.

Exhibit Page 9

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15 Name & Address: Gleesing, Linda S 5793 Ambassador Dr #7 Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 75.00	$ ____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15 Name & Address Paige Don 618 Cass St Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	$ 75.00	$ ____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15 Name & Address: Jackson, Darnell 111 S. Michigan Ave Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	$ 75.00	$ ____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15 Name & Address Pulaski, Ron 618 Cass Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	$ 75.00	$ ____ Click Here for Memo Itemization

Page Subtotal 300.00

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

Enter this total on line 3a of Summary Page.

Page ____ of ____

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15

Name & Address:
Gomez, Mike
8558 S. Fordney Rd
St. Charles MI 48655

$ 75.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 9-11-15

Name & Address
Laatsch, Tom
5665 State St.
Sag., MI 48603

$ 300.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Manager Employer M+R Electronics

Business Address 5665 State St., Saginaw, MI 48603

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt _____

Name & Address:

$ _____ $ _____

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

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

$ _____ $ _____

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 375.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 5,625.00

Enter this total on line 3a of Summary Page.

Exhibit Page 11

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee to Elect Bill Federspiel Sheriff

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held	4. Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (if any) of the place where the activity was held.
07/23/15	290	Corn Roast	Coty's Landing 777 Midland Rd Saginaw, MI 48638 ☐ Private Residence

7. Total Contributions $5,810.00

8. Other Receipts $0.00

9. Gross Receipts (Add lines 7 and 8) $5,810.00

10. Total Cost of Event $1,797.68
(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 Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15
Name & Address:
Local Union No. 557
International Brotherhood
of Electrical Workers
7303 Gratiot Rd
Saginaw MI 48609

$ 120.00 $ _____

5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15
Name & Address
Kastenbach, Charles P.
12 E. Hannum Blvd
Saginaw MI 48603

$ 40.00 $ _____

5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15
Name & Address:
Garpiel Landscaping
PO Box 5212
Saginaw MI 48603

$ 200.00 $ _____

5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15
Name & Address
Ortega, David

$ 100.00 $ _____

5. If over $100.00 cumulative, please provide:
Occupation Retired Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

Page Subtotal 4100.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 4100.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Ban Cilio Leonard 5036 Stdrcreek Ln Washington Twp, MI 48094 5. If over $100.00 cumulative, please provide: Occupation President Employer Home Confinement Business Address 36809 Groesbeck Hwy Clinton Twp 48035 Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 400.00	$
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Hare, Harold 12135 Swan Creek Rd Saginaw MI 48609 5. If over $100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 50.00	$
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Lask, Margaret P. 1350 Fischer Dr Saginaw MI 48601 5. If over $100.00 cumulative, please provide: Occupation Retired Employer Business Address Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 40.00	$
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Grzesiak, Karen 4385 Lowsest Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 40.00	$

Click Here for Memo Itemization

Page Subtotal 530.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 990

Enter this total on line 3a of Summary Page.

Exhibit Page 14

Page 2 of 5

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Gray, Phyllis 1615 Liberty Rd Saginaw MI 48604 5. If over $100.00 cumulative, please provide: Occupation Retired Employer Business Address Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$200.00	$
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Overdier, Frederick 4301 Fashion Square Blvd Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$20.00	$
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Call, Thomas Jr 3175 Midland Rd Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$40.00	$
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Purcell, Paul 6225 Gratiot Suite C Saginaw MI 48638 5. If over $100.00 cumulative, please provide: Occupation Attorney Employer Saginaw County Business Address 111 S. Michigan St Saginaw MI 48602 Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$200.00	$

Click Here for Memo Itemization

Page Subtotal 460.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 1450

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Seamon Scott 2412 Midland Rd Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Duggan, Patrick 218 Oakdale Dr. Bay City MI 48706 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Hadsall, Cheryl 12300 Oak Birch Run, MI 48415 5. If over $100.00 cumulative, please provide: Occupation Bus Owner Employer Willow Spa Business Address 5820 Gratiot Saginaw MI 48638 Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 50.00	$ ____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Collison, Daniel G 5811 Colony Drive N Saginaw MI 48608 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization

Page Subtotal 110.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 1560

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Collison, Jeffrey 5811 Colony Dr Saginaw MI 48638 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 40.00 Click Here for Memo Itemization	$
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Hannah, Sherryl 610 S. Weadock Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 40.00 Click Here for Memo Itemization	$
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Provenzano, Giacomo PO Box 6457 Saginaw MI 48608 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 40.00 Click Here for Memo Itemization	$
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Collison, Charles C. 8725 Loxley Ln Freeland MI 48623 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 40.00 Click Here for Memo Itemization	$

Page Subtotal 160.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 1720

Enter this total on line 3a of Summary Page.

Exhibit Page 17

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Howitt, William M 101 Center Ave Apt #2 Bay City MI 48708 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Hinojosa, Eric 2215 Glenwood Ave Saginaw MI 48601 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Hanley, Mike 203 S. Bates Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Committee to Elect Brian Wendling 14826 Lincoln Rd Chesaning MI 48616 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 60.00	$ ____ Click Here for Memo Itemization

Page Subtotal 120.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 1840

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Kelly, Kathleen
2603 S. Graham Rd
Saginaw MI 48609

$ 100.00 $ _____

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation Business Owner Employer Great Lakes Yoga
Business Address 6400 State St Saginaw MI 48603
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Kuhn, Dan
8825 Swancrest Dr
Saginaw MI 48609

$ 100.00 $ _____

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation Bus Agent Employer POAM
Business Address 27056 Joy Rd Redford MI 48239
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Dietrich, Greg
119 S. Main St
Frankenmuth MI

$ 20.00 $ _____

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Albosta Joe
5290 Aldaran
Saginaw MI 48638

$ 20.00 $ _____

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal 240

Grand Total of All Schedules 1A (Complete on last page of Schedule) 2080

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Tibbs, Demond L 2013 Court St Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Rigby, Roderick PO Box 14781 Saginaw MI 48601 5. If over $100.00 cumulative, please provide: Occupation Busowner Employer Legal Processing Serv - Self Employed Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 400.00	$ ____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: De Francisco Joseph 320 Superior Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation Retired Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 50.00	$ ____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address McIntyre, Tom 1300 Wieneke Dr. Saginaw MI 48638 5. If over $100.00 cumulative, please provide: Occupation Dir 911 Employer Saginaw City Business Address 618 Cass Sag MI 48602 Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 100.00	$ ____ Click Here for Memo Itemization

Page Subtotal 570.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 2650

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? [ ] YES 4. Date of Receipt 7-23-15 Name & Address: Whiting, Michael 11800 Buecher Rd Burt MI 48417 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: [ ] Direct [ ] Loan from a person [X] Fund Raiser	$ 40.00	$ ____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? [ ] YES 4. Date of Receipt 7-23-15 Name & Address Riverbend Preserve 1128 N. Graham Rd Saginaw MI 48609 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: [ ] Direct [ ] Loan from a person [X] Fund Raiser	$ 400.00	$ ____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? [ ] YES 4. Date of Receipt 7-23-15 Name & Address: Collison, Joseph T. 5811 Colony Dr. N Saginaw MI 48638 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: [ ] Direct [ ] Loan from a person [X] Fund Raiser	$ 40.00	$ ____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? [X] YES 4. Date of Receipt 7-23-15 Name & Address Plumbers + Steamfitters 85 PAC 6705 Weiss St Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: [ ] Direct [ ] Loan from a person [X] Fund Raiser	$ 200.00	$ ____ Click Here for Memo Itemization

Page Subtotal 680.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 3330

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: T+M Investments 602 Hancock St Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$100.00	$ ____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address O'neill Wallace+Doyle P. 300 St Andrews Rd Saginaw MI 48638 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$200.00	$ ____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Stevens, Leon 618 Cass St Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	$20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Snow, Mary 618 Cass St Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	$20.00	$ ____ Click Here for Memo Itemization

Page Subtotal 340.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 3,670

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Pratt, Jeff
10021 Graham St
St Charles MI 48655

$ 20.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Peter, Dennis
9360 Sheridan
Burt MI 48417

$ 20.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Peter, Ms. Dennis
9360 Sheridan
Burt MI 48417

$ 20.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Kastrzewa, Val R
6334 Golf Lakes Ct
Bay City MI 48706

$ 20.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 3750

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Vela, Angel
1270 E. Sloan
Burt MI 48417

$ 20.00 $

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? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Vela, Jesse
1270 E. Sloan
Burt MI 48417

$ 20.00 $

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 7-23-15

Name & Address:
Greenfelder, Kent
233 W. Broad St
Chesaning MI 48616

$ 20.00 $

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 7-23-15

Name & Address
Greenfelder; Mrs. Kent
233 W. Broad St
Chesaning MI 48616

$ 20.00 $

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

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 3830

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Bischalk, Randall
4460 Elmhurst Dr.
Saginaw MI 48603

$ 20.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Houston, Don
111a W. Sloan
Burt MI 48417

$ 20.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Stockford, Janie
563 S. Cole
Saginaw MI 48601

$ 20.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Alderman, Dan
7210 Tom Crosswell
Saginaw MI 48601

$ 20.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 3910

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Frank, Tom 602 Hancock Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Przybylski, mark 618 Cass St Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Przybylski, Estelle 618 Cass St Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Hanley, mike 203 S. Bates Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 3990

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Gomez, Victor 12395 Hawkins Rd Burt MI 48417 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Sawyer, Mark 7482 Neff Rd Mt. Morris MI 48458 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Telling, Marquetta 7482 Neff Rd Mt Morris MI 48458 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Seaman, Steve 3800 W. Curtis Rd Saginaw MI 48609 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 4070

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Smith, Douglas
7261 Tomcresshead
Saginaw MI 48601

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Leiner, Jody
10043 Sheridan Rd
Burt MI 48417

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Nelson, Willie
1037 N. Towerline
Saginaw MI 48601

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Bolf, Glen
10043 Sheridan Rd
Burt MI 48601

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 4150

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Gallegos, Ricardo
6299 Belmar Dr
Saginaw MI 48603

$ 20.00 $ _____

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Mair, Greg
2417 Westbury
Saginaw MI 48603

$ 20.00 $ _____

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Meyer, Brett
PO Box 19604
Saginaw MI 48601

$ 20.00 $ _____

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Dozan, Denise
3270 Sunnyview Dr
Saginaw MI 48604

$ 20.00 $ _____

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 4230

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Lupe, Ortega
1842 Coolidge Ave
Saginaw MI 48603

$ 20.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Whiting, J.
11800 Bueche
Burt MI 48417

$ 20.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
DeLeon, Bobby
1537 S. Washington
Saginaw MI 48602

$ 20.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Musca, Joanne
1040 Wenonah
Saginaw MI 48638

$ 20.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 4310

Enter this total on line 3a of Summary Page.

Exhibit Page 30

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Gomez, Miguel
6178 Cass St
Saginaw MI 48602

$ 20.00 $

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? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Novak, Tim
4416 S Marcus Ct
Saginaw MI 48603

$ 20.00 $

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 7-23-15

Name & Address:

$ 20.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address

$ 20.00 $

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

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 4390

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Wrenn, Jason
984 Athens
Saginaw MI 48601

$ 20.00 $ _____

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? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Draine, Delma
811 E. Holland
Saginaw MI 48601

$ 20.00 $ _____

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 7-23-15

Name & Address:
Hewwitt, Sherry
610 S. Weadock
Saginaw MI 48600

$ 20.00 $ _____

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 7-23-15

Name & Address
Unlauf, Paul
6190 Foxglen Dr Apt 177
Saginaw MI 48638

$ 20.00 $ _____

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer 723-15

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 4470

Enter this total on line 3a of Summary Page.

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Page 1 of 1

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Kosin, Mark 5585 Fergus Rd St. Charles, MI 48655 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Kosin, Beverly 5585 Fergus Rd St. Charles, MI 48655 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Dey, Anita 1325 Leo St Saginaw MI 48638 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Dey, Marilyn 1325 Leo Saginaw MI 48638 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 4550

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Daly, Alan 5665 Hacienda Ct Saginaw MI 48638 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Graham, Jim 3475 S. Miller Saginaw MI 48609 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Licavoli, Mary 3475 S Miller Rd Saginaw MI 48609 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Lask, Frank 1350 Fischer Dr Saginaw MI 4860 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____

Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 1630

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
La Belle, Ken
7387 Brewer Rd
Flint MI 48507

$20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
LaBelle, Stephanie
7387 Brewer Rd
Flint MI 48507

$20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Hoffman, Larry
1040 Risecliff Dr
Grand Blanc MI 48439

$ 20.0 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Hoffman, Trudy
1040 Risecliff Dr
Grand Blanc MI 48439

$20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 4710

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Clear, Palma
2244 E. Farrand
Clio MI 48420

$ 20.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Call, Susan
3175 Midland Rd
Saginaw MI 48603

$ 20.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Hart, Phil
918 Blanchard Ave
Flint MI 48503

$ 20.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Hart, Kim
918 Blanchard Ave
Flint MI 48503

$ 20.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 4790

Enter this total on line 3a of Summary Page.

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Ferchaw, L. 2621 W. Moore Saginaw MI 48609 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Ferchaw, D 2621 W. Moore Saginaw MI 48609 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Guerra, Vanessa 4108 Emerald Dr. Bridgeport MI 48722 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Breabois, Pat 4595 5 Mile Rd Breckenridge MI 48615 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 4870

Enter this total on line 3a of Summary Page.

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Gnatkowski, Pat 7711 McCarty Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Gnatkowski, Cyndi 7711 McCarty Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Lincoln, Judi ~~8110~~ 3195 Wintergreen Saginaw MI 48603 6. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Dietrich, Greg 119 S. Main St Frankenmuth MI 48734 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 4950

Enter this total on line 3a of Summary Page.

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Reid, Jamal
1827 Gratiot
Saginaw MI 48602

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Hogue, Jim
618 Cass St
Saginaw MI 48602

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Pfau, Randy
618 Cass St
Saginaw MI 48602

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Pfau, Wendy
618 Cass St
Saginaw MI 48602

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 5030

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Van Riper, Herb
618 Cass St
Saginaw MI 48602

$ 20.00 $

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? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Strickland, Kyrsta
3837 York Dr
Saginaw MI 48601

$ 20.00 $

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 7-23-15

Name & Address:
Snow, Justin
3191 McCarty #32
Saginaw MI 48603

$ 20.00 $

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 7-23-15

Name & Address
Lane, Alan
1607 Mershon
Saginaw MI 48602

$ 20.00 $

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

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 5110

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Albosta, Joe
5290 Aldoran
Saginaw MI 48638

$ 20.00 $

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? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
M. Whiting
11800 Buechard
Burt MI 48417

$ 20.00 $

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 7-23-15

Name & Address:
Collison, Charles
8725 Lokley Ln
Freeland, MI 48623

$ 20.00 $

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 7-23-15

Name & Address
Collison, Dan
5811 Colony
Saginaw MI 48638

$ 20.00 $

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

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 5190

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Collison, Jeff 5811 Colony Saginaw MI 48638 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Provenzano, Jack PO Box 6457 Saginaw MI 48608 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address: Federspiel, Jessie 1525 Brenner Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15 Name & Address Henigey Travis 7701 Mielke Freeland MI 48623 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 5270

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Hughes, Mary
Schaumen Dr
Saginaw MI 48601

$ 20.00 $

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? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Maziarz, Angie
4824 Baker Rd
Bridgeport MI 48722

$ 20.00 $

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 7-23-15

Name & Address:
Ciaffoni, Bob
4670 Henry
Saginaw MI 48638

$ 20.00 $

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 7-23-15

Name & Address
Burzynski, Rick
2415 Townline
Birch Run MI 48415

$ 20.00 $

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

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 5350

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Rasco, Ebony
1535 Dillon
Saginaw MI 48601

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Hagarty, John
2920 W. Ivard
Hemlock MI 48626

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Hagarty, Julie
2920 W. Ivard
Hemlock MI 48626

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Everett, Craig
2397 Anderson
Saginaw MI 48603

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 5430

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Hewitt, Bill
701 Center #2
Bay City MI 48708

$ 20.00 $

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? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Kraub, Tom
1727 Lathrup
Saginaw MI 48603

$ 20.00 $

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 7-23-15

Name & Address:
Bishop, Doug
3988 Peet
New Lothrop MI 48460

$ 20.00 $

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 7-23-15

Name & Address
Holt, Gary
12208 Sanders
Freeland MI 48623

$ 20.00 $

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

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 5510

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Sowah, Avitch
1121 N. MI Ave
Saginaw MI 48602

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Kathy, McIntyre
1300 Wienecke
Saginaw MI 48638

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Wood, Ruth
1121 N. Michigan
Saginaw MI 48602

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Windy, Josh
6705 Weiss
Saginaw MI 48603

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 5590

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Tilot, Mike
2349 Rolling Green Pl
Saginaw MI 48603

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Tilot, Lori
2349 Rolling Green Pl
Saginaw MI 48603

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Pomerville, Justin
6705 Weiss
Saginaw MI 48603

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Smith, Ms. Douglas
7261 Tom Gresswell
Saginaw MI 4860

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 5670

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-23-15

Name & Address:
Frank, Tom
602 Hancock
Saginaw MI 48602

$ 20.00 $

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? ☐ YES 4. Date of Receipt 7-23-15

Name & Address
Wehner, Charlie
618 Cass
Saginaw MI 48638

$ 20.00 $

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 8-5-15

Name & Address:
Saginaw Twp.
4960 Shattuck Rd.
Saginaw, MI 48603

$ 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

One-hundred dollar refund from $125.00 permit expense on 6/25/15

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: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 4000

Grand Total of All Schedules 1A (Complete on last page of Schedule) ~~[illegible]~~ 5,810.00

Enter this total on line 3a of Summary Page.

LARA
Department of Licensing and Regulatory Affairs

MICHIGAN.GOV
Michigan's Official Web Site

Michigan.gov Home | Business Entity Search Home | Corps Home | Contact Corporations | LARA Home

CORPORATE ENTITY DETAILS

Searched for: LAKE STATE RAILWAY COMPANY

ID Num: 105369

Assumed Names

Entity Name: LAKE STATE RAILWAY COMPANY
Type of Entity: Domestic Profit Corporation
Resident Agent: BRAD B. ARBUCKLE
Registered Office Address: 840 W LONG LAKE RD STE 200 TROY MI 48098
Mailing Address: MI
Formed Under Act Number(s): 354-1993 284-1972
Railroad records were transferred here per Act 354 of 1993 eff 01/14/1994.
Incorporation/Qualification Date: 1-31-1992
Jurisdiction of Origin: MICHIGAN
Number of Shares: 17,000
Year of Most Recent Annual Report: 15
Year of Most Recent Annual Report With Officers & Directors: 10
Status: ACTIVE **Date:** Present

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Vers 5.2 (03/15)

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
CORPORATIONS, SECURITIES & COMMERCIAL LICENSING BUREAU
PROFIT CORPORATION INFORMATION UPDATE
2015

[X] **On behalf of the corporation, I certify that no changes have occurred in the required information since the last year filed annual report.**

Identification Number	Corporation Name
105369	LAKE STATE RAILWAY COMPANY

Resident agent name and mailing address of the registered office

BRAD B. ARBUCKLE

MI

The address of the registered office

840 W LONG LAKE RD STE 200

TROY MI 48098

Describe the purpose and activities of the corporation during the year covered by this report:

Electronic Signature

Filed By	Title	Phone
BRAD B. ARBUCKLE	AUTHORIZED OFFICER OR AGENT	

[X] **I certify that this filing is submitted without fraudulent intent and that I am authorized by the business entity to make any changes reported herein.**

Payment Information

Payment Amount	Payment Date/Time	Reference Nbr
$ 75	11/02/2015 11:06:27	71315 6801 105369 2015

Member Login

Username:

Password:

Login
Not registered yet?
Click Here to sign-up

Forgot Your Login?

Member Resources

- Member Home
- 557 JOB LINE
- Out Of Work List
- Wages & Benefits
- Benefit Plans Information
- Resign Information
- Buy Union Made
- Events Calendar
- Working Agreements
- Constitution/Bylaws
- Login

April 2016

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

Organize Today

Learn more about organizing your workplace!

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Local 557 - 75 years of Quality Electrical Installation

On November 29, 1929 the Charter to Local Union 557 was granted and signed by:

Fred A. Ross, W. J. Atherton, Winn Wilder, Richard Reinhardt, Alvin Darling, James Nolan, George D. Beck, Charles M. Berger, Conrad LaLonde, John R. Reams, Lester LaLonde, Charles Hendricks, Daniel Kearns, Murray Sills, Walter J. Behm, John Goodrich, and William C. Smelley.

The following facts were provided by the International Staff to the delegates at the October, 2006 International Convention in Cleveland, Ohio:

Saginaw, Michigan received their charter from the International Brotherhood of Electrical Workers on November 21, 1929. Prior to that three other cities were given the IBEW Local Union 557 designation, they were

Ryolite, Nevada in 1907
York, Pennsylvania in 1913
Minot, North Dakota in 1916.

Saginaw had three other IBEW Local Union designations prior to being assigned its current 557 designation. In 1895 Saginaw was Local Union 78, then in 1900 it was Local Union 145, and the last designation was Local Union 476 in 1913 before finally becoming Local Union 557 in 1929.

There also was an lineman local in Saginaw, Local Union 831 that was amalgamated with Local Union 17, of Detroit, in 1936.

The other IBEW Local Union in our area was in Local Union 1288 in Caro, established in 1941 which ceased to exist in 1944.

Support your local unions.

Follow Us!

Important Links

- IBEW
- IBEW Hour Power
- Union Sportsman
- Working Electricians
- NECA
- NJATC
- AFL-CIO
- Where2Bro
- Nuke Outages
- Unfilled calls Facebook
- Voter Info

Weather Report

Enter Zip GO

Contact Elected Officials!

Find My Reps

Search

IBEW Local 557

Home | Local 557 Info | Apprenticeship Info | Officers | Michigan IBEW | Contractor List | Photo Gallery | Contact Us

Member Login

Username:

Password:

Login

Not registered yet?
Click Here to sign-up

Forgot Your Login?

- Member Resources
- Member Home
- 557 JOB LINE
- Out Of Work List
- Wages & Benefits
- Benefit Plans Information
- Resign Information
- Buy Union Made
- Events Calendar
- Working Agreements
- Constitution/Bylaws
- Login

<< April 2016 >>

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

Organize Today

Learn more about organizing your workplace!

Click Here

Local 557 Info

SHARE

Office Hours

Monday - Friday
7:00am - 4:30pm

Contact

Phone: (989) 781-0516
Fax: (989) 781-0563

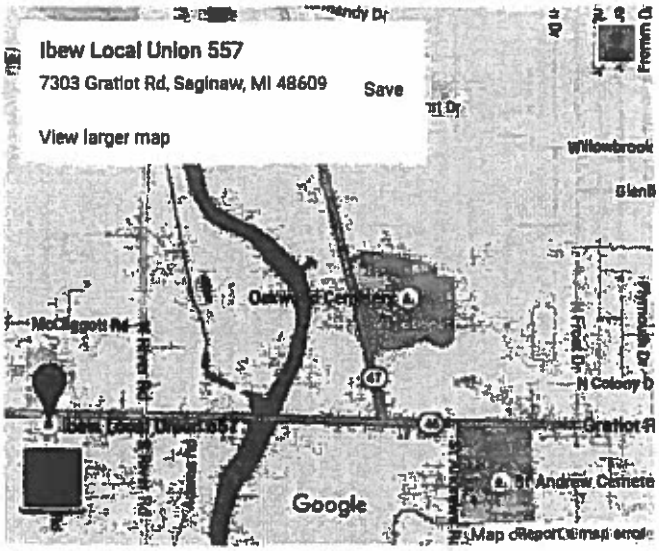
Job Line

Call (989) 781-0516 after 5 pm and hit 411 to listen to our job line, all calls will

be posted before being filled. Please have your page and line numbers available.

Where We Are

Local Union 557
7303 Gratiot Road
Saginaw, Michigan 48609



View Larger Map

Page Last Updated: Nov 25, 2013 (09:27:50)

Follow Us!

Important Links

- IBEW
- IBEW Hour Power
- Union Sportsman
- Working Electricians
- NECA
- NJATC
- AFL-CIO
- Where2Bro
- Nuke Outages
- Unfilled calls Facebook
- Voter Info

Weather Report

Enter Zip GO

IBEW Local 557
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Michigan Department of State
Campaign Finance Complaint Form

Reset Form

2016 MAY -9 PM 4:13

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

Please print or type all information.

I allege that the MCFA was violated as follows:

Section 1. Complainant		
Your Name Joseph J. Tomczyk		Daytime Telephone Number 517-230-6866
Mailing Address PO Box 113		
City St. Johns	State MI	Zip 48879

Section 2. Alleged Violator		
Name William Federspiel		
Mailing Address 2159 Manchester Dr.		
City Saginaw	State MI	Zip 48609

Section 3. Alleged Violations (Use additional sheet if more space is needed.)

Section(s) of the MCFA violated: Section 26(2) [MCL 169.226(2)]

Explain how those sections were violated:

Summary Page: Column II (Cumulative This Election Cycle) is blank.

Evidence that supports those allegations (attach copies of pertinent documents and other information):

See Attached Exhibit, Exhibit Page 2

Michigan Department of State
Campaign Finance Complaint Form

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.

I allege that the MCFA was violated as follows:

Section 1. Complainant		
Your Name Joseph J. Tomczyk		Daytime Telephone Number 517-230-6866
Mailing Address PO Box 113		
City St. Johns	State MI	Zip 48879

Section 2. Alleged Violator		
Name William Federspiel		
Mailing Address 2159 Manchester Dr.		
City Saginaw	State MI	Zip 48609

Section 3. Alleged Violations (Use additional sheet if more space is needed.)

Section(s) of the MCFA violated: Section 26(1)(e) [mcl 169.226(1)(e)]

Explain how those sections were violated:

Itemized Contributions Sch. 1A: Item 7 (Cumulative for Election Cycle for Contributor)

One hundred twelve (112) out of one hundred sixty one (161) entries are blank.

Evidence that supports those allegations (attach copies of pertinent documents and other information):

See Attached Exhibit, Exhibit Pages 10-51

Michigan Department of State
Campaign Finance Complaint Form

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.

I allege that the MCFA was violated as follows:

Section 1. Complainant		
Your Name Joseph J. Tomczyk		Daytime Telephone Number 517-230-6866
Mailing Address PO Box 113		
City St. Johns	State MI	Zip 48879

Section 2. Alleged Violator		
Name William Federspiel		
Mailing Address 2159 Manchester Dr.		
City Saginaw	State MI	Zip 48609

Section 3. Alleged Violations (Use additional sheet if more space is needed.)

Section(s) of the MCFA violated: Section 54(1) [MCL 169.254(1)]

Explain how those sections were violated:

Itemized Contributions Sch. 1A: Contribution of $300.00 from Rancillio & Associates is from a Domestic Profit Corporation as evidenced on the Michigan Department of Licensing and Regulatory Affairs website (http://www.dleg.state.mi.us)

Evidence that supports those allegations (attach copies of pertinent documents and other information):

See Attached Exhibit, Exhibit Pages 50, 52 & 53

Michigan Department of State
Campaign Finance Complaint Form

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.

I allege that the MCFA was violated as follows:

Section 1. Complainant		
Your Name Joseph J. Tomczyk		Daytime Telephone Number 517-230-6866
Mailing Address PO Box 113		
City St. Johns	State MI	Zip 48879

Section 2. Alleged Violator		
Name William Federspiel		
Mailing Address 2159 Manchester Dr.		
City Saginaw	State MI	Zip 48609

Section 3. Alleged Violations (Use additional sheet if more space is needed.)

Section(s) of the MCFA violated: Section 54(1) [MCL 169.254(1)]

Explain how those sections were violated:

Itemized Contributions Sch. 1A: Contribution of $120.00 from Collinson & Collinson PC is from a Domestic Profit Corporation as evidenced on the Michigan Department of Licensing and Regulatory Affairs website (http://www.dleg.state.mi.us)

Evidence that supports those allegations (attach copies of pertinent documents and other information):

See Attached Exhibit, Exhibit Pages 13, 54, & 55

Michigan Department of State
Campaign Finance Complaint Form

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.

I allege that the MCFA was violated as follows:

Section 1. Complainant		
Your Name: Joseph J. Tomczyk		Daytime Telephone Number: 517-230-6866
Mailing Address: PO Box 113		
City: St. Johns	State: MI	Zip: 48879

Section 2. Alleged Violator		
Name: William Federspiel		
Mailing Address: 2159 Manchester Dr.		
City: Saginaw	State: MI	Zip: 48609

Section 3. Alleged Violations (Use additional sheet if more space is needed.)

Section(s) of the MCFA violated: Section 26(1)(e) [MCL 169.2226(1)(e)]

Explain how those sections were violated:

Itemized Contributions Sch. 1A: Cumulative contribution of $400.00 from Tom Laatsch.

No primary business location is listed.

Evidence that supports those allegations (attach copies of pertinent documents and other information):

See Attached Exhibit, Exhibit Page 31

Michigan Department of State
Campaign Finance Complaint Form

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.

I allege that the MCFA was violated as follows:

Section 1. Complainant		
Your Name Joseph J. Tomczyk		Daytime Telephone Number 517-230-6866
Mailing Address PO Box 113		
City St. Johns	State MI	Zip 48879

Section 2. Alleged Violator		
Name William Federspiel		
Mailing Address 2159 Manchester Dr.		
City Saginaw	State MI	Zip 48609

Section 3. Alleged Violations (Use additional sheet if more space is needed.)

Section(s) of the MCFA violated: Section 54(1) [MCL 169.254(1)]

Explain how those sections were violated:

Itemized Contributions Sch. 1A: Contribution of $120.00 from Local Union #557,

International Brotherhood of Electrical Works is a labor organization.

Evidence that supports those allegations (attach copies of pertinent documents and other information):

See Attached Exhibit, Exhibit Pages 10, 56, & 57

Website Posting of history and contact information for the Union Local

Section 4. Certification (Required)

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

X Joseph G Tomczak — Signature of Complainant

5/2/2016 — Date

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

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

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

_____

_____

_____

_____

_____

_____

X _____ Signature of Complainant

_____ Date

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

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

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

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

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

3. This Statement covers: from 07/21/14 to 10/20/14

1. Committee I.D. Number
101232

2. Committee Name
Bill Federspiel for Sheriff

4. Candidate Last Name: Federspiel First Name: William M.I.: L

4a. Office Sought Including District # or Community Served (If applicable)
Sheriff

4b. County of Residence **SAGINAW**

5. Committee's Mailing Address
2159 Manchester Dr.
Saginaw, MI 48609

Area Code and Phone (989) 714-0968
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

6. Treasurer's Name & Residential Address
Mandy Federspiel
2159 Manchester Dr.
Saginaw, MI 48609

Area Code & Phone (989) 714-0968

7. Treasurer's Business Address
N/A

Area Code and Phone

8. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper)
N/A

Area Code and Phone

9. TYPE OF STATEMENT

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

Pre-Election or Post-Election Statement relates to:

☐ Primary
☐ General
☐ Convention
☐ Special
☐ School
☐ Caucus

Date of Election, Convention or Caucus

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

☐ July Quarterly
☒ October Quarterly

9c. ☐ Annual Statement (_____) Coverage Year

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

9e. Dissolution of Candidate Committee

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

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

Effective date of dissolution

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

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

Current Treasurer or Designated Record Keeper: Mandy Federspiel / Date 10/19/14
Type or Print Name — Signature

Candidate: William Federspiel / Date 10/19/14
Type or Print Name — Signature

Authority granted under P.A. 388 of 1976

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 101232

SUMMARY PAGE
CANDIDATE COMMITTEE

2. Committee Name Committee To Elect Bill Federspiel Sheriff

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) $	9,390.00	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $	$9,390.00	(18.) $
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) $	$0.00	(19.) $
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) $	$9,390.00	(20.) $
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) $	$0.00	(21.) $
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) $	$0.00	(22.) $
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) $	$6,529.47	
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.) $	$6,529.47	(23.) $
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) $	$0.00	
b. Unitemized (less than $50.01 each - no Schedule)	(10b.) $	$40.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) $	$40.00	(24.) $
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) $	$0.00	
b. Owed to the Committee (Schedule 1E)	(12b.) $	$0.00	

BALANCE STATEMENT

13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) $	$1,095.71
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + $	$9,390.00
15. SUBTOTAL Add lines 13 and 14	(15.) = $	$10,485.71
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $	$6,569.47
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	$3,916.24

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Tri-County Citizen Address 110 S. Chapman St Chesaning, MI 48616 ☐ Fund Raiser	Purpose: Ad for Fair Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/21/14	$ 387.00
Expenditure #2 Name Saginaw Township Address 4900 Shattuck Rd Saginaw, MI 48603 ☑ Fund Raiser	Purpose: Permit Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/31/14	$ 125.00
Expenditure #3 Name Coty's Landing Address 777 Midland Rd Saginaw, MI 48603 ☑ Fund Raiser	Purpose: Corn Roast Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/31/14	$ 800.00
Expenditure #4 Name Mandy Federspiel Address 2159 Manchester Dr Saginaw, MI 48609 ☐ Fund Raiser	Purpose: Repay Debt Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/09/14	$ 800.00
Expenditure #5 Name Saginaw Award & Sports Address 2616 State St Saginaw, MI 48602 ☐ Fund Raiser	Purpose: Award for MS fundraiser (Steele, Andy) Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/13/14	$ 58.25

Subtotal this page $2,170.25

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

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Austin Celebration Address 6200 State St. Saginaw, MI 48604 ☐ Fund Raiser	Purpose: Banquet for Pastor Austin Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/16/14	$ 90.00
Expenditure #2 Name Dewey Ragan Address Roasters on Wheels Birch Run, MI ☐ Fund Raiser	Purpose: Reimbursement for food at Corn Roast Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/02/14	$ 101.52
Expenditure #3 Name Mission in the City Address 231 S. 9th St Saginaw, MI 48601 ☐ Fund Raiser	Purpose: Banquet Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/02/14	$ 150.00
Expenditure #4 Name Friends of Katie Albosta Kelly Address 133 N. Saginaw St St. Charles, MI 48655 ☑ Fund Raiser	Purpose: fundraiser Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/02/14	$ 75.00
Expenditure #5 Name Chuck Stack for Commission Address 5708 Venoy Rd Saginaw, MI 48604 ☑ Fund Raiser	Purpose: fundraiser Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/02/14	$ 40

Subtotal this page $456.52

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

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name First Merit Bank Address 2100 N. Center Rd Saginaw, MI 48603 ☐ Fund Raiser	Purpose: Bank Maintenance Fee Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/25/14	$ 3.00
Expenditure #2 Name Affordable Portables Address 3629 Busch Rd Birch Run, MI 48415 ☑ Fund Raiser	Purpose: Portable wash stations Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/02/14	$ 245.00
Expenditure #3 Name Beech Hollow Address 7494 Hospital Rd Freeland, MI 48623 ☑ Fund Raiser	Purpose: Golf Outing Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/05/14	$ 2386.25
Expenditure #4 Name Barb Meter for Judge Address 6200 State St Saginaw, MI 48603 ☑ Fund Raiser	Purpose: Tickets Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/10/14	$ 75.00
Expenditure #5 Name New Life Baptist Church Address 1421 Federal Ave Saginaw, MI 48601 ☐ Fund Raiser	Purpose: Banquet Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/17/14	$ 120.00

Subtotal this page $2,829.25

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

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Saginaw Valley Agricultural Association Address 139 S. Saginaw St Chesaning, MI 48616 ☐ Fund Raiser	Purpose: Banquet Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/23/14	$ 200.00
Expenditure #2 Name First Merit Bank Address 2100 N. Center Rd Saginaw, MI 48603 ☐ Fund Raiser	Purpose: Maintenance Fee Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/30/14	$ 3.00
Expenditure #3 Name NAACP Address 515 N. Washington Ave Saginaw, MI 48601 ☐ Fund Raiser	Purpose: Banquet Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/30/14	$ 120.00
Expenditure #4 Name Saginaw County Democratic Party Address 318 S. Hamilton St Saginaw, MI 48602 ☐ Fund Raiser	Purpose: Annual Banquet & AD Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/06/14	$ 360.00
Expenditure #5 Name Cheryl Hadsall for Commission Address 9087 Birch Run Rd Birch Run, MI 48415 ☑ Fund Raiser	Purpose: Fundraiser Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/06/14	$ 40.00

Subtotal this page	$723.00
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel Sheriff

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Vanessa Guerra for State Rep. Address 219 N. Washington Ave Saginaw, MI 48601 ☑ Fund Raiser	Purpose: Fundraiser Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/08/14	$ 50.00
Expenditure #2 Name Bill Federspiel Address 2159 Manchester Dr. Saginaw, MI 48609 ☐ Fund Raiser	Purpose: Reimburse for Campaign Committee Dinner Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/08/14	$ 178.60
Expenditure #3 Name Right to Life of Saginaw Address 3195 Christy Way Dr Saginaw, MI 48603 ☐ Fund Raiser	Purpose: Annual Banquet Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/10/14	$ 90.00
Expenditure #4 Name First Merit Bank Address 2100 N. Center Rd Saginaw, MI 48603 ☐ Fund Raiser	Purpose: New batch of checks Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/10/14	$ 31.85
Expenditure #5 Name N/A Address ☐ Fund Raiser	Purpose: Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement		$

Subtotal this page $350.45

Grand Total of all Schedules 1B (Complete on last page of Schedule) $6,529.47

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee to Elect Bill Federspiel Sheriff

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held	4. Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (if any) of the place where the activity was held.
07/31/14	209	Corn Roast	Coty's Landing 777 Midland Rd Saginaw, MI 48603 ☐ Private Residence

7. Total Contributions $4,590.00

8. Other Receipts $0.00

9. Gross Receipts (Add lines 7 and 8) $4,590.00

10. Total Cost of Event $800.00
(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 Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee to Elect Bill Federspiel Sheriff

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held	4. Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (if any) of the place where the activity was held.
09/05/14	40	Golf Outing	Beech Hollow Golf Course, 7494 Hospital Road Freeland, MI 48623 ☐ Private Residence

7. Total Contributions $3,800.00

8. Other Receipts $0.00

9. Gross Receipts (Add lines 7 and 8) $3,800.00

10. Total Cost of Event $2,386.25
(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 Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Local Union #557 Int'l Brotherhood of Electrical Workers 7303 Gratiot Rd Saginaw MI 48609 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 200.00	$ ____
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Mary Jo Weise 9135 Greenway Ct. K163 Saginaw MI 48609 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 40.00	$ ____
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Horn, Kenneth B. 1 Sunburst Ct Frankenmuth MI 48734 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 100.00	$ ____
3. Contribution # 4 PAC Receipt? ☑ YES 4. Date of Receipt 7-31-14 Name & Address MI Laborers Political League 1118 Centennial Way Ste 100 Lansing MI 48917 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 250.00	$ ____

Click Here for Memo Itemization

Page Subtotal 590.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) ~~[illegible]~~

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address:
Saginaw County Democratic Exec. Committee
122 N. Michigan Ave
Saginaw MI 48602

$ 100.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address
Collison + Collison PC
5811 Colony Dr. N
PO Box 6010
Saginaw MI 48608

$ 120.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 3 PAC Receipt? ☑ YES 4. Date of Receipt 7-31-14

Name & Address:
Plumbers + Steam Fitters 85 P.A.C.
6705 Weiss St
Saginaw MI 48603

$ 200.00 $ 700.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

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
T + M Investments
602 Hancock St
Saginaw MI 48602

$ 100.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

Page Subtotal 520.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 1110.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Hare, Marvin D. 1396 W. Delta Dr. Saginaw MI 48638 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Stack, Chuck 5708 Venoy Rd Saginaw MI 48604 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 40.00	$ ____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Hare, Ann M. 4884 Cherokee Rd Saginaw MI 48604 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 40.00	$ ____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address McIntyre, Kathleen 1300 Wieneke Rd Saginaw MI 48638 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 100.00	$ ____ Click Here for Memo Itemization

Page Subtotal 200.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 1310.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: De Francesco, Joseph G 320 Superior Saginaw, MI 48602 5. If over $100.00 cumulative, please provide: Occupation retired Employer Business Address Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$60.00	$100 Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address McCdgan, Susan M. 525 West Chester Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$40.00	$ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Muehlenbeck, M.F 3795 N Center Rd Apt 100 Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation retired Employer Business Address Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$100.00	$ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Hoeme, Patricia A. 2568 S. Orr Rd Freeland MI 48623 5. If over $100.00 cumulative, please provide: Occupation Retired Employer Business Address Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$100.00	$180.00 Click Here for Memo Itemization

Page Subtotal 300.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 1610.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Hauffe, Kurt P 971 Midland Rd Saginaw MI 48638 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$40.00	$80.00 Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Hauffe, Irwin F. 12 Millpond Trl Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$40.00	$80.00 Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Rigby, Roderick PO Box 14781 Saginaw MI 4860 5. If over $100.00 cumulative, please provide: Occupation Process Server Employer Self-employed Business Address PO Box 14781 Saginaw MI 4860 Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$200.00	$500.00 Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Kreger, Kevin J 4759 N. Iva Rd Hemlock MI 48626 5. If over $100.00 cumulative, please provide: Occupation Richland Twp Supt Employer Richland Twp Business Address 1180 N Hemlock Rd Hemlock MI 48626 Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$100.00	$150.00 Click Here for Memo Itemization

Page Subtotal 380.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 1990.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Emede, Geoffery E. 8671 Chapin Rd Saginaw MI 48609 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$40.00	$80.00
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Glynn, Patricia A 423 John St Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$40.00	$60.00
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Grzesiak, Karen A. 4385 Louise St Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$40.00	$80.00
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Thompson, Mattie 3 Holland Ct Saginaw MI 48601 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$

Click Here for Memo Itemization

Page Subtotal 140.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 2130.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Dey, Anita 1325 Leo Saginaw MI 48638 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$40.00 Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Dey, Marilyn 1325 Leo Saginaw MI 48638 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ [redacted] Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Lasik, Pat 1350 Fischer Dr Saginaw MI 48601 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$60.00 Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Lasik, Frank 1350 Fischer Dr Saginaw MI 48601 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$100.00 Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 2210.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address:
Christiansen, Sue
901 N Frost Dr
Saginaw MI 48604

$ 20.00 $ _____

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? ☐ YES 4. Date of Receipt 7-31-14

Name & Address
Gray, Phyllis
1615 Liberty
Saginaw MI 48604

$ 20.00 $ _____

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 7-31-14

Name & Address:
Steele, Linda
1615 Liberty St
Saginaw MI 48604

$ 20.00 $ _____

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 7-31-14

Name & Address
Boshaw, Bob
1615 Liberty
Saginaw MI 48604

$ 20.00 $ _____

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

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 2290

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Boshaw, Michael 151 Borland Ave Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ ____
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Gray-Fitting, Dianne 2595 Lucille Ave Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ ____
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Przybylski, Mark 1320 Fromm Dr Saginaw MI 48638 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ ____
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Przybylski, Estelle 1320 Fromm Dr Saginaw MI 48638 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ ____

Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 2370.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Lentner, Eric 16372 Blue Teal Hemlock, MI 48626 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Lentner Linda 16372 Blue Teal Hemlock, MI 48626 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Gerhardt, Steve 4545 Brockway Saginaw MI 48638 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Gerhardt, Karen 4545 Brockway Saginaw MI 48638 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$

Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 2450.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Stack, Chuck 5708 Venoy Rd Saginaw MI 48604 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$60.00 Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Stack, Mrs Chuck 5708 Venoy Rd Saginaw MI 48604 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Van Riper, Herb 8130 Ohern Saginaw MI 48609 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Van Riper, Heather 8130 Ohern Saginaw MI 48609 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____ Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 2530.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address:
Sivey, John
1128 N Graham Rd
Saginaw MI 48609

$ 20.00 $

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? ☐ YES 4. Date of Receipt 7-31-14

Name & Address
Boyd, Chris
111 S. Michigan
Saginaw MI 48602

$ 20.00 $

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 7-31-14

Name & Address:
Kosin, Mark
5585 Fergus Rd
St Charles, MI 48655

$ 20.00 $ 40.00

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 7-31-14

Name & Address
Kosin, Bew
5585 Fergus Rd
St. Charles MI 48655

$ 20.00 $ 40.00

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

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 2610.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	8. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Gray, Tom 12333 Freeland Rd Freeland, MI 48623 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Federspiel, Jessie 1525 Brenner St Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$40.00 Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Grzesiak, Patrick 6385 Weiss Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$40.00 Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Gray, James 1615 Liberty Saginaw MI 48604 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____ Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 2690.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Wheeler, William 5565 Sherman Saginaw MI 48604 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ ____
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Maziarz Angie 4824 Baker Rd Bridgeport MI 48722 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ 40.00
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Hughes, Mary 3658 Schaufman Pr Saginaw MI 48601 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ 40.00
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Boshaw, Mary 151 Borland Ave Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ ____

Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 2770.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14
Name & Address:
Grzesiak, Tony
4385 Louise St
Saginaw MI 48603
5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser
$ 20.00 $ _____
Click Here for Memo Itemization

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14
Name & Address
Pomerville, Justin
6705 Weiss St
Saginaw MI 48603
5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser
$ 20.00 $ _____
Click Here for Memo Itemization

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14
Name & Address:
Barnett, Dan
5266 Katherine Ct
Saginaw MI 48603
5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser
$ 20.00 $ _____
Click Here for Memo Itemization

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14
Name & Address
Barnett, Phil
5266 Katherine Ct
Saginaw MI 48603
5. If over $100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser
$ 20.00 $ _____
Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 2850.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address:
Woods, Richard
1433 Joseph St
Saginaw MI 48638

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

Click Here for Memo Itemization

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address
Auger, Bill
1421 6th St.
Bay City MI 48708

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address:
Schuerman, R.
10212 W. Willowbend Ct.
Freeland MI 48623

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address
Seidel, James
4599 E. Titabawassee
Freeland MI 48623

$ 20.00 $

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 2930.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address:
Schaumen, Dave
9701 Crystal Lake Ct
Freeland MI 48623

$ 20.00 $

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? ☐ YES 4. Date of Receipt 7-31-14

Name & Address
Birnbaum Zac
9275 Brook Hollow
Freeland MI 48623

$ 20.00 $

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 7-31-14

Name & Address:
Nevenfeldt, Joe
10410 Carter Rd
Freeland MI 48623

$ 20.00 $

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 7-31-14

Name & Address
Pulasky Ron
799 N. Pine
Hemlock MI 48626

$ 20.00 $

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

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 3010.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Whitting, Tom 860 N. Thomas Saginaw MI 48609 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$40.00 Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Singh, Pounce 3330 Bay Rd Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$80.00 Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Pappley, Bill 133 N. Saginaw St St. Charles MI 48655 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$80.00 Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Collison, Jeff 5811 Colony Dr Saginaw MI 48608 5. If over $100.00 cumulative, please provide: Occupation Attorney Employer Selfemployed Collison + Collison Business Address 5811 Colony Dr Saginaw MI 48638 Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$140.00 Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 3090.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Steele, Kelsey 1615 Liberty Rd Saginaw MI 48604 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Steele, Allie 1615 Liberty rd Saginaw MI 48604 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Gray, LuAnn 12333 Freeland Rd Freeland MI 48623 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Bosshaw, Ed 2735 Church Hill #5 Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____ Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 3170.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Fiting, Katie 8595 Luella Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Rasco, Ebony 1535 Dillon Saginaw MI 48601 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Bauman, Todd 575 S. Brennan Hemlock MI 48626 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Remer, Bob 4740 Ricard Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____

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Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 3250.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: McQuaid, Jackie 5417 Sherman Saginaw MI 48604 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address McColgan, John 525 Westchester Saginaw MI 48638 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Heinz, Doc 6249 State Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation Bus Owner Employer Self Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$120.00
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Bennett, Bing 3320 Bay Rd Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation President Employer Better Tool Solutions Inc Business Address ~~3303~~ 3320 Bay Rd Saginaw MI 48603 Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$120.00

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Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 3330.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Dense, Dr. Michael 7261 Gratiot Saginaw MI 48609 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Jurem, Chris 3525 Shattuck Rd Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Laatsch, Tom 9689 Carter Freeland MI 48623 5. If over $100.00 cumulative, please provide: Occupation Business Owner Employer Self-employed Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$400.00
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Banman, Vanessa 575 S. Brennan Hemlock MI 48626 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 3410.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Smith, David 13725 Bueche Rd Montrose MI 48457 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Warner, Butch 2575 N. Orr Rd Hemlock MI 48626 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Pfau, Randy 618 Cass St Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$100.00
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Van Benschoten, John 905 N. Michigan Ave Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation Attorney Employer Van Benschoten Law Offices Business Address 905 N. Michigan Ave Saginaw MI 48602 Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$240.00

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Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 3490.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Filer, Matt 731 E. Broad Chesaning MI 48616 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ ____
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Beyerle, Lance 618 Cass St Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ ____
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Kerns, Carolyn 1502 N. Block Rd Reese MI 48757 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ ____
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Kerns, Chuck 1502 N. Block Rd Reese MI 48757 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ ____

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Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 3570.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Gulacsik, Carl 618 Cass St Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Gulacsik, Sabrena 618 Cass St Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: ~~Kaage~~ Kelly, Katie 2605 S. Graham Saginaw MI 48609 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Frank, Tom 602 Hancock Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ 70.00 Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 3650.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address:
Muehlenbeck, Mel
9525 Swan Valley
Saginaw MI 48609

$ 20.00 $ 780.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Retired Employer

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address
Muehlenbeck, Trisha
9525 Swan Valley
Saginaw MI 48609

$ 20.00 $ 120.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Retired Employer

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address:
Muehlenbeck, Brent
315 Hemely Rd
Saginaw MI 48609

$ 20.00 $

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 7-31-14

Name & Address
Shahzad, Rumi
3678 Prairie Creek Ln
Saginaw MI 48603

$ 20.00 $

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

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 3730.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Prezzato, Philip 1006 N Graham Saginaw MI 48609 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Smith, Douglas P. 7261 Tom Cresswell Rd Saginaw MI 48601 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Cirilo, LaTecia 1309 S. Hamilton Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Cirilo, Mary 3033 Russell Saginaw MI 48601 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$

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Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 3810.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address:
Currie, Robert
1102 Michigan
Saginaw MI 48602

$ 20.00 $

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? ☐ YES 4. Date of Receipt 7-31-14

Name & Address
Koski, Jim
4050 Hackett
Saginaw MI 48603

$ 20.00 $ 120.00

5. If over $100.00 cumulative, please provide:

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Occupation Retired Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address:
Reid, Mikey
5582 Yellowcress
Saginaw MI 48603

$ 20.00 $

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 7-31-14

Name & Address
Wehner, Charlie
5984 Birchcrest
Saginaw MI 48638

$ 20.00 $

5. If over $100.00 cumulative, please provide:

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Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 3890.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Showalter, Jeanne 4260 Stello Rd Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ 80.00 Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Shabluk, Mike 2098 Durham Dr Saginaw MI 48609 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Remer, Kelly 4620 Wolverine Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Rehmann, Rob 151 Broad St Chesaning MI 48616 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ 60.00 Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 3970.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Whiting, Connie 860 N. Thomas Rd Saginaw MI 48609 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Weodt, Andrew 1013 S. Jefferson Saginaw MI 48601 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Weber, Vern 2650 Trautner Saginaw MI 48604 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address ~~Spreeman~~ Spreeman, John 1875 N. Thomas Rd Saginaw MI 48609 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____ Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 4050.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address:
Barancik, Craig
5145 Farragut
Bay City MI 48708

$ 20.00 $

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5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address
Barancik, Michelle
5145 Farragut
Bay City MI 48708

$ 20.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address:
Bishop, Doug
3988 Peet Rd
New Lothrop MI 48460

$ 20.00 $

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5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address
Bishop, Michele
3988 Peet Rd
New Lothrop MI 48460

$ 20.00 $

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5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 4130.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address:
Castellanos, Vicente
1865 Hotchkiss Rd
Freeland MI 48623

$ 20.00 $ _____

5. If over $100.00 cumulative, please provide:

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Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address
Castellanos, Kark
1865 Hotchkiss Rd
Freeland MI 48623

$ 20.00 $ 60.00

5. If over $100.00 cumulative, please provide:

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Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address:
Hinojosa, Juan
2215 Glenwood
Saginaw MI 48601

$ 20.00 $ _____

5. If over $100.00 cumulative, please provide:

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Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address
Hinojosa, Eric
2215 Glenwood
Saginaw MI 4860

$ 20.00 $ _____

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

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 4310.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Mutas, Dorothy 5601 S. Fergus Rd St Charles MI 48655 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Pratt, Jeff 10021 S. Graham St Charles MI 48655 5. If over $100.00 cumulative, please provide: Occupation Bus Owner Employer Self-employed Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ 120.00 Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Pratt, Shirley 10021 S. Graham St Charles MI 48655 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ 80.00 Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Pratt, Kristen 10021 S. Graham St Charles MI 48655 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____ Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 4290.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address:
Ortega, Rique
3700 N Center Rd
Saginaw MI 48603

$ 20.00 $

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? ☐ YES 4. Date of Receipt 7-31-14

Name & Address
Ortega, Lori
3700 N. Center Rd
Saginaw MI 48603

$ 20.00 $

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 7-31-14

Name & Address:
Ortega, David
1019 Newberry St
Saginaw MI 48602

$ 20.00 $

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 7-31-14

Name & Address
Morris, Helen
2147 Durham
Saginaw MI 48609

$ 20.00 $

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

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 4370.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address:
Morris, Adam
2147 Dorham
Saginaw MI 48609

$ 20.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address
Moore, Brent
1270 Joseph
Saginaw MI 48638

$ 20.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address:
Moore, Theresa
1286 Andrew St
Saginaw MI 48638

$ 20.00 $ 40.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address
Kolb, Russell
13760 Baumgartner Rd
St Charles MI 48655

$ 20.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 4450.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101233

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Jackson, Darnell 111 S. Michigan Ave Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$95.00 Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Gurgevich, Kirk 500 Dauphin St Riverside NJ 08075 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Gurgevich, Bonnie 500 Dauphin St Riverside NJ 08075 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Grzesiak, Steve 2245 Mershon Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$20.00	$ ____ Click Here for Memo Itemization

Page Subtotal 80.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) ~~953~~ 4530.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number 101237

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address:
Federspiel, Millie
1749 Burnham
Saginaw MI 48602

$ 20.00 $ 80.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address
Lamblin, Jenny
PO Box 43
Carrollton MI 48724

$ 20.00 $ _____

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14

Name & Address:
Lamblin, Scott
PO Box 43
Carrollton MI 48724

$ 20.00 $ _____

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

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

$ _____ $ _____

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

Page Subtotal 60.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 4590.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 9-5-14

Name & Address:
Maddox, Dawn M.
2526 Morgan St.
Saginaw MI 48602

$ 75.00 $ 150.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Admin Asst Employer Saginaw County

Business Address 111 S. Michigan Ave. Saginaw MI 48602

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 9-5-14

Name & Address
Stamann, Karen M.
62265 Normandy Dr Apt 6
Saginaw MI 48603

$ 75.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 9-5-14

Name & Address:
Tiggleman, Jeff
4614 Denham Ct SE
Grand Rapids MI 49546

$ 300.00 $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Business Owner Employer Canteen Services

Business Address 2555 W. Main St Harrison MI 48625

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 9-5-14

Name & Address
Beyersdorf, Stephanie
8912 Gilmour Ln
Freeland, MI 48623

$ 75.00 $ 375.00

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Court Admin Employer Saginaw County

Business Address 111 S. Michigan Ave. Saginaw MI 48602

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

Page Subtotal 525.00

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

Enter this total on line 3a of Summary Page.

Page ____ of ____

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 9-5-14

Name & Address:
Paige, Don
1139 Cranbrook Dr
Saginaw MI 48638

$ 300.00 $

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Deputy Employer Saginaw County

Business Address 111 S. Michigan Ave Saginaw MI 48602

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 9-5-14

Name & Address
Stevens, Kevin J
11377 Hillbridge Court
Freeland MI 48623

$ 300.00 $ 600.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Lieutenant Employer Saginaw County

Business Address 111 S. Michigan Ave Saginaw MI 48602

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 9-5-14

Name & Address:
Wm. J Muehlenbeck
2825 Wieneke Apt 100
Saginaw MI 48603

$ 300.00 $

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Retired Employer

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 9-5-14

Name & Address
Mitrzyk, Kevin L.
5150 Stagatoo Rd
Standish MI 48658

$ 300.00 $ 600.00

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

Page Subtotal 1200.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 1725.00

Enter this total on line 3a of Summary Page.

Page ____ of ____

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 9-5-14

Name & Address:
McDonald, Thomas W. III
11940 Spencer Rd
Saginaw MI 48609

$ 300.00 $ 600.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Manager Employer McDonald Ford

Business Address 6790 Midland Rd Freeland MI 48623

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 9-5-14

Name & Address
McInerney, Donald
6555 Trinklein Rd
Saginaw MI 48609

$ 300.00 $ 600.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Retired Employer

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 9-5-14

Name & Address:
Albosta, Joe
3735 S. Gleaner Rd
Saginaw MI 48609

$ 75.00 $

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 9-5-14

Name & Address
Best Towing LLC
3689 Fashion Square Blvd
Saginaw MI 48603

$ 300.00 $ 650.00

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

Page Subtotal 975.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 2700.00

Enter this total on line 3a of Summary Page.

Page ____ of ____

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 9-5-14

Name & Address:
Mancilio + Assoc
3689 Groesbeck Hwy
Clinton Twp MI 48035

$ 300.00 $

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? ☐ 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: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt _____

Name & Address:

$ _____ $ _____

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

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: ☐ Direct ☐ Loan from a person ☑ Fund Raiser

Page Subtotal	300.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	3000.00

Enter this total on line 3a of Summary Page.

Page _____ of _____

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? [X] YES 4. Date of Receipt 9-10-14

Name & Address:
UAW Michigan V-Pac
500 Shattuck Rd
Saginaw MI 48604

$ 800.00 $

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? [ ] 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: [ ] Direct [ ] Loan from a person [✔] Fund Raiser

3. Contribution # 3 PAC Receipt? [ ] YES 4. Date of Receipt _____

Name & Address:

$ _____ $ _____

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

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: [ ] Direct [ ] Loan from a person [✔] Fund Raiser

Page Subtotal 800.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 3800.00

Enter this total on line 3a of Summary Page.

Page _____ of _____

LARA
Department of Licensing and Regulatory Affairs

MICHIGAN.GOV
Michigan's Official Web Site

Michigan.gov Home | Business Entity Search Home | Corps Home | Contact Corporations | LARA Home

CORPORATE ENTITY DETAILS

Searched for: RANCILIO AND ASSOCIATES, INC.

ID Num: 53232C

Assumed Names

Entity Name: RANCILIO AND ASSOCIATES, INC.
Type of Entity: Domestic Profit Corporation
Resident Agent: LEONARD RANCILIO
Registered Office Address: 15655 W. 11 MILE RD ROSEVILLE MI 48066
Mailing Address: MI
Formed Under Act Number(s): 284-1972
Incorporation/Qualification Date: 3-21-2003
Jurisdiction of Origin: MICHIGAN
Number of Shares: 5,000
Year of Most Recent Annual Report: 16
Year of Most Recent Annual Report With Officers & Directors: 07
Status: ACTIVE **Date:** Present

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CSCL/CD-2500 (01/14)

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
PROFIT CORPORATION INFORMATION UPDATE

2014

Due May 15, 2014 **File Online at www.michigan.gov/fileonline**

Identification Number	Corporation name
53232C	RANCILIO AND ASSOCIATES, INC.

Resident agent name and mailing address of the registered office

LEONARD RANCILIO
36809 GROESBECK
CLINTON TWP MI 48035

RECEIVED
MAR 12 2014
LARA $25.00

FILED
APR 03 2014
CORPORATIONS DIVISION

The address of the registered office

36809 GROESBECK
CLINTON TWP MI 48035

For Bureau use only
Fee Received

- [ ] $25 before May 16
- [ ] $35 (May 16 - 31)
- [ ] $45 (June 1 - 30)
- [ ] $55 (July 1 - 31)
- [ ] $65 (Aug 1 - 31)
- [ ] $75 after August 31

[✓] To certify there are no changes from your previous filing check this box and proceed to item 6.
If the resident agent and/or registered office has changed complete items 1-6.
If only officer and director information has changed complete items 4-6.

1. Mailing address of registered office in Michigan (may be a P.O. Box)	2. Resident Agent

3. The address of the registered office in Michigan (a P.O. Box may not be designated as the address of the registered office)

4. Describe the general nature and kind of business in which the corporation is engaged:

5.	NAME	BUSINESS OR RESIDENCE ADDRESS
	President (Required)	
If different than President	Secretary (Required)	
	Treasurer (Required)	
	Vice - President	
If different than Officers	Director	
	Director	
	Director	

6. Signature of authorized officer or agent	Title	Date	Phone (Optional)
Leonard J. Rancilio	Pres.	3-24-2014	

Filing fee $25

Report due May 15, 2014.

If received after May 15, penalty fees will be assessed.

Please make your check or money order payable to the State of Michigan.
Include payment with completed report in the same envelope.
Return to Corporations Division
P.O. Box 30481
Lansing, MI 48909
(517) 241-6470

OR File online at www.michigan.gov/fileonline

If more space is needed additional pages may be included. Do not staple any items to report. This report is required by Section 911, Act 284, Public Acts of 1972, as amended. Failure to file this report may result in the dissolution of the corporation. Late filing will result in penalty fees.

CORPORATE ENTITY DETAILS

Searched for: COLLISON & COLLISON, P.C.

ID Num: 380501

Entity Name: COLLISON & COLLISON, P.C.
Type of Entity: Domestic Professional Service Corporation
Resident Agent: JEFFREY C COLLISON
Registered Office Address: 5811 COLONY DR N SAGINAW MI 48608
Mailing Address: 5811 COLONY DR N P.O. Box 6010 SAGINAW MI 48608
Formed Under Act Number(s): 192-1962
Incorporation/Qualification Date: 7-13-1988
Jurisdiction of Origin: MICHIGAN
Number of Shares: 50,000
Year of Most Recent Annual Report: 15
Year of Most Recent Annual Report With Officers & Directors: 06
Status: ACTIVE **Date:** Present

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CSCL/CD-2500pc (01/14) DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS

PROFIT CORPORATION INFORMATION UPDATE

2014

Due May 15, 2014 **File Online at www.michigan.gov/fileonline**

Identification Number	Corporation name
380501	COLLISON & COLLISON, P.C.

Resident agent name and mailing address of the registered office

JEFFREY C COLLISON
5811 COLONY DR N
P.O. BOX 6010
SAGINAW MI 48608

FILED
MAY 02 2014
CORPORATIONS DIVISION

Tran Info:2 19564103-1 04/25/14
Chk#: 23085 Amt: $25.00
ID: 380501

The address of the registered office

5811 COLONY DR N
SAGINAW MI 48608

☒ To certify there are no changes from your previous filing check this box and proceed to Item 6.
If the resident agent and/or registered office has changed complete items 1-6 and attached list of shareholders.
If only officer and director and/or shareholder information has changed complete items 4-6 and shareholder list.

1. Mailing address of registered office in Michigan (may be a P.O. Box)

2. Resident Agent

3. The address of the registered office in Michigan (a P.O. Box may not be designated as the address of the registered office)

4. Describe the general nature and kind of business in which the corporation is engaged:

5.	NAME	BUSINESS OR RESIDENCE ADDRESS
If different than President	President (Required)	
	Secretary (Required)	
	Treasurer (Required)	
	Vice - President	
If different than Officers	Director	
	Director	
	Director	

6. Signature of authorized officer or agent	Title	Date	Phone (Optional)
	President	4/23/14	989-799-3033

Filing fee $25

Report due May 15, 2014.

If received after May 15, penalty fees will be assessed.

Please make your check or money order payable to the State of Michigan.
Include payment with completed report in the same envelope.
Return to : Corporations Division
P.O. Box 30702
Lansing, MI 48909
(517) 241-6470

OR File online at www.michigan.gov/fileonline

If more space is needed additional pages may be included. Do not staple any items to report. This report is required by Section 911, Act 284, Public Acts of 1972, as amended. Failure to file this report may result in the dissolution of the corporation. Late filing will result in penalty fees.

IBEW Local 557

Organize Today

Learn more about organizing your workplace!

Click Here

Local 557 - 75 years of Quality Electrical Installation

On November 29, 1929 the Charter to Local Union 557 was granted and signed by:

Fred A. Ross, W. J. Atherton, Winn Wilder, Richard Reinhardt, Alvin Darling, James Nolan, George D. Beck, Charles M. Berger, Conrad LaLonde, John R. Reams, Lester LaLonde, Charles Hendricks, Daniel Kearns, Murray Sills, Walter J. Behm, John Goodrich, and William C. Smelley.

The following facts were provided by the International Staff to the delegates at the October, 2006 International Convention in Cleveland, Ohio:

Saginaw, Michigan received their charter from the International Brotherhood of Electrical Workers on November 21, 1929. Prior to that three other cities were given the IBEW Local Union 557 designation, they were

Ryolite, Nevada in 1907
York, Pennsylvania in 1913
Minot, North Dakota in 1916.

Saginaw had three other IBEW Local Union designations prior to being assigned its current 557 designation. In 1895 Saginaw was Local Union 78, then in 1900 it was Local Union 145, and the last designation was Local Union 476 in 1913 before finally becoming Local Union 557 in 1929.

There also was an lineman local in Saginaw, Local Union 831 that was amalgamated with Local Union 17, of Detroit, in 1936.

The other IBEW Local Union in our area was in Local Union 1288 in Caro, established in 1941 which ceased to exist in 1944.

Support your local unions.

Contact Elected Officials!

Find My Reps

Search

IBEW Local 557

Home | Local 557 Info | Apprenticeship Info | Officers | Michigan IBEW | Contractor List | Photo Gallery | Contact Us

Member Login

Username:

Password:

Login

Not registered yet?
Click Here to sign-up

Forgot Your Login?

- Member Resources
- Member Home
- 557 JOB LINE
- Out Of Work List
- Wages & Benefits
- Benefit Plans Information
- Resign Information
- Buy Union Made
- Events Calendar
- Working Agreements
- Constitution/Bylaws
- Login

<< April 2016 >>

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

Organize Today

Learn more about organizing your workplace!

Click Here

Local 557 Info

SHARE

Office Hours

Monday - Friday
7:00am - 4:30pm

Contact

Phone: (989) 781-0516
Fax: (989) 781-0563

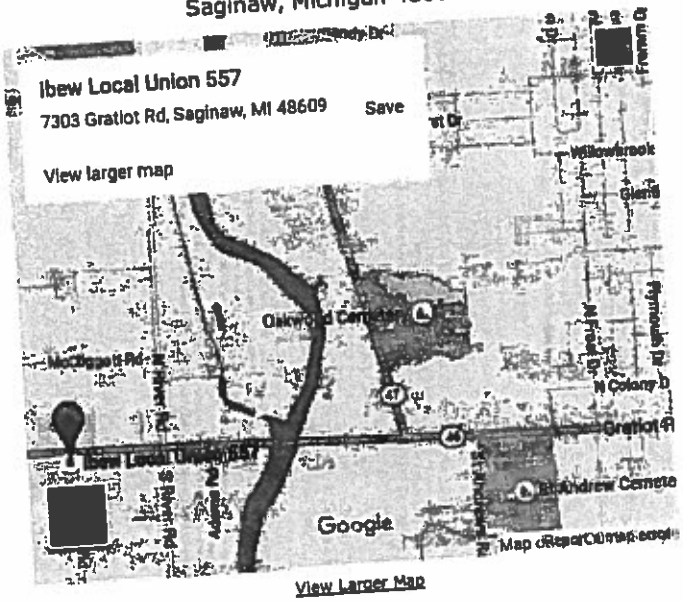
Job Line

Call (989) 781-0516 after 5 pm and hit 411 to listen to our job line, all calls will

be posted before being filled. Please have your page and line numbers available.

Where We Are

Local Union 557
7303 Gratiot Road
Saginaw, Michigan 48609



View Larger Map

Page Last Updated: Nov 25, 2013 (09:27:50)

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Important Links

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- Working Electricians
- NECA
- NJATC
- AFL-CIO
- Where2Bro
- Nuke Outages
- Unfilled calls Facebook
- Voter Info

Weather Report

Enter Zip GO

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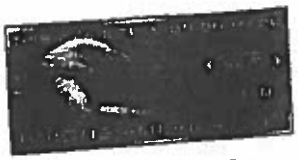


STATE OF MICHIGAN
RUTH JOHNSON, SECRETARY OF STATE
DEPARTMENT OF STATE
LANSING

July 1, 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 William Federspiel, which concerns an alleged violation of the Michigan Campaign Finance Act (MCFA), 1976 P.A. 388, MCL 169.201 *et seq*. A copy of the response is provided as an enclosure with this letter.

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

Sincerely,

Lori A Bourbonais

Lori A. Bourbonais
Bureau of Elections
Michigan Department of State

c: Jonathan E. Lauderbach

Warner Norcross&Judd LLP
ATTORNEYS AT LAW

JONATHAN E. LAUDERBACH
989.698.3701
jlauderbach@wnj.com

June 28, 2016

RECEIVED/FILED
MICHIGAN DEPT OF STATE
2016 JUN 30 AM 9:40
ELECTIONS/GREAT SEAL

VIA EMAIL AND OVERNIGHT DELIVERY

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

Re: **Response to Campaign Finance Complaints – William L. Federspiel**

Dear Ms. Bourbonais:

This letter serves as a response to the two complaints filed by Mr. Joseph J. Tomczyk on or about May 2, 2016 against our client, William L. Federspiel. The first complaint concerns the October 2014 Quarterly Report of the candidate committee Bill Federspiel for Sheriff (I.D. 101232, the "Committee") (the "2014 Complaint"). The second complaint concerns the October 2015 Quarterly Report of the Committee (the "2015 Complaint"). And while Mr. Tomczyk's complaints are directed only at Mr. Federspiel, the responses below to each item identified in the Complaints are submitted on behalf of both Mr. Federspiel and the Committee. In addition, amended October Quarterly Reports for 2014 and 2015 are being filed today with the Saginaw County Clerk, and copies are attached hereto for your reference as Exhibits 1 and 2, respectively.

Introduction

We note at the outset that none of the errors or omissions identified in the Complaints was either knowing or intentional. Rather, each of the errors or omissions highlights the need for training of campaign staff and for improved recordkeeping practices. To this end, the Committee has retained the accounting firm of Andrews Hooper & Pavlik, PLC ("AHP") to serve as its designated record keeper. An amended Statement of Organization to that effect is being filed contemporaneously with this response. AHP has a team of professionals that specialize in campaign finance compliance and reporting, and we believe its internal control system will prevent errors or omissions in the future.

2014 Complaint

Item 1 – Summary Page Cumulative Totals Are Missing

Item 1 of the 2014 Complaint alleges that the Report fails to disclose cumulative totals on the Summary Page in violation of MCL 169.226(2). This information was inadvertently omitted and has been included in the revised report attached to this letter.

Item 2 – Schedule 1A, Item 7 Cumulative Totals for Some Donors Are Missing

Item 2 of the 2014 Complaint alleges that cumulative donation totals are missing for some of the contributors listed on Schedule 1A in violation of MCL 169.226(1)(e). This information was inadvertently omitted and has been included in the revised report attached to this letter.

Item 3 - $300.00 Received from Rancillio & Associates

Item 3 of the 2014 Complaint alleges that the $300.00 listed in the report as received from Rancillio & Associates is improper as a contribution from a for-profit corporation in violation of MCL 169.254(1). This contribution has been refunded. This error was neither knowing nor intentional, and we believe that having professional staff review each contribution as it is received will prevent similar occurrences in the future.

By way of further explanation, we note that this contribution does not, on its face, indicate that Rancilio & Associates is a corporation. As you will note from the copy of the check attached to this letter as Exhibit 3, the payee on the check is simply identified as "Rancilio & Associates" without any indication whether that business enterprise is a partnership, limited liability company or corporation. If it were either of the former two, the contribution would not have been prohibited although attribution rules would have applied. We believe that the lack of indicia of corporate status on the check caused confusion on the part of the volunteer campaign staff. This confusion notwithstanding, as noted above, the contribution is being refunded.

Item 4 - $120.00 Received from Collison & Collison PC

Item 4 of the 2014 Complaint alleges that the $120.00 listed in the report as received from Collison & Collison PC is improper as a contribution from a for-profit corporation in violation of MCL 169.254(1). This contribution has been refunded. At the time the report was completed, the Committee's treasurer was not aware that "PC" was an abbreviation for "professional corporation". She was watching for designations such as "Inc." and "Corp." This error was neither knowing nor intentional, and we believe that having professional staff review each contribution as it is received will prevent similar occurrences in the future.

By way of further explanation, Collison & Collison is a law firm in Saginaw. To the best of the Committee's knowledge, information and belief, the firm has four attorney-shareholders. If the same four attorneys had organized their law firm as a professional limited liability company instead of as a professional corporation, the contribution could have been accepted so long as it was properly attributed. We believe that under these circumstances, the distinction between the Committee's ability to accept a donation from a limited liability company but not from a professional corporation having the identical capital structure is largely arbitrary. As noted in the Attorney General's Opinion from 1994 on LLC contributions, the prohibition on corporate contributions is "to prevent uninformed or unwilling shareholder resources from being used to influence elections". Op.Atty.Gen. 1994, No. 6807. And because the Attorney General found that danger was not present in a Michigan LLC he concluded that contributions from LLC's are not prohibited. That danger is similarly not present in a Michigan professional

corporation. In a Michigan PC each shareholder must be a licensed professional in the field in which the organization is providing services. MCL 450.1281, 1288. While any individual could be a member of a Michigan LLC, an much smaller pool of individuals is eligible to participate in a Michigan PC. Further, the actions of a PC are more constrained than that of an LLC, as a PC "shall not engage in any business other than the rendering of the professional services for which it was specifically incorporated." MCL 450.1287. All of this keeps the ownership numbers in PC organizations small and therefore prevents the dangers identified by the Attorney General from developing. Functionally, the only difference between a PC and a PLLC is tax treatment, a factor which has no bearing on improper attempts to influence elections. We believe that this mitigating factor should be taken into account in this case.

Item 5 - $400.00 Received from Mr. Tom Laatsch

Item 5 of the 2014 Complaint alleges that the $400.00 listed in the report as received from Mr. Tom Laatsch is improper as the report does not list his primary business location. This information was inadvertently omitted and has been included in the revised report attached to this letter.

Item 6 - $200.00 Received from the Local #557 of the IBEW

Item 6 of the 2014 Complaint alleges that the $200.00 listed in the report as received from "Local Union #557, International Brotherhood of Electrical Workers" is improper as it was received from a labor organization in violation of MCL 169.254(1). We believe that the Committee's volunteer campaign staff did not understand the distinction between the labor organization and an associated PAC (which had made prior contributions to the Committee) and therefore mistakenly believed that the contribution could be accepted. This error was neither knowing nor intentional, and we believe that having professional staff review each contribution as it is received will prevent similar occurrences in the future. That said, this contribution is being refunded.

2015 Complaint

Item 1 – Summary Page Cumulative Totals Are Missing

Item 1 of the 2015 Complaint alleges that the Report fails to disclose cumulative totals on the Summary Page in violation of MCL 169.226(2). This information was inadvertently omitted and has been included in the revised report attached to this letter.

Item 2 – Schedule 1B Showing Itemized Expenditures is Missing

Item 2 of the 2015 Complaint alleges that Schedule 1B showing the detail to support the $7,382.36 in campaign expenditures shown on the Summary Page is a violation of MCL 169.226(1)(j). This schedule was accidentally omitted from the report. A copy of the completed schedule accompanies this letter.

Item 3 – Schedule 1A, Item 7 Cumulative Totals for Some Donors Are Missing

Item 3 of the 2015 Complaint alleges that cumulative donation totals are missing for some of the contributors listed on Schedule 1A in violation of MCL 169.226(1)(e). This information was inadvertently omitted and has been included in the revised report attached to this letter.

Item 4 – Two Anonymous $20.00 Contributions

Item 4 of the 2015 Complaint alleges that the two $20.00 contributions listed in the Report with no donor identification are in violation of MCL 169.226(1)(e). The Committee received these donations in cash, as allowed, but was unaware that donor information still needed to be provided. This information is included in the revised report attached to this letter.

Item 5 - $120.00 Received from the Local #557 of the IBEW

Item 5 of the 2015 Complaint alleges that the $120.00 listed in the report as received from "Local Union #557, International Brotherhood of Electrical Workers" is improper as it was received from a labor organization in violation of MCL 169.254(1). We believe that the Committee's volunteer campaign staff did not understand the distinction between the labor organization and an associated PAC (which had made prior contributions to the Committee) and therefore mistakenly believed that the contribution could be accepted. This error was neither knowing nor intentional, and we believe that having professional staff review each contribution as it is received will prevent similar occurrences in the future. That said, this contribution is being refunded.

Item 6 - $300.00 Received from Lake State Railway

Item 6 of the 2015 Complaint alleges that the $300.00 listed in the report as received from Lake State Railway is improper as a contribution from a for-profit corporation in violation of MCL 169254(1). This contribution has been refunded. This error was neither knowing nor intentional, and we believe that having professional staff review each contribution as it is received will prevent similar occurrences in the future.

Item 7 - $100.00 Received From Mr. David Ortega

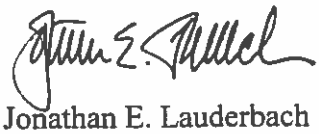
Item 7 of the 2015 Complaint alleges that the $100.00 listed in the report as received from Mr. David Ortega is improper as no address is listed in violation of MCL 169.226(1)(e). Mr. Ortega's address was inadvertently omitted on the report. It has been included on the corrected report attached to this letter.

Conclusion

Mr. Federspiel and the Committee have diligently committed themselves to correcting any errors and omissions in the 2014 and 2015 Quarterly Reports. None of the errors in the reports was done knowingly or with any intention of violating the Michigan Campaign Finance

Act. We request, on behalf of our client, that this matter be addressed through the conference and conciliation procedures of MCL 169.215(10) and we stand ready to provide such assurances as the Bureau deems appropriate to ensure compliance in the future.

Very truly yours,



Jonathan E. Lauderbach

JEL/adb
cc: Mr. William L. Federspiel

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

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

3. This Statement covers From 07/21/14 to 10/20/14

1. Committee I.D. Number
101232

2. Committee Name
Bill Federspiel for Sheriff

4. Candidate Last Name: Federspiel First Name: William M.I.: L

4a. Office Sought Including District # or Community Served (If applicable)
Sheriff

4b. County of Residence **SAGINAW**

5. Committee's Mailing Address
PO Box 5281
Saginaw, MI 48603

Area Code and Phone (989) 714-0968
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

6. Treasurer's Name & Residential Address
Mandy Federspiel
2159 Manchester Dr.
Saginaw, MI 48609

Area Code & Phone (989) 714-0968

7. Treasurer's Business Address
N/A

Area Code and Phone

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)
Kim Holzhauer
5915 Eastman Ave., Suite 100
Midland, MI 48640

Area Code and Phone (989) 835-7721

9. TYPE OF STATEMENT

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

Pre-Election or Post-Election Statement relates to:

☐ Primary
☐ General
☐ Convention
☐ Special
☐ School
☐ Caucus

Date of Election, Convention or Caucus

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

☐ July Quarterly
☒ October Quarterly

9c. ☐ Annual Statement (_____) Coverage Year

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

9e. Dissolution of Candidate Committee

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

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

Effective date of dissolution

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

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

Current Treasurer or Designated Record keeper: Kim Holzhauer (Type or Print Name), [signature] (Signature), Date 6/28/2016

Candidate: William L. Federspiel (Type or Print Name), [signature] (Signature), Date 6/28/2016

Authority granted under P.A. 388 of 1976

COPY

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ORIGINAL OR AMENDED
STATEMENT OF ORGANIZATION FORM FOR CANDIDATE COMMITTEES
Information on this form is made public.

1. Committee ID #: 101232

*2. Type of Filing: ☐ Original: ☒ Amendment to Items: 8, 9 Eff. Date: 06/27/16

*3. Full Name of Committee (must include Candidate's first and last name):

*4a. Candidate Full Name: Last Name First Name M.I.

*4b. Political Party (if applicable): *4c. County of Residence:

*4d. Office Sought: *4e. District/Circuit # or Jurisdiction:

*5. Date Committee was Formed:

*6a. Committee Phone: 6b. Committee Fax #:

*6c. Committee Primary Email Address: 6d. Committee Website Address:

*7a. Complete Committee Mailing Address (May be PO Box):

*7b. Complete Committee Street Address (May not be PO Box):

*8. Treasurer Name and Complete Address: Mandy B. Federspiel 2159 Manchester Dr., Saginaw MI 48609
Phone # (989) 714-0968 Email Address: mandy_federspiel@hotmail.com

9. Designated Record Keeper Name and Complete Address: Kim Holzhauer 5915 Eastman Ave. Suite 100, Midland, MI 48640
Phone # (989) 835-7721 Email Address: Kim.holzhauer@ahpplc.com

*10. REPORTING WAIVER REQUEST:

☐ YES, I/We WANT TO APPLY FOR THE REPORTING WAIVER. The committee does not expect to receive or expend in excess of $1,000 in an election. I/We understand that if the committee does not spend or received in excess of $1,000 in an election, the committee does not owe Pre, Post, Quarterly and Annual Campaign Statements. I/We further understand that the Reporting Waiver will be automatically lost if the committee exceeds the $1,000 threshold and all required campaign statements must be filed. A Reporting Waiver does not exempt a committee from filing Late Contribution Reports.

☐ NO, I/We DO NOT WANT TO APPLY FOR THE REPORTING WAIVER. The committee expects to receive or expend in excess of $1,000 in an election. I/We understand that the committee owes Pre, Post, Quarterly and Annual Campaign Statements even if the committee does not spend or receive in excess of $1,000 in an election. I further understand that the Reporting Waiver cannot be requested retroactively to avoid filing requirements and to avoid paying late filing fees. Further information regarding Reporting Waivers can be found in Appendix C of the Committee Manual.

*11. Name and Address of Depositories or Intended Depositories of committee funds. (Michigan Bank, Credit Union or Savings & Loan Association) While this item must be completed, an account does not have to be opened until the first contribution is received.

*Official Depository (name and address):

Secondary Depository (name and address):

12. ☐ This item applies only to Gubernatorial Candidate Committees: Check if this committee intends to seek qualifying contributions or make qualifying expenditures.

13. ELECTRONIC FILING: This item applies to committees that file with the Michigan Department of State Bureau of Elections only and does not apply to Candidate Committees that file with the County Clerk's office.

☐ Committee spent or received or expects to spend or receive in excess of $5,000 and is required to file electronically.

☐ Committee did not spend or receive or does not expect to spend or receive in excess of $5,000 and would like to file electronically voluntarily.

Further information regarding Electronic Filing can be found in Appendix D of the Committee Manual.

14. Verification: I/We certify that all reasonable diligence was used in the preparation of the above statement and that the contents are true, accurate and complete to the best of my/our knowledge or belief. If filing campaign statements electronically, we further agree that the signatures below shall serve as the signatures that verify the accuracy and completeness of each statement filed electronically by the committee. I/We certify that all reasonable diligence will be used in the preparation of each statement electronically filed by this committee and that the contents of each statement will be true, accurate and complete to the best of my/our knowledge or belief. (Sign Name and Date)

*Candidate: Wm Federspiel Date: 6/27/16 *Current Treasurer Mandy Federspiel Date: 06-27-16

*Designated Record Keeper (If Applicable) Date:

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 101232

SUMMARY PAGE
CANDIDATE COMMITTEE

2. Committee Name Committee To Elect Bill Federspiel Sheriff

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) $	9,390.00	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $	$9,390.00	(18.) $ 22,245
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) $	$0.00	(19.) $
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) $	$9,390.00	(20.) $ 22,245
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) $	$0.00	(21.) $ 0
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) $	$0.00	(22.) $ 0
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) $	$6,529.47	
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.) $	$6,529.47	(23.) $ 25,961.79
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) $	$0.00	
b. Unitemized (less than $50.01 each - no Schedule)	(10b.) $	$40.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) $	$40.00	(24.) $ 40.00
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) $	$0.00	
b. Owed to the Committee (Schedule 1E)	(12b.) $	$0.00	

BALANCE STATEMENT

13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) $	$1,095.71
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + $	$9,390.00
15. SUBTOTAL Add lines 13 and 14	(15.) = $	$10,485.71
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $	$6,569.47
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	$3,916.24

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Local Union #557 Int'l Brotherhood of Electrical Workers 7303 Gratiot Rd Saginaw MI 48609 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 200.00	$ 200.00 Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Mary Jo Weise 9135 Greenway Ct. K163 Saginaw MI 48609 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 40.00	$ 40.00 Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Horn, Kenneth B. 1 Sunburst Ct Frankenmuth MI 48734 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 100.00	$ 100.00 Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☑ YES 4. Date of Receipt 7-31-14 Name & Address MI Laborers Political League 1118 Centennial Way Ste 100 Lansing MI 48917 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 250.00	$ 250.00 Click Here for Memo Itemization

Page Subtotal 590.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) ~~[illegible]~~ Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Saginaw County Democratic Exec. Committee 122 N. Michigan Ave Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 100.00	$ 100.00 Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Collison + Collison PC 5811 Colony Dr. N PO Box 6010 Saginaw MI 48608 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 120.00	$ 120.00 Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☑ YES 4. Date of Receipt 7-31-14 Name & Address: Plumbers + Steam Fitters 85 P.A.C. 6705 Weiss St Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 200.00	$ 700.00 Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address T + M Investments 602 Hancock St Saginaw MI 48602 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 100.00	$ 100.00 Click Here for Memo Itemization

Page Subtotal 520.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 1110.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232
2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Hare, Marvin D. 1396 W. Delta Dr Saginaw MI 48638 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 20.00	$ 20.00 Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Stack, Chuck 5708 Venoy Rd Saginaw MI 48604 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 40.00	$ 40.00 Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Hare, Ann M. 4884 Cherokee Rd Saginaw MI 48604 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 40.00	$ 40.00 Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address McIntyre, Kathleen 1300 Wieneke Rd Saginaw MI 48638 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 100.00	$ 100.00 Click Here for Memo Itemization

Page Subtotal 200.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 1310.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 101232

2. Committee Name Committee To Elect Bill Federspiel for Sheriff

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: De Francesco, Joseph G 320 Superior Saginaw, MI 48602 5. If over $100.00 cumulative, please provide: Occupation retired Employer Business Address Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 60.00	$ 100
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address McCdgan, Susan M. 525 Westchester Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 40.00	$ 40.00
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address: Muehlenbeck, M.F 3795 N. Center Rd Apt 100 Saginaw MI 48603 5. If over $100.00 cumulative, please provide: Occupation retired Employer Business Address Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 100.00	$ 100.00
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7-31-14 Name & Address Hoeme, Patricia A. 2568 S. Orr Rd Freeland MI 48623 5. If over $100.00 cumulative, please provide: Occupation Retired Employer Business Address Type of Contribution: ☐ Direct ☐ Loan from a person ☑ Fund Raiser	$ 100.00	$ 180.00

Click Here for Memo Itemization

Page Subtotal 300.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 1610.00

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