

LEGAL DEFENSE FUND COVER PAGE

Report must be legible, typed or printed in link and signed by the Treasurer/Designated Record Keeper and Official.

FOR OFFICIAL USE ONLY

and Official.	
1a. Legal Defense Fund I.D. Number: LDF-016	2a. Official's Full Name: Jessica Madeleine Flintoft
1b. Legal Defense Fund Name: Legal Defense Fund for Scio Township Clerk Jessica Filntoft 1c. Legal Defense Fund Address: 865 North Wagner Road Ann Arbor, MI 48103	2b. Official's Office: Scio Township Clerk
1d. Legal Defense Fund Phone:	
3a. Treasurer's Full Name: David S. Read 3b. Treasurer's Residential Address: 713 Merlin Way Dexter, MI 48130	3c, Treasurer's Business Address: 713 Merlin Way Dexter, MI 48130
	3d. Treasurer's Phone Number(s): 7346577569
4a. Quarterly Transaction Report Covering: X January 1 - March 31; Due: April 25th April 1 - June 30; Due: July 25 th July 1 - September 30; Due: October 25th October 1 - December 31; Due: January 25th 4b. Amendment to Transaction Report: also mark (4a) to indicate which Report is being amended)	5. Dissolution of Legal Defense Fund: Effective Date of Dissolution
6. Verification: I\We certify that all reasonable diligence the best of my\our knowledge and belief the contents a	was used in the preparation of this statement and attached schedules (if any) and to re true, accurate and complete.
Official's Signature and Date:	1) Date: Dariel & Man 4, 1, 2024
 Treasurer's/Designated Record Keeper's Signature and	1 Date: Janua X (Class 9, 1, 2024

Clear Form

LEGAL DEFENSE FUND SUMMARY PAGE

FOR OFFICIAL USE ONLY

Summary Page

4. Cantalla stiana	Column I This Period 1a. \$ 33,140.00	Column II Cumulative Calendar Year 1b. \$ 331 4 5.00
1. Contributions	0.00	2b. \$ 0.00
2. In-Kind Contributions	2α. Ψ	
3. TOTAL CONTRIBUTIONS	_{3а. \$} <u>33,140.00</u>	3b. \$ 33, 140.00
4. Itemized Expenditures	4a. \$ 32,600.00	
5. Unitemized Expenditures (less than \$50.01 each - no Schedule)	_{5a. \$} 0.00	
6. TOTAL EXPENDITURES	6a. \$ 32,600.00	6b. \$32,600.00
ВА	LANCE STATEMENT	
7. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	_{7. \$} 361.54	
Amount received during reporting period (Item 1a.)	8. \$ 33,140.00	· ·
). SUBTOTAL Add lines 7 and 8	_{9. \$} 33,501.54	
O. Amount expended during reporting period (Item 6a.)	10. \$ 32,600.00	, <u>.</u>
11. ENDING BALANCE	11.\$ 901.54	*
(Subtract line 10 from line 9)	* The ending balance must always be	n nositiva number

ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

LDF-016 Legal Defense Fund for Scio Township Clerk Jessica Flintoft

Enter contributor's name and address.	5. Amount	6. Amount (In-Kind)	7. Cumulative
Name and Address: 3. Date of Receipt: 2/8/2024 Jessica Flintoft			
865 North Wagner Road Ann Arbor, MI 48103	\$ [16,320.00]	\$ 0.00	\$16,320.00
4. If over \$100.00 cumulative, please provide: Occupation: Township Clerk			
Employer: Scio Township Place of Business: 827 N. Zeeb Pd, Ann Arbor, MI			
Name and Address:			,
865 North Wagner Road Ann Arbor, MI 48103	\$ 16,320.00	\$ 0.00	\$32,640.00
4. If over \$100.00 cumulative, please provide: Occupation: Township Clerk Employer: Scio Township Place of Business:		,	:
Name and Address: 3. Date of Receipt: 2/8/2024			
Patricia Stein 1413 S. Zeeb Road	\$100.00	\$ 0.00	\$100,00
Ann Arbor, MI 48103 4. If over \$100.00 cumulative, please provide: Occupation: Retired	* [.33.33	+ [2.03	*100,00
Employer: Place of Business:		1	
2. Name and Address: 3. Date of Receipt: 2/21/2024			
Gil Crisman 3510 Bradford Sq. Drive			
Ann Arbor, MI 48103	\$200.00	\$0.00	\$200.00
4. If over \$100.00 cumulative, please provide: Occupation: Retired			
Employer: Place of Business:			
Name and Address: 3. Date of Receipt: 3/26/2024 Patricia Stein			
1413 S. Zeeb Road Ann Arbor, MI 48103	\$100.00	\$ 0./00	\$200.00
4. If over \$100.00 cumulative, please provide: Occupation: Retired			,
Employer: Place of Business:			
Name and Address: 3. Date of Receipt: 3/26/2024 William Stein		-	
1413 S. Zeeb Road Ann Arbor, MI 48103	\$ 100.00	\$0.00	\$100.00
4. If over \$100.00 cumulative, please provide: Occupation: Retired			
Employer: Place of Business:			
Page Subtotal:	\$ 33,140.00	\$ 0.00	\$ 49,560.00
Grand Total: (Complete on last page of Schedule)	\$ 33,140.00	\$ 0.00	\$ 49,560.00
Page of	Forward to #1 Summary Page	Forward to #2 Summary Page	



ITEMIZED EXPENDITURES	1.	Legal Defense Fund I.D. Number an F-016 Legal Defense Fund for Scio Town	d Name:	Flintoft
SCHEDULE 2 LEGAL DEFENSE FUND		r-016 Legal Deletise Fulld for 300 10wil	suith Clark nessing	a i iii ii.Oii.
Name and address of person or vendor paid		3. Purpose	4. Date	5. Amount
Dykema Gossett PLLC 400 Renaissance Center Detroit, MI 48243	•	Legal Fees	2/20/2024	\$ 32,600.00
				\$
	· · · · · · · · ·			\$
	,			\$
			****	\$
				\$
	(1 			\$
				\$
	1			\$
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•				\$
	((Page Subtotal Grand Total Complete on last page of Schedule)	,	\$ 32,600.00 \$ 32,600,00
Page 1 of 1		,		Forward to #3 Summary Page



received via disclosure@michigan.gov 01/15/2024

LEGAL DEFENSE FUND COVER PAGE

Report must be legible, typed or printed in link and signet by the Treasurer/Designated Record Keeper and Official

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signed by the Treasurer/Designated Record Reeper and Official.	
1a. Legal Defense Fund I.D. Number: 1b. Legal Defense Fund Name: Legal Defense Fund for Scio Township Clerk Jesska Flintoft 1c. Legal Defense Fund Address: 865 North Wagner Road Ann Arbor, MI 48103	2a. Official's Full Name: Jessica Madeleine Flintoft _{2b. Official's Office:} Scio Township Clerk
1d. Legel Defense Fund Phone:	
3a. Treasurer's Full Name: David S. Read 3b. Treasurer's Residential Address: 713 Merlin Way Dexter, MI 48130	3c. Treasurer's Business Address: 713 Meriin Way Dexter, Mil 48130
	3d. Treasurer's Phone Number(s):
4a. Quarterly Transaction Report Covering: January 1 - March 31; Due: April 25th April 1 - June 30; Due: July 25 th July 1 - September 30; Due: October 25th October 1 - December 31; Due: January 25th 4b. Amendment to Transaction Report: also mark (4a) to indicate which Report is being amended)	5. Dissolution of Legal Defense Fund: Effective Date of Dissolution /// By checking this item, I/We certify that the Legal Defense Fund has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on itemized Expenditure Schedule 2 and the Summary Page.
6. Verification: I\We certify that all reasonable diligence the best of my\our knowledge and belief the contents a	was used in the preparation of this statement and attached schedules (if any) and to re true, accurate and complete.
Official's Signature and Date: Treasurer's/Designated Record Keeper's Signature and	Date: David Meas 1,5,2024



LEGAL DEFENSE FUND SUMMARY PAGE

Clear Form

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Summary Page

	Column I This Period	Column II Cumulative Calendar Year
1. Contributions	1a. \$ 9,220.00	_{1b. \$} 32,747.70
2. In-Kind Contributions	_{2a. \$} 0.00	_{2b. \$} 1,295.55
3. TOTAL CONTRIBUTIONS	_{3a. \$} 9,220.00	3b. \$ 34,043.25
4. Itemized Expenditures	4a. \$ 9,221.54	
Uniternized Expenditures (less than \$50.01 each - no Schedule)	_{5a. \$} 0.00	
6. TOTAL EXPENDITURES	6a. \$ 9,221.54	6b. \$23,104.47
BAI	LANCE STATEMENT	
7. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	7. \$ 363.08	
Amount received during reporting period (Item 1a.)	_{8. \$} 9,220.00	
9. SUBTOTAL Add lines 7 and 8	9, \$ 9,583.08	
10. Amount expended during reporting period (Item 6a.)	10. \$ 9,221.54	·
11. ENDING BALANCE	11. \$ 361.54	*
(Subtract line 10 from line 9)	* The ending balance must always	be a positive number.



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

LDF-016 Legal Defense Fund for Scio Township Clerk Jessica Flintoft

Enter contributor's name and address.		5. Amount	6. Amount (In-Kind)	7. Cumulative
Name and Address: Marci Feinberg 3498 Timberwood	3. Date of Receipt: 10/3/23			
Ann Arbor, MI 48103		\$ 100.00	\$ 0.00	\$200.00
4. If over \$100.00 cumulative, please provide:	Occupation: Retired			•
Employer: Pla				
2. Name and Address: Nancy Burbano 519 Woodgrove Dr. Ann Arbor, MI 48103	3. Date of Receipt: 10/3/23	\$ [100.00	\$ 0.00	\$175,00
4. If over \$100.00 cumulative, please provide;				
Employer: Pla	ce of Business:			···· · · · · · · · · · · · · · · · · ·
Name and Address: Beth Lawless State	3. Date of Receipt: 10/3/23			
Ann Arbor, MI 48103		\$50.00	\$ 0.00	\$50.00
4. If over \$100.00 cumulative, please provide:	Occupation:			
Employer: Pla	ce of Business:			•
2. Name and Address:	3. Date of Receipt: 10/3/23			
Gretta Spier 3650 Huron River Dr. Ann Arbor, MI 48103	Potirod	\$100.00	\$ <mark>0.00</mark>	\$300.00
4. If over \$100.00 cumulative, please provide:	Occupation: netifed			
Employer: Pla	ace of Business:			
 Name and Address: Pam Boyd Linden Lane Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: 	3. Date of Receipt: 10/3/23 Occupation: Retired	\$100.00	\$ 0.00	\$200.00
•	ace of Business:			
Name and Address: Kathleen Brant 2534 Roseland Dr.	3. Date of Receipt: 10/3/23			
Ann Arbor, MI 48103		\$ 100.00	\$0.00	\$200.00
4. If over \$100.00 cumulative, please provide:	Occupation: Retired			
	ace of Business:			
	Page Subtotal:	\$ 550.00	\$ 0.00	\$1,125.00
	Grand Total: (Complete on last page of Schedule)	\$	\$	\$
Page of		Forward to #1 Summary Page	Forward to #2 Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

Legal Defense Fund I.D. Number and Name:

I DF-016 Legal Defense Fund for Scio Township Clerk Jessica Flintoft

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	EDF-016 Legal Deletise Full	a lor colo fow	Horip Clerk dea	ora i mnon
Enter contributor's name and address.		5. Amount	6. Amount (In-Kind)	7. Cumulative
Name and Address: Sheraine Sabbagh 4138 Sunset Court Ann Arbor, MI 48103	of Receipt: 10/3/23	\$ 5.00	\$ 0.00	\$5.00
4. If over \$100.00 cumulative, please provide: Occupation:				
Employer: Place of Busine	ss:			
 Name and Address: Maxwell Urquhart 46611 Spinning Wheel Dr. Canton, MI 48187 	of Receipt: 10/5/23	\$ 100.00	\$ 0.00	\$100.00
4. If over \$100.00 cumulative, please provide: Occupation:				
Employer: Place of Busine	ss:			,
Name and Address: Deborah Webster 3100 Huron River Drive Ann Arbor, MI 48103 4. If over \$100.00 cumulative, please provide: Occupation:	of Receipt: 10/6/23	\$[00.00	\$ [0.00]	\$100.00
Employer: Place of Busine	ss:			
 Name and Address: Mary Gillis 560 Little Lake Dr., Unit 10 Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: 	of Receipt: 10/6/23 Deputy Clerk	\$200.00	\$ <mark>0.00</mark>	\$5,400.00
Employer: Scio Township Place of Busine	827 N. Zeeb Rd, Ann Arbor, M 48103			
Name and Address: David Read 713 Merlin Way Dexter, MI 48130 4. If over \$100.00 cumulative, please provide: Occupation:	of Receipt: 10/10/23	\$500.00	\$ 0.00	\$ <mark>1,105.00</mark>
Employer: Place of Busine				
2. Name and Address: 3. Date Carlyle Towers 560 Little Lake Drive Ann Arbor, MI 48103 4. If over \$100.00 cumulative, please provide: Occupation: Employer: Place of Busine		\$ 100.00	\$0.00	\$250.00
7, 200 01 00011	Page Subtotal:	\$ 1,005.00	\$ 0.00	\$6,960.00
(Complete	Grand Total: on last page of Schedule)	\$	\$	\$
Page of		Forward to #1 Summary Page	Forward to #2 Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

LDF-016 Legal Defense Fund for Scio Township Clerk Jessica Flintoft

Enter contributor's name and address.	5. Amount	6. Amount (In-Kind)	7. Cumulative
2. Name and Address: 3. Date of Receipt: 10/10/23			
Harvey Somers			
2129 Autumn Hill Dr.	¢ 50.00	\$ 0.00	\$150.00
Ann Arbor, MI 48103	\$ 50.00	∌ b.00	Ψ130.00
4. If over \$100.00 cumulative, please provide: Occupation: Retired			!
Employer: Place of Business:		No.	
Name and Address: 3. Date of Receipt: 10/10/23			
Jon Norton	-		
2224 Zeeb Rd	\$ 25.00	\$ 0.00	\$75.00
Dexter, MI 48130	Ψ 2.0.00	Ψ 	41,0,00
4. If over \$100.00 cumulative, please provide: Occupation:			
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt: 10/10/23			
Harley Schwadron			
3651 Pheasant Dr			
Ann Arbor, MI 48103	\$50.00	\$ 0.00	\$50.00
4. If over \$100.00 cumulative, please provide: Occupation:			
The interest of the second continuative, please provide. Occupation,			
Employer: Place of Business:			
Name and Address: 3. Date of Receipt: 10/10/23	,		
David Spicer			
525 Baker Rd			
Dexter, MI 48130	\$100.00	\$0.00	\$150.00
4. If over \$100.00 cumulative, please provide: Occupation: Retired	· 		
4. If over \$100.00 cumulative, please provide: Occupation:			
Employer: Place of Business:			
Name and Address: 3. Date of Receipt: 10/10/23			
Sara Fink			
1215 Shady Lane	6 		
Ann Arbor, MI 48103	\$75.00	\$ 0.00	\$75.00
4. If over \$100.00 cumulative, please provide: Occupation:			
		1	
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt: 10/10/23			
Rena Basch			
4260 Shetland Dr.	\$ 55.00	\$0.00	\$105.00
Ann Arbor, MI 48105	+ 20,00	+0.00	4100.00
4. If over \$100.00 cumulative, please provide: Occupation: Clerk			
Employer: Ann Arbor Township Place of Business:			
Page Subtotal:	\$ 355.00	\$ 0.00	\$605.00
Grand Total: (Complete on last page of Schedule)	\$	1 \$	\$
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Page of	#1 Summary Page	#2 Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

LDF-016 Legal Defense Fund for Sclo Township Clerk Jessica Flintoft

Enter contributor's name and address.		5. Amount	6. Amount (In-Kind)	7. Cumulative
Name and Address: 3. Date o Dagmar Moore	f Receipt: 10/10/23			·
3535 West Delhi RD	·	\$ 250.00	\$ 0.00	\$250.00
Ann Arbor, MI 48103	_ 11 m _ d	Ψ Εσσ.σσ	Ψ [0.00	* <u> </u>
4. If over \$100.00 cumulative, please provide: Occupation: R	etired			:
Employer: Place of Busines	s			V
	f Receipt: 10/10/23			
Jonathan Greenberg 6089 Green Mountain Circle		A 555 55	¢ 5.00	2400.00
Ann Arbor, MI 48103		\$ 360.00	\$ 0.00	\$460.00
4. If over \$100.00 cumulative, please provide: Occupation:	irector of Data			
Employer: Cogitate Place of Busines	s: Home			
Name and Address: 3. Date of	of Receipt: 10/10/23			
Mary Gillis				
560 Little Lake Dr., Unit 10 Ann Arbor, MI 48103		\$ 50.00	\$ 0.00	\$450.00
4. If over \$100.00 cumulative, please provide: Occupation:	eputy Clerk	T 1	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Caia Taumahin	827 N. Zeeb Rd, Ann Arbor, MI	·		
				,
	of Receipt: 10/10/23			
Courtney Taylor 10571 N. Territorial Rd.		:		
Dexter MI 48130		\$250.00	\$0.00	\$250.00
4. If over \$100.00 cumulative, please provide: Occupation.	hysician Assistant			
Employer: Trinity Health Place of Busines	1			
i	of Receipt: 10/10/23			
Jeff Jackson				
4910 Dexter Ann Arbor Rd Ann Arbor, MI 48103		\$100.00	\$ 0.00	\$200.00
4. If over \$100.00 cumulative, please provide: Occupation: L	Director of Data			
Employer: Orion Systems Inc Place of Busines	1705 WOODIENO Dr. Sailne, Mi 1			
Name and Address: 3. Date of	of Receipt: ro/10/23			
Elizabeth Brien	, ,		,	
PO Box 1468, Ann Arbor, MI 48106	•	\$ 200.00	\$0.00	\$200.00
4. If over \$100.00 cumulative, please provide: Occupation:	Real Estate Sales			
Employer: Rienhart Realtors Place of Busines	2275 Th. Outplut II, Pull (ALDU), MI			
	Page Subtotal:	\$ 1,210.00	\$ 0.00	\$1,810.00
///	Grand Total:			
(Complete o	n last page of Schedule)	\$ Forward to	Forward to	PL
Page of	·	#1 Summary Page	#2 Summary Page	
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ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

LDF-016 Legal Defense Fund for Scio Township Clerk Jessica Filntoft

ļ.				
Enter contributor's name and address.		5. Amount	6. Amount (In-Kind)	7. Cumulative
2. Name and Address: 3. Date of	Receipt: 10/10/23			
Jon Boyd				
517 Linden Lane		\$ 100.00	\$ 0.00	\$200.00
Ann Arbor, MI 48103	and France Colon	<u> </u>	······································	-
4. If over \$100.00 cumulative, please provide: Occupation:	eal Estate Sales			
Employer: Buyersagentannarbor.com Place of Business	Home			
2. Name and Address: 3. Date o	f Receipt: 10/11/23	•		
Frode Maaseidvaag				
5127 Ann Arbor Dexter Rd.		\$ 200.00	\$ 0.00	\$200.00
Ann Arbor, MI 48103	_ k! ul			
4. If over \$100,00 cumulative, please provide: Occupation:				
Employer: Place of Busines	S:			
2. Name and Address: 3. Date of	f Receipt: 10/17/23			
Daryl DePestal				
6821 Bridgewood Hills Dr.			ф (5-5-	ACT
Dexter, MI 48130	harmasiat	\$500.00	\$ 0.00	\$500.00
4. If over \$100.00 cumulative, please provide: Occupation:	Harmacist			
	s:		ı	
2. Name and Address: 3. Date of	f Receipt: 10/23/23			
James Knol	, , , , , , , , , , , , , , , , , , , 			
1778 Snowberry Ridge Rd			<u>.</u>	
Ann Arbor, MI 48103	<u> </u>	\$250.00	\$0.00	\$450.00
4. If over \$100.00 cumulative, please provide: Occupation: \mathbb{R}	etired			
Employer: Place of Busines	s:			
Name and Address: 3. Date of	f Receipt: 10/23/23			
Robert Bailey				
424 Little Lake Dr, Apt 13		\$200.00	\$ 0.00	\$ 250.00
Ann Arbor, MI 48103	الم ما المما	<u> </u>	Ψ 0.00	<u> </u>
4. If over \$100.00 cumulative, please provide: Occupation:	etirea			
Employer: Place of Busines			4	
	of Receipt: 10/23/23			
Pat Stein	————————————————————————————————————			
1413 S. Zeeb Rd		\$ 200.00	\$5.00	¢050.00
Ann Arbor, MI 48103	latirad	4 K00'00	\$0.00	\$350.00
4. If over \$100.00 cumulative, please provide: Occupation:				٠ .
Employer: Place of Busines	·S:			
	Page Subtotal:	\$ 1,450.00	\$ 0.00	\$1,950.00
	Grand Total:	_	,	
(Complete o	n last page of Schedule)	\$	\$	\$
Page of		Forward to #1 Summary Page	Forward to #2 Summary Page	
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ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

Legal Defense Fund I.D. Number and Name:

Legal LDF-016 Defense Fund for Sclo Township Clerk Jessica Flintoft

	···	· · · · · · · · · · · · · · · · · · ·		
Enter contributor's name and address.		5. Amount	6. Amount (In-Kind)	7. Cumulative
	Receipt: 11/3/23			
Janet Haynes				
1410 S. Zeeb Road		\$ 50.00	\$ 0.00	\$50.00
Ann Arbor, MI 48103			,	
4. If over \$100.00 cumulative, please provide: Occupation:				
Employer: Place of Business:				
	Receipt: 12/9/23			
Jon Norton 2224 Zeeb Road				
Dexter, MI. 48130		\$ 25.00	\$ 0.00	\$100.00
4. If over \$100.00 cumulative, please provide: Occupation: Re	tired			
Employer: Place of Business;				. !
	Receipt: 12/29/23			
Jessica Flintoft	, (COO) pt.	,		
865 N Wagner Road				
Ann Arbor, Ml. 48103		\$4,575.00	\$ 0.00	\$4,575.00
4. If over \$100.00 cumulative, please provide: Occupation: Tov	wnsnip Clerk			•
Employer: Scio Township Place of Business				• ! •
	Receipt:			
		\$	\$	\$
4. If over \$100.00 cumulative, please provide: Occupation:				
Employer: Place of Business				
Name and Address: 3. Date of	Receipt:			
		\$	\$	\$
4. If over \$100.00 cumulative, please provide: Occupation:	•			
Employer: Place of Business				
Name and Address: 3. Date of		***************************************	······································	
			•	
		¢	e	el
		Ψ1	Ψ[]	\$
4. If over \$100.00 cumulative, please provide: Occupation:				
Employer: Place of Business	· ·		 	· • • • • • • • • • • • • • • • • • • •
	Page Subtotal:	\$ 4,650.00	\$ 0.00	\$4,725.00
(Complete on	Grand Total: last page of Schedule)	\$ 9,220.00	\$	\$17,175.0
6 6 Page of		Forward to #1 Summary	Forward to #2 Summary	
Page of		Page	Page	}



ITEMIZED EXPENDITURES SCHEDULE 2 LEGAL DEFENSE FUND	Legal Defense Fund I.D. Number_an LDF-016 Legal Defense Fund for Scio Town	d Name: ship Clerk Jessic	a Flintoft
2. Name and address of person or vendor paid	3. Purpose	4. Date	5. Amount
Nation Builder	On-line collection fee	10/3/23	\$ 18.90
Nation Builder	On-line collection fee	10/5/23	\$ 5.20
Nation Builder	On-line collection fee	10/6/23	\$ 15.60
Nation Builder	On-line collection fee	10/10/23	\$ ^{54.29}
Dykema Gossett 400 Renaissance Center Detroit, MI 48243	Legal Fees	10/16/23	\$ 3,600.00
Nation Builder	On-line collection fee	10/17/23	\$24.80
Nation Builder	On-line collection fee	11/3/23	\$2.75
Dykema Gossett 400 Renaissance Center Detroit, MI 48243	Legal Fees	12/29/23	\$5,500.00
,			\$
			\$
			\$
	Page Subtotal Grand Total (Complete on last page of Schedule)		\$ 9,221.54 \$ 9,221.54
Page 1 of 1			Forward to #3 Summary Page



received via disclosure@michigan.gov 01/15/2024

LEGAL DEFENSE FUND COVER PAGE

Report must be legible, typed or printed in ink and signed by the Treasurer/Designated Record Keeper and Official

FOR OFFICIAL USE ONLY

and Official.	
1a. Legal Defense Fund I.D. Number: LDF-016	2a. Official's Full Name: Jessica Madeleine Flintoft
1b. Legal Defense Fund Name: Legal Defense Fund for Scio Township Clerk Jessica Flintoft	2b. Official's Office: Scio Township Clerk
1c. Legal Defense Fund Address: 865 North Wagner Road Ann Arbor, MI 48103	
1d. Legal Defense Fund Phone: 7346577569	
3a. Treasurer's Full Name: David S Read	3c. Treasurer's Business Address: 713 Merlin Way
3b. Treasurer's Residential Address: 713 Merlin Way Dexter, MI 48130	Dexter, MI 48130
	3d. Treasurer's Phone Number(s): 7346577569
4a. Quarterly Transaction Report Covering: January 1 - March 31; Due: April 25th	5. Dissolution of Legal Defense Fund:
☐ April 1 – June 30; Due: July 25 th	Effective Date of Dissolution
■ July 1 – September 30; Due: October 25th	The state of the s
October 1 - December 31; Due: January 25th	By checking this item, I/We certify that the Legal Defense Fund has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Itemized Expenditure Schedule 2 and the Summary Page.
4b. Amendment to Transaction Report: also mark (4a) to indicate which Report is being amended)	
6. Verification: I\We certify that all reasonable diligence the best of my\our knowledge and belief the contents ar	was used in the preparation of this statement and attached schedules (if any) and to e true, accurate and complete.
Official's Signature and Date:	1,15,2024
Treasurer's/Designated Record Keeper's Signature and	Date: David Med 1,5 2024



LEGAL DEFENSE FUND SUMMARY PAGE

Clear Form

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Summary Page

	Column I This Period	Column II Cumulatiye Calendar Year
1. Contributions	_{1a. \$} 2,700.00	_{1b. \$} 15,572.70
2. In-Kind Contributions	_{2a. \$} 0	_{2b. \$} 1,295.55
3. TOTAL CONTRIBUTIONS	_{3a. \$} 2,700.00	_{3b. \$} 16,868.25
4. Itemized Expenditures	4a. \$ 10,577.43 /	
5. Uniternized Expenditures (less than \$50.01 each - no Schedule)	_{5a. \$} 0.00	
6. TOTAL EXPENDITURES	_{6a. \$} 3,305.50	_{6b. \$} 13,882.93
·. BA	LANCE STATEMENT	
7. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	7. \$ 968.58	
Amount received during reporting period (Item 1a.)	8. \$ 2,700.00	
9. SUBTOTAL Add lines 7 and 8	9. \$_3,668.58	
10. Amount expended during reporting period (Item 6a.)	10. \$ 3,305.50	
11. ENDING BALANCE	11.\$ 363.08	*
(Subtract line 10 from line 9)	* The ending balance must always be	a positive number.



received via disclosure@michigan.gov 01/15/2024

LEGAL DEFENSE FUND COVER PAGE

Report must be legible, typed or printed in lnk and signed by the Treasurer/Designated Record Keeper and Official

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signed by the Treasurer/Designated Record Keeper and Official.	
1a. Legal Defense Fund I.D. Number: LDF-016 1b. Legal Defense Fund Name: Legal Defense Fund for Scio Township Clerk Jessica Flintoft 1c. Legal Defense Fund Address: 865 North Wagner Road Ann Arbor, MI 48103	2a. Official's Full Name: Jessica Madeleine Flintoft 2b. Official's Office: Scio Township Clerk
1d. Legal Defense Fund Phone:	
3a. Treasurer's Full Name: David S Read 3b. Treasurer's Residential Address: 713 Merlin Way Dexter, MI 48130	3c. Treasurer's Business Address: 713 Merlin Way Dexter, MI 48130
	3d. Treasurer's Phone Number(s):
4a. Quarterly Transaction Report Covering: ☐ January 1 - March 31; Due: April 25th ☐ April 1 - June 30; Due: July 25 th ☐ July 1 - September 30; Due: October 25th ☐ October 1 - December 31; Due: January 25th 4b. ☒ Amendment to Transaction Report: also mark (4a) to indicate which Report is being amended)	5. Dissolution of Legal Defense Fund: Effective Date of Dissolution /// By checking this item, I\We certify that the Legal Defense Fund has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Itemized Expenditure Schedule 2 and the Summary Page.
6. Verification: I\We certify that all reasonable diligence the best of my\our knowledge and belief the contents ar	was used in the preparation of this statement and attached schedules (if any) and to e true, accurate and complete.
Official's Signature and Date: Treasurer's/Designated Record Keeper's Signature and	Date: David & Read 1, 5, 2024

Clear Form

LEGAL DEFENSE FUND SUMMARY PAGE

FOR OFFICIAL USE ONLY

Summary Page

	Column I This Period	Column II Cumulative Calendar Yeal
1. Contributions	_{1a. \$} 10,010.00	1 _{b. \$} 12,722.70
2. In-Kind Contributions	_{2a. \$} 1,295.55	_{2b. \$} 1,295.55
3. TOTAL CONTRIBUTIONS	_{3a. \$} 11,305.55	_{3b. \$} 14,018.25
Itemized Expenditures	_{4a. \$} 10,577.43	
5. Uniternized Expenditures (less than \$50.01 each - no Schedule)	_{5a. \$} 0.00	
6. TOTAL EXPENDITURES	6a. \$ 10,577.43	6b. \$ 10,577.43
ВА	LANCE STATEMENT	
Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	7. \$ 1,536.01	_
Amount received during reporting period (Item 1a.)	8. \$ 10,010.00	
9. SUBTOTAL Add lines 7 and 8	9. \$_11,546.01	
10. Amount expended during reporting period (Item 6a.)	10. \$ 10,577.43	
11. ENDING BALANCE (Subtract line 10 from line 9)	11. \$ 968.58	*
formuse the 10 upin mic a)	* The ending balance must always be	a positive number.



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

LDF-016 Legal Defense Fund for Solo Township Clerk Jessica Flintoft

		·	
Enter contributor's name and address.	5. Amount	6. Amount (In-Kind)	7. Cumulative
Name and Address: 3. Date of Receipt: 5/19/23			
Rob Pattinson			
500 N Zeeb	\$ 200.00	\$ 0.00	\$200,00
Ann Arbor, MI 48103	· •	` \	
4. If over \$100.00 cumulative, please provide: Occupation; Self employed			
Employer: Self employed Place of Business: Home			
Name and Address: 3. Date of Receipt: 5/19/23			
Paula Globerson			
159 Rockwood Ct	\$ 150.00	\$ 0.00	\$200,00
Ann Arbor, MI 48103			Para-14-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
4. If over \$100.00 cumulative, please provide: Occupation: Retired			
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt: 5/19/23	·		
James Knol	,	•	
1778 Snowberry Ridge Rd	-		
Ann Arbor, MI 48103	\$200.00	\$ 0.00	\$200.00
If over \$100.00 cumulative, please provide: Occupation: Retired	·		
Employer: Place of Business:	r		
Name and Address: 3. Date of Receipt: 5/19/23			***************************************
Carolyle Towers			
560 Little Lake Dr	'		
Ann Arbor, MI 48103	\$100.00	\$0.00	\$ 150.00
4. If over \$100.00 cumulative, please provide: Occupation; Retired	* *		
Employer: Place of Business:		,	
2. Name and Address: 3. Date of Receipt: 5/19/23			
David Read	1		
713 Merlin Way	A		
Dexter, MI 48130	\$500.00	\$ 0.00	\$605.00
4. If over \$100,00 cumulative, please provide: Occupation: Retired			
Employer: Place of Business:			-
Name and Address: 3. Date of Receipt: 5/19/23			
Pam Boyd			
517 Linden Ln			<u> </u>
Ann Arbor, MI 48103	\$ 100.00	\$0.00	\$100.00
4. If over \$100.00 cumulative, please provide: Occupation: Retired			
Employer: Place of Business:			
Page Subtotal:	\$ 1,250.00	\$ 0.00	\$1,455.00
Grand Total:			
(Complete on last page of Schedule)	\$	\$ L	\$
_ 6	Forward to #1 Summary	Forward to #2 Summary	
Page of	Page	Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

LDF-016 Legal Defense Fund for Solo Township Clerk Jessica Flintoft

LEGAL DEFENSE FUND			
Enter contributor's name and address.	5. Amount	6. Amount (In-Kind)	7. Cumulative
2. Name and Address: Tara Cohen 865 N. Wagner Road Ann Arbor, MI 48103	\$ 0.00	\$ 45.57	\$70.57
4. If over \$100.00 cumulative, please provide: Occupation: Manager Employer: Washtenaw County Place of Business: work from home			
2. Name and Address: HOMES Campus 112 Jackson Plaza Ann Arbor, MI 48103	\$ 0.00	\$ 750.00	\$750.00
4. If over \$100.00 cumulative, please provide: Occupation: Employer: Place of Business:			
Name and Address: 3. Date of Receipt: 5/19/23 Tara Cohen 865 N. Wagner Road Ann Arbor, MI 48103 4. If over \$100.00 cumulative, please provide: Occupation: Manager	\$ <u>0.00</u>	\$ 280.00	\$350.57
Employer: Washtenaw County Place of Business: work from home			
2. Name and Address: Tara Cohen 865 N. Wagner Road Ann Arbor, MI 48103 4. If over \$100.00 cumulative, please provide: Occupation: Manager	\$ D.00	\$219.98	\$ 570.55
Employer: Washtenaw County Place of Business: work from home			
Name and Address: 3. Date of Receipt: 4. If over \$100,00 cumulative, please provide: Occupation:	\$	\$	\$
Employer: Place of Business: 2. Name and Address: 3. Date of Receipt:			
4. If over \$100.00 cumulative, please provide: Occupation:	\$	\$	\$
Employer: Place of Business:	, , , , , , , , , , , , , , , , , , ,	,	in the second se
Page Subtotal:	\$ 0.00	\$ 1,295.55	sti,741.69
Grand Total: (Complete on last page of Schedule)	\$ 10,010	\$ 1,295,55 Forward to	\$ 12,411.69
Page of	Forward to #1 Summary Page	#2 Summary Page	



LEGAL DEFENSE FUND COVER PAGE

Received via disclosure@michigan.gov 10/11/2023

Report must be legible, typed or printed in lnk and signed by the Treasurer/Designated Record Keeper and Official

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and Official.	
1a. Legal Defense Fund I.D. Number: 1b. Legal Defense Fund Name: Legal Defense Fund for Scio Township Clerk Jessica Flintoft 1c. Legal Defense Fund Address: 865 North Wagner Road Ann Arbor, MI. 48103	2a. Official's Full Name: Jessica Madeleine Flintoft _{2b. Official's Office:} Scio Township Clerk
1d. Legal Defense Fund Phone:	
3a. Treasurer's Full Name: David S Read 3b. Treasurer's Residential Address; 713 Merlin Way Dexter, MI 48130	3c. Treasurer's Business Address: 713 Merlin Way Dexter, MI 48130
	3d. Treasurer's Phone Number(s): 7346577569
4a. Quarterly Transaction Report Covering: January 1 - March 31; Due: April 25th April 1 - June 30; Due: July 25 th July 1 - September 30; Due: October 25th October 1 - December 31; Due: January 25th 4b. Amendment to Transaction Report: also mark	5. Dissolution of Legal Defense Fund: Effective Date of Dissolution /// By checking this item, I\We certify that the Legal Defense Fund has no assets or outstanding debts, including late filling fees. Note: The disposition of residual funds must be reported on Itemized Expenditure Schedule 2 and the Summary Page.
(4a) to indicate which Report is being amended)	
6. Verification: I\We certify that all reasonable diligence the best of my\our knowledge and belief the contents at	was used in the preparation of this statement and attached schedules (if any) and to e true, accurate and complete.
Official's Signature and Date:	10,10,23 10,10,23
Treasurer sypesignated Record Reeper's Signature and	Date. MILA /



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

LDF-016 Legal Defense Fund for Scio Township Clerk Jessica Flintoft

Enter contributor's name and address.	5. Amount	6. Amount (In-Kind)	7. Cumulative
Name and Address: 3. Date of Receipt: 9/20/23			
Harvey Sommers			
2129 Autumn Hill Dr Ann Arbor, MU 48103	\$ 50.00	\$ 0.00	\$100.00
4. If over \$100.00 cumulative, please provide: Occupation: Retired			
Employer: Place of Business:		1	ļ
			
2. Name and Address: 3. Date of Receipt: 9/25/23 Jean Hergott			
685 Merlin Way	A 100 00 1	A 5.00	4.50.00
Dexter, MI 48130	\$ 100.00	\$ 0.00	\$150.00
4. If over \$100,00 cumulative, please provide: Occupation: Retired			
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt: 9/25/23			
Peter Heydon			
3562 West Huron River Drive	4		
Ann Arbor, MI 48103	\$2,500.00	\$ 0.00	\$2,500.00
4. If over \$100.00 cumulative, please provide: Occupation: Retired			
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt: 9/25/23			
Kathleen Longo			
4365 Stonemeadow Ct			
Ann Arbor, MI 48103	\$ 50.00	\$0.00	\$100.00
4. If over \$100.00 cumulative, please provide: Occupation: Retired			
Employer: Place of Business:			
Name and Address: 3. Date of Receipt:			
			:
·	\$	\$	\$
4. If over \$100.00 cumulative, please provide: Occupation:			
Employer: Place of Business:			
Name and Address: 3. Date of Receipt:			
	\$	\$	\$
4. If over \$100.00 cumulative, please provide: Occupation:		<u> </u>	
Employer: Place of Business:			
Page Subtotal:	\$	\$	\$
Grand Total: (Complete on last page of Schedule)	\$ 2,700.00	\$ 0.00	\$ 2,850.00
	Forward to	Forward to	Ψ <u></u>
Page of	#1 Summary Page	#2 Summary Page	



ITEMIZED EXPENDITURES SCHEDULE 2 LEGAL DEFENSE FUND	1. Legal Defense Fund I.D. Number ar LDF-016 Legal Defense Fund for Scio Towr	id Name: iship Clerk Jessi	ca Fintoft
2. Name and address of person or vendor paid	3. Purpose	4. Date	5. Amount
Nation Builder	On-line collection Fee	9/20/23	\$ 2.75
Dykema Gossett PLLC 400 Renaissance Center Detroit, MI 48243	Legal Fees	9/25/23	\$3,300.00
Nation Builder	On-line collection Fee	9/28/23	\$2.75
] s
			\$
			\$
			_ s
		<u> </u>	. \$
			\$
			\$
			_ \$
	Page Subtotal		\$ 3,305.5
	Grand Total (Complete on last page of Schedule)		\$ 3,305.50 Forward to #3
Page 1 of 1			Summary Page

Clear Form

LEGAL DEFENSE FUND SUMMARY PAGE

FOR OFFICIAL USE ONLY

Summary Page

	Column I This Period	Column II Cumulative Calendar Year
1. Contributions	_{1a. \$} 2,700.00	_{1b. \$} 15,421.90
2. In-Kind Contributions	2a. \$ 0.00	_{2b. \$} 1,295.50
3. TOTAL CONTRIBUTIONS	3a. \$ 2,700	_{3b. \$} 16,717.4
4. Itemized Expenditures	4a. \$ 3,305.50	
5. Uniternized Expenditures (less than \$50.01 each - no Schedule)	_{5a. \$} 0.00	
6. TOTAL EXPENDITURES	_{6a. \$} 3,305.50	6b. \$ 13,883.93
ВА	LANCE STATEMENT	
Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	7. \$ 968.58	
Amount received during reporting period (Item 1a.)	8. \$ 2,700.00	
9. SUBTOTAL Add lines 7 and 8	_{9. \$} 3,668.58	
10. Amount expended during reporting period (Item 6a.)	10. \$ 3,305.50	
11. ENDING BALANCE	11. \$ 363.08	*
(Subtract line 10 from line 9)	* The ending balance must always b	be a positive number.



LEGAL DEFENSE FUND COVER PAGE

received via disclosure@michigan.gov 07/12/2023

Report must be legible, typed or printed in ink and signed by the Treasurer/Designated Record Keeper and Official

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and Official.	
1a. Legal Defense Fund I.D. Number: 1b. Legal Defense Fund Name: Legal Defense Fund for Scio Township Clerk Jessica Flintoft 1c. Legal Defense Fund Address: 865 North Wagner Road Ann Arbor, MI 48103	2a. Official's Full Name: Jessica Madeleine Flintoft _{2b. Official's Office:} Scio Township Clerk
1d. Legal Defense Fund Phone:	
3a. Treasurer's Full Name: David S. Read 3b. Treasurer's Residential Address: 713 Merlin Way Dexter, MI 48130	3c. Treasurer's Business Address: 713 Merlin Way Dexter, MI 48130
	3d. Treasurer's Phone Number(s): 7346577569
4a. Quarterly Transaction Report Covering: January 1 – March 31; Due: April 25th April 1 – June 30; Due: July 25 th July 1 – September 30; Due: October 25th October 1 – December 31; Due: January 25th 4b. Amendment to Transaction Report: also mark (4a) to indicate which Report is being amended)	5. Dissolution of Legal Defense Fund: Effective Date of Dissolution / By checking this item, I/We certify that the Legal Defense Fund has no assets or outstanding debts, including late filling fees. Note: The disposition of residual funds must be reported on Itemized Expenditure Schedule 2 and the Summary Page.
6. Verification: I\We certify that all reasonable diligence the best of my\our knowledge and belief the contents ar	was used in the preparation of this statement and attached schedules (If any) and to e true, accurate and complete.
Official's Signature and Date:	7, 10, 23 Date: 1 Mill 1 Mad 7, 10, 23

LEGAL DEFENSE FUND SUMMARY PAGE

Clear Form

FOR OFFICIAL USE ONLY

Summary Page

	Column ! This Period	Column II Cumulative Calendar Year		
1. Contributions	1a. \$ 10,010.00	1b. \$ 12,410.89		
2. In-Kind Contributions	_{2a. \$} 1,295.50	_{2b. \$} 1,295.50		
3. TOTAL CONTRIBUTIONS	_{3a. \$} 11,305.55	3b. \$		
4. Itemized Expenditures	4a. \$ 10,577.43			
5. Unitemized Expenditures (less than \$50.01 each - no Schedule)	5a. \$ 0.00			
6. TOTAL EXPENDITURES	6a. \$ 10,577.43	_{6b. \$} 10,577.43		
BALANCE STATEMENT				
7. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	7. \$ 1,536.01			
8. Amount received during reporting period (Item 1a.)	8. \$ 10,010.00			
9. SUBTOTAL Add lines 7 and 8	9, \$_11,546.01			
10. Amount expended during reporting period (Item 6a.)	10, \$ 10,577.43			
11. ENDING BALANCE (Subtract line 10 from line 9)	11. \$ 968.58			
	* The ending balance must always be a positive	e number.		



ITEMIZED EXPENDITURES SCHEDULE 2 LEGAL DEFENSE FUND	1. Legal Defense Fund I.D. Number an	d Name:	
2. Name and address of person or vendor paid	3. Purpose	4. Date	5. Amount
Nation Builder	On-line collection Fee	5/8/23	\$ 34.18
Nation Builder	On-line collection Fee	5/10/23	s ^{2.75}
Nation Builder	On-line collection Fee	5/12/23	\$ 5.20
Nation Builder	On-line collection Fee	5/14/23	\$ 13.40
Nation Builder	On-line collection Fee	5/16/23	\$ <mark>26.30</mark>
Nation Builder	On-line collection Fee	5/18/23	\$ <mark>8.25</mark>
Nation Builder	On-line collection Fee	5/19/23	\$ <mark>2.75</mark>
Nation Builder	On-line collection Fee	5/20/23	s[13.15
Nation Builder	On-line collection Fee	5/22/23	\$ <mark>43.45</mark>
Dykema Gossett PLLC 400 Renaissance Center Detroit, MI 48243	Legal Fees	6/5/23	\$ ^{5,428.00}
Dykema Gossett PLLC 400 Renaissance Center Detroit, MI 48243	Legal Fees	6/7/23	\$5,000.00
	Page Subtotal Grand Total		\$ 10,577.43
	(Complete on last page of Schedule)		\$ 10,577.43
Page 1 of 1			Forward to #3 Summary Page

ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

LDF-016 Legal Defense Fund for Solo Township Clerk Jessica Flintoft

Enter contributor's name and address.		5. Amount	6. Amount (In-Kind)	7. Cumulative
Name and Address: 3. Date of Patrica Stein	of Receipt: 5/5/23			
1413 South Zeeb Road		\$ 50.00	\$ 0.00	\$150.00
Ann Arbor, MI 48103	latirad			
4. If over \$100.00 cumulative, please provide: Occupation;	j			
Employer: Place of Busines	S;			
	of Receipt: 5/7/23			
Tara Cohen	**************************************	1		
865 N Wagner Rd		\$ 25.00	\$ 0.00	\$25.00
Ann Arbor, Mi 48103		V E3:00	¥ <u>P.00</u>	420.00
4. If over \$100.00 cumulative, please provide: Occupation:	1anager			
Employer: Washtenaw County Place of Busines	work at home			
	S			
	of Receipt: 5/7/23			
David Read				
713 Merlin Way				
Dexter, MI 48130		\$5.00	\$ 0.00	\$5.00
4. If over \$100.00 cumulative, please provide: Occupation:	letired	,		
· · · · ·				
Employer: Place of Busines	SS;			
2. Name and Address: 3. Date	of Receipt: 5/7/23			**************************************
Harvey Somers				
2129 Autumn Hill Dr				
Ann Arbor, MI 48103		\$50.00	\$0.00	\$50.00
	etired	φ <u>ρο.σο</u>	ψ <u>ρ.σσ</u>	\$0.00
4. If over \$100.00 cumulative, please provide: Occupation:				
Employer: Place of Busines	ss:			
	of Receipt: 5/8/23			
Jonathan Boyd				
517 Linden Lane		\$100.00	\$ 0.00	\$100.00
Ann Arbor, MI 48103	uyer's Real Estate Broker			*
4. If over \$100.00 cumulative, please provide: Occupation:				
Employer: Place of Busines	ss: Home			
2. Name and Address: 3. Date	of Receipt: 5/8/23			
Jon Norton			ļ	
2224 N. Zeeb Road]	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Ann Arbor, MI 48103		\$ 50.00	\$0.00	\$50.00
4. If over \$100.00 cumulative, please provide: Occupation:	Retired	ĺ	į	
Employer: Place of Busine				
	Page Subtotal:	\$ 280.00	\$ 0.00	\$380.00
	Grand Total:			
(Complete o	n last page of Schedule)	\$	\$	\$
4		Forward to #1 Summary	Forward to	
Page of		Page	#2 Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

LDF-016 Legal Defense Fund for Sclo Township Clerk Jessica Flintoft

Enter contributor's name and address.	5. Amount	6. Amount (In-Kind)	7. Cumulative
Name and Address: 3. Date of Receipt: 5/8/23			
Jonathan Greenberg			
6089 Green Mountain Circle	\$ 100.00	\$ 0.00	\$100.00
Ann Arbor, MI 48103	4 1/00:00	¥ <u>2.54</u>	7
If over \$100.00 cumulative, please provide: Occupation: Director of Data			
Employer: Cogstate Place of Business: Home			
Name and Address: 3. Date of Receipt: 5/8/23			
Kathleen Brandt			
2534 Roseland Dr	\$ 100.00	\$ 0.00	\$100.00
Ann Arbor, Ml 48103	¥ [::::::	T 1-1-1-1	7.00.00
If over \$100.00 cumulative, please provide: Occupation: Retired			
Employer: Washtenaw County Place of Business: work at home			
	-		
2. Name and Address: 3. Date of Receipt: 5/8/23			
Ryan Yaple			
1056 Baker Road	\$50.00	\$ 0.00	d E0 00
Dexter, MI 48130	φ <u>ρο.οο</u>	Ψ 0.00	\$50.00
4. If over \$100.00 cumulative, please provide: Occupation: Food Distribution			
Employer: Self Place of Business: Home			
Name and Address: 3. Date of Receipt: 5/8/23			
Peter Flintoft			
119 S Main Street			
Chelsea, MI 48118	\$100.00	\$0.00	\$100.00
4. If over \$100.00 cumulative, please provide: Occupation: Attorney			
		;	
Employer: Self Place of Business: Home			
2. Name and Address: 3. Date of Receipt: 5/8/23			
Jean Hergott		ļ	
685 Merlin Way	\$50.00	\$ 0.00	\$50.00
Dexter, MI 48130	Ψ <u>ρο.σο</u>	Ψ <u>ρ.σσ</u>	ф <u>БО.00</u>
4. If over \$100.00 cumulative, please provide: Occupation: Physician Assitant			
Employer: Univ. of Mich Place of Business: Mich. Medicine			
2. Name and Address: 3. Date of Receipt: 5/10/23			
Paula Globerson			
159 Rockwood Ct	¢ = 0.00	0	A
Ann Arbor, MI 48103	\$ 50.00	\$ <u>0.00</u>	\$50.00
4. If over \$100.00 cumulative, please provide: Occupation: Retired			
Employer: Place of Business:			
Page Subtotal:	\$ 450.00	\$ 0.00	\$450.00
Grand Total: (Complete on last page of Schedule)	\$	s	\$
	Forward to	Forward to	*
Page of	#1 Summary	#2 Summary	
· -9	Page	Page	L



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

LDF-016 Legal Defense Fund for Sclo Township Clerk Jessica Flintoft

	····		
Enter contributor's name and address.	5. Amount	6. Amount (In-Kind)	7. Cumulative
Name and Address: 3. Date of Receipt: 5/12/23 David Read			
713 Merlin Way			
Dexter, MI 48130	\$ 100.00	\$ 0.00	\$105.00
4. If over \$100.00 cumulative, please provide: Occupation: Retired			
Employer: Place of Business:			
Name and Address: 3. Date of Receipt: 5/13/23 Carol Mayer			
440 Fairways Lane	e E0.00	¢ 0.00	850.00
Chelsea, MI 48118	\$ 50.00	\$ 0.00	\$50.00
4. If over \$100.00 cumulative, please provide: Occupation: N/A			
Employer: N/A Place of Business:			
Name and Address: 3. Date of Receipt: 5/14/23 Mary Gillis		:	
560 Little Lake Drive, Unit 10	:		
Ann Arbor, MI 48103	\$200.00	\$ 0.00	\$200.00
If over \$100.00 cumulative, please provide: Occupation: Deputy Clerk			
Colo Tournahin 527 N. Zeeb Roed, Ann Arbor, MA 45109			
Employer: Scio Township Place of Business:			
Name and Address: 3. Date of Receipt; 5/15/23		····	
Teresa Reynhout			
13431 Trinkle Road		-	
Chelsea, MI 48118	\$5.00	\$0.00	\$5.00
If over \$100.00 cumulative, please provide: Occupation: Clerk	* 	¥ <u>62.5 5</u>	*I
Employer: Lima Township Place of Business:			
2. Name and Address: 3. Date of Receipt: 5/16/23			
Richard Cohen			
6613 Elmwood Court	\$100.00	\$ 0.00	# 400.00
Nashville, TN 37205	φ[100.00	\$ D.00	\$100.00
4. If over \$100.00 cumulative, please provide: Occupation: N/A			
Employer: N/A Place of Business:			
Name and Address: 3. Date of Receipt: 5/16/23			
Elaine Brock			
3435 Miller Road			
Ann Arbor, MI 48103	\$ 100.00	\$0.00	\$100.00
4. If over \$100.00 cumulative, please provide: Occupation: Attorney			
l Ratirad			
	• EEE 00	4 5 60	-E00.00
Page Subtotal:	\$ 555.00	\$ 0.00	\$ 560.00
Grand Total: (Complete on last page of Schedule)	\$	\$	\$
(33,4,5,5,5,5,6,5,6,5,6,5,6,6,6,6,6,6,6,6,6	Forward to	Forward to	
Page of	#1 Summary	#2 Summary	
· -3	Page	Page	l



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

LDF-JMF Legal Defense Fund for Sclo Township Clerk Jessica Filntoft

			
Enter contributor's name and address.	5. Amount	6. Amount (In-Kind)	7. Cumulative
Name and Address: 3. Date of Receipt: 5/16/23			****
David Spicer			
525 Baker Road	\$ 50.00	e h 00	\$50.00
Dexter, MI 48130	Ф БО.ОО	\$ 0.00	\$ <u>50.00</u>
4. If over \$100.00 cumulative, please provide: Occupation: Retired		-	
Employer: Place of Business:			
Name and Address: 3. Date of Receipt: 5/16/23			
Jonathan Cohen			
2606 W. Sunset Drive	* 400.00	¢ 5.00	d+00.00
Tampa El 33620	\$ 100.00	\$ 0.00	\$100.00
4. If over \$100.00 cumulative, please provide: Occupation: Attorney Milhera Milhera			
4. If over \$100.00 cumulative, please provide: Occupation:			
Employer: Milberg Place of Business:Place of Business:			
			
Rena Basch			
4260 Shetland Dr	45000	e E	
Ann Arbor, MI 48105	\$50.00	\$ 0.00	\$50.00
4. If over \$100.00 cumulative, please provide: Occupation: Township Clerk		:	
			i
Employer: Ann Arbor Charter Township Place of Business:			
Name and Address: 3. Date of Receipt; 5/16/23			
Elizabeth Chapman			
'			
847 N Wagner Road	4100.00	65.60	A 00 00 1
Ann Arbor, MI 48103	\$100.00	\$0.00	\$100.00
4. If over \$100.00 cumulative, please provide: Occupation: Social Worker			
Employer: Dept. of Veterans Affairs Place of Business:			
Flace of business.		<u> </u>	
2. Name and Address: 3. Date of Receipt: 5/17/23			
Carolyle Towers			
560 Little Lake Drive	¢ E0.00	¢ 5.00	6 50.00
Ann Arbor, MI 48103	\$50.00	\$0.00	\$50.00
4. If over \$100.00 cumulative, please provide: Occupation: N/A		İ	
N/A			
	<u> </u>		
2. Name and Address: 3. Date of Receipt: 5/17/23	1		ļ
Melissa Kennedy			
200 Barton North	\$ F0.00	6 5.00	6
Ann Arbor, MI 48105	\$ 50.00	\$0.00	\$50.00
4. If over \$100.00 cumulative, please provide: Occupation: General Manager			ļ
Employer: Meadowlark Place of Business:			
Page Subtotal:	\$ 400.00	\$ 0.00	\$400.00
Grand Total:	 	<u> </u>	
(Complete on last page of Schedule)	\$	\$	\$
	Forward to	Forward to	
Page of	#1 Summary	#2 Summary	-
	Page	Page	1



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

LDF-016 Legal Defense Fund for Scio Township Clerk Jessica Flintoft

Enter contributor's name and address.	5. Amount	6. Amount (In-Kind)	7. Cumulative
Name and Address: 3. Date of Receipt: 5/19/23 Robert Bailey			
424 Little Lake Dr., Apt 13 Ann Arbor, Mi 48103	\$ 50.	\$ 0.00	\$50.00
4. If over \$100.00 cumulative, please provide: Occupation: Retired			
Employer: Place of Business:			
Name and Address:			
Ann Arbor, MI 48103	\$ 50.00	\$ 0.00	\$50.00
4. If over \$100.00 cumulative, please provide: Occupation: Contractor Employer: Self-employed Place of Business: Home			
Name and Address: 3. Date of Receipt: 5/19/23 Jeff Jackson			
4910 Dexter Ann Arbor Road	4400.00	# [5-5-	
Ann Arbor, MI 48103 4. If over \$100.00 cumulative, please provide: Occupation: Director of Training	\$100.00	\$ 0.00	\$100.00
Employer: Orion Systems, Inc Place of Business:			
Name and Address: 3. Date of Receipt: 5/19/23			
Michelle Anzaldi 4635 Shellbark Dr.			
Ypsilanti, MI 48197	\$50.00	\$0.00	\$50.00
4. If over \$100.00 cumulative, please provide: Occupation: Township Clerk			· •
Employer: Pittsfield Charter Township Place of Business:			
Name and Address: 3. Date of Receipt: 5/19/23 Kethleen Lenge			
Kathleen Longo 4365 StoneMeadow Ct	AUTO 22	A	
Ann Arbor, MI 48103	\$150.00	\$ 0.00	\$150.00
4. If over \$100.00 cumulative, please provide: Occupation: Retired			
Employer: Place of Business:			<u> </u>
Anna Schwartz			
907 Grant St	\$ 100.00	¢ 6 6 6	6
Ypsilanti, MI 48197	\$ 100.00	\$0.00	\$100.00
4. If over \$100.00 cumulative, please provide: Occupation: Teaching Artist Employer: Youth Arts Alliance Place of Business:			
Page Subtotal:	\$ 500.00	\$ 0.00	\$500.00
Grand Total: (Complete on last page of Schedule)	\$	\$	\$
Page of	Forward to #1 Summary Page	Forward to #2 Summary Page	
		,3-	<u> </u>



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

LDF-016 Legal Defense Fund for Scio Township Clerk Jessica Filntoft

Landard Company of the Company of th			
Enter contributor's name and address.	5. Amount	6. Amount (In-Kind)	7. Cumulative
Name and Address:			
500 N Zeeb	\$ 200.00	\$ 0.00	\$200.00
Ann Arbor, MI 48103	Ψ Ευν.υυ	Ψ <u>0.00</u>	7
4. If over \$100.00 cumulative, please provide: Occupation: Self employed		-	
Employer: Self employed Place of Business: Home			
Name and Address:			
159 Rockwood Ct	1		
Ann Arbor, MI 48103	\$ 150.00	\$ 0.00	\$200.00
•			
4. If over \$100.00 cumulative, please provide: Occupation: Retired			
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt: 5/19/23			
James Knol			
1778 Snowberry Ridge Rd	# 500.00	* 5 00	dana aa
Ann Arbor, MI 48103	\$200.00	\$ 0.00	\$200.00
4. If over \$100.00 cumulative, please provide: Occupation: Retired			
Employer: Place of Business:			
Name and Address: 3. Date of Receipt: 5/19/23			
Carolyle Towers			
560 Little Lake Dr			
Ann Arbor, MI 48103	\$ 100.00	\$0.00	\$100.00
If over \$100.00 cumulative, please provide: Occupation: Retired			
Employer: Place of Business:		-	}
Name and Address: 3. Date of Receipt: 5/19/23	_		
David Read			
713 Merlin Way	\$500.00	\$ 0.00	\$605.00
Dexter, MI 48130	Ψ <u>ροσ.σσ</u>	Ψ <u>0.00</u>	\$005.00
If over \$100.00 cumulative, please provide: Occupation: Retired		1	
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt: 5/19/23			
Pam Boyd		ļ	
517 Linden Ln	\$ 100.00	¢b.00	¢400.00
Ann Arbor, MI 48103	\$ 100.00	\$0.00	\$100.00
If over \$100.00 cumulative, please provide: Occupation: Retired			1
Employer: Place of Business:			
Page Subtotal:		\$ 0.00	\$1,455.00
Grand Total: (Complete on last page of Schedule		s	\$
	/ Ψ Forward to	Forward to	Ψ
Page of	#1 Summary Page	#2 Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

LDF-016 Legal Defense Fund for Sclo Township Jessica Flintoft

		······································	
Enter contributor's name and address.	5. Amount	6. Amount (In-Kind)	7. Cumulative
Name and Address: 3. Date of Receipt: 5/20/23			
Michelle Cody			
4620 Stein Road			
Ann Arbor, Ml. 48103	\$ 100.00	\$0.00	\$100.00
If over \$100.00 cumulative, please provide: Occupation:	i	• •	
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt: 5/22/23			
Carol Williams			
8350 W Liberty Rd	\$ 50.00	\$ 0.00	\$50.00
Ann Arbor, Ml. 48103		-	
4. If over \$100.00 cumulative, please provide: Occupation:			
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt: 5/22/23			
Barbara Bolt	:		
3000 Miller Rd			
Ann Arbor, Mi 48103	\$50.00	\$ 0.00	\$50.00
If over \$100.00 cumulative, please provide: Occupation:			
Employer: Place of Business:			
Name and Address: 3. Date of Receipt: 5/18/23			
Marci Feinberg			
3498 Timberwood Land			
Ann Arbor, MI 48103	\$100.00	\$0.00	\$100.00
	Minoria.	Ψ <u>Ν.υυ</u>	φισσίσσ
4. If over \$100.00 cumulative, please provide: Occupation:			
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt: 5/20/23			
Lisa Emmer			
901 N. Wagner Rd	¢ = 0.00	* 5.55	050.00
Ann Arbor, Mi. 48103	\$50.00	\$ 0.00	\$50.00
4. If over \$100.00 cumulative, please provide: Occupation:			:
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt: 5/20/23			
Elizabeth Pattinson]		
701 N Angus Loop		1	
Palmer, AK 99645	\$ 100.	\$0.00	\$100.00
4. If over \$100.00 cumulative, please provide: Occupation:			
Employer: Place of Business:			
Page Subtotal:	\$ 450.00	\$ 0.00	\$450.00
Grand Total:			
(Complete on last page of Schedule)	\$	\$	\$
7	Forward to #1 Summary	Forward to #2 Summary	
Page of	Page	Page	}



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

LDF-016 Legal Defense Fund for Solo Township Clerk Jessica Flintoft

Laurence Laurence		····	
Enter contributor's name and address,	5. Amount	6. Amount (In-Kind)	7. Cumulative
Name and Address: 3. Date of Receipt; 5/22/23			
Brenna Reichman			
2735 N Sequoia Pkwy	¢ 550.00	¢ 5.00	\$250.00
Ann Arbor, MI 48103	\$ 250.00	\$ 0.00	φ <u>2.50.00</u>
4. If over \$100.00 cumulative, please provide: Occupation: Nurse Practitioner Integrative Healthcare Providers			
Employer: Integrative Healthcare Providers Place of Business:			
Name and Address: 3. Date of Receipt: 5/22/23			
Gretta Spier			
3550 W. Huron River Dr			
Ann Arbor, MI 48103	\$200.00	\$ 0 .00	\$200.00
4. If over \$100.00 cumulative, please provide: Occupation:			
Employer: Place of Business:			
Name and Address: 3. Date of Receipt; 5/27/23			
Nancy Burbano			
519 Woodgrove Dr.			
Ann Arbor, MI 48103	\$75.00	\$ 0.00	\$75.00
4. If over \$100.00 cumulative, please provide: Occupation:			<u> </u>
· · · · · · · · · · · · · · · · · · ·			
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt: 5/27/23			
Ryan Yaple			
1007 Summerfield Glen Circle			
Ann Arbor, MI 48103	\$500.00	\$0.00	\$550.00
4. If over \$100.00 cumulative, please provide: Occupation; Food Distribution	1	* (************************************	7
Employer: Self Place of Business: Home			
2. Name and Address: 3. Date of Receipt: 6/6/23			
Mary Gillis			
580 Little Lake Dr, Unit 10	¢E 000 00	\$5.00	AF 222 22
Ann Arbor, MI 48103	\$5,000.00	\$ 0.00	\$5,200.00
4. If over \$100.00 cumulative, please provide: Occupation: Deputy Clerk			
Employer: Scio Township Place of Business:			
2. Name and Address: 3. Date of Receipt: 6/16/23			
Bill Stein			
1314 S. Zeeb Rd			
Ann Arbor, MI 48103	\$100.00	\$0.00	\$200.00
4. If over \$100.00 cumulative, please provide: Occupation: Retired			
Employer: Place of Business:].,]
Page Subtotal:	\$ 6,125	\$ 0.00	\$6,475.00
Grand Total:			
(Complete on last page of Schedule)	\$	\$	\$
8	Forward to #1 Summary	Forward to #2 Summary	
Page of	Page	Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

LDF-016 Legal Defense Fund for Solo Township Clerk Jessica Filntoft

Enter contributor's name and address.		5. Amount	6. Amount (In-Kind)	7. Cumulative
2. Name and Address: 3. Date of	Receipt: 5/17/23			
Tara Cohen				
865 N. Wagner Road		\$ 0.00	\$ 45.57	\$70.57
Ann Arbor, MI 48103	anader			
4. If over \$100.00 cumulative, please provide: Occupation: Machtanese County	work from home			
Employer: Washtenaw County Place of Business			·····	
	Receipt: 5/19/23			
HOMES Campus 112 Jackson Plaza				
Ann Arbor, MI 48103		\$ 0.00	\$ 750.00	\$750.00
4. If over \$100.00 cumulative, please provide: Occupation:				
Employer: Place of Business				
Name and Address: 3. Date of	Receipt: 5/19/23			
Tara Cohen				
865 N. Wagner Road				
Ann Arbor, MI 48103	nagar	\$0.00	\$ 280.00	\$350.17
4. If over \$100.00 cumulative, please provide: Occupation:	anager			
Employer: Washtenaw County Place of Business	work from home			!
2. Name and Address: 3. Date of	Receipt: 5/19/23			
Tara Cohen				
865 N. Wagner Road		· · · · · · · · · · · · · · · · · · ·		
Ann Arbor, MI 48103		\$ <u>0.00</u>	\$ <u>219.98</u>	\$570.15
4. If over \$100.00 cumulative, please provide: Occupation:	anager			ļ
Employer: Washtenaw County Place of Business	work from home			
2. Name and Address: 3. Date of	Receipt:			
		\$	\$	\$
4. If over \$100.00 cumulative, please provide: Occupation:				
Employer: Place of Business	S			
	Receipt:			
		\$	\$	\$
4. If over \$100.00 cumulative, please provide: Occupation:				
Employer: Place of Business	;			;
	Page Subtotal:	\$ 0.00	\$ 1,295.50	\$1,740.89
(Complete on	Grand Total: last page of Schedule)	\$ 10,010	\$ 1,295.50	\$ 12,410.89
_ 9 . 9		Forward to	Forward to	T
Page 9 of 9		#1 Summary Page	#2 Summary Page	



LEGAL DEFENSE FUND COVER PAGE

Received via disclosure@michigan.gov 04/24/2023

Report must be legible, typed or printed in ink and signed by the Treasurer/Designated Record Keeper and Official

FOR OFFICIAL USE ONLY

and Official.	
1a. Legal Defense Fund I.D. Number: LDF-016 1b. Legal Defense Fund Name: Legal Defense Fund for Scio Township Clerk Jesska Filntott 1c. Legal Defense Fund Address: 865 North Wagner Road Ann Arbor, MI. 48103	2a. Official's Full Name: Jessica Madeleine Flintoft 2b. Official's Office: Scio Township Clerk
1d. Legal Defense Fund Phone:	
3a. Treasurer's Fuli Name: David S. Read 3b. Treasurer's Residential Address: 713 Merlin Way Dexter, Ml. 48130	3c. Treasurer's Business Address: 713 Merlin Way Dexter, MI. 48130
	3d. Treasurer's Phone Number(s):
4a. Quarterly Transaction Report Covering: January 1 - March 31; Due: April 25th April 1 - June 30; Due: July 25th July 1 - September 30; Due: October 25th October 1 - December 31; Due: January 25th 4b. Amendment to Transaction Report: also mark (4a) to indicate which Report is being amended)	5. Dissolution of Legal Defense Fund: Effective Date of Dissolution /// By checking this item, I/We certify that the Legal Defense Fund has no assets or outstanding debts, including late filling fees. Note: The disposition of residual funds must be reported on Itemized Expenditure Schedule 2 and the Summary Page.
6. Verification: I/We certify that all reasonable diligence the best of my/our knowledge and belief the contents ar Official's Signature and Date: Treasurer's/Designated Record Keeper's Signature and	WH 4,21,23

Clear Form

LEGAL DEFENSE FUND SUMMARY PAGE

FOR OFFICIAL USE ONLY

	Cumulative Calendar Year
s <u>\$ 311.01</u>	_{1b. \$} 311.01
ı. ş <u>0.00</u>	2b. \$ 0.00
\$ 311.01	_{зь. \$} 311.01
0.00	
0.00	6b. \$ 0.00
CE STATEMENT	
\$ 1,225.00	
\$ 311.01	
\$_1,536.01	
0.00	
The ending balance must always be a positive	number.
	\$\frac{0.00}{311.01}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ SEE STATEMENT \$\frac{1,225.00}{\$\frac{311.01}{\$\frac{1}{536.01}}\$ \$\frac{1}{536.01}\$ \$\frac{1}{536.01}\$ \$\frac{1}{536.01}\$



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

LDF-016 Legal Defense Fund for Scio Township Clerk Jessica Flintoft

Decade		***************************************	
Enter contributor's name and address.	5. Amount	6. Amount (In-Kind)	7. Cumulative
2. Name and Address: 3. Date of Receipt: 01/23/2023			
Committee to Recall Hathaway, Jerome, and		[
Vogel P-2021-003	\$ 111.01	\$ 0.00	\$111.01
4. If over \$100,00 cumulative, please provide: Occupation: N/A			
Employer: Place of Business:			
Name and Address: 3. Date of Receipt: 03/08/2023 Patricia Stein			
1413 South Zeeb Road			
Ann Arbor, Mi. 48103	\$ 100.00	\$ D.00	\$100.00
4. If over \$100.00 cumulative, please provide: Occupation: Retired			Ì
Employer: Place of Business:		•	
2. Name and Address: 3. Date of Receipt: 03/08/2023	······		
William Stein			
1413 South Zeeb Road			
Ann Arbor, MI. 48103	\$ 100.00	\$ 0.00	\$100.00
4. If over \$100.00 cumulative, please provide: Occupation: Retired			
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt:			
material desired and the second desired desire			ļ
	\$	\$	\$
4. If over \$100.00 cumulative, please provide: Occupation:		:	
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt:			
· —————			
	s 1	\$	\$
A 15 may 0.00 00 may bell an already some black of the control of	·	· - • • • • • • • • • • • • • • • • • • 	*
4. If over \$100.00 cumulative, please provide: Occupation:			
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt:			
	\$	\$	\$
4. If over \$100.00 cumulative, please provide: Occupation:			
Employer: Place of Business:			
Page Subtotal:	\$ 311.01	\$ 0.00	\$ <mark>311.01</mark>
Grand Total: (Complete on last page of Schedule)	\$ 311.01	\$ 0.00	_{\$} β11.01
	Forward to	Forward to	
Page of	#1 Summary Page	#2 Summary Page	



Received via disclosure@michigan.gov 01/27/2023

LEGAL DEFENSE FUND COVER PAGE

Report must be legible, typed or printed in ink and signed by the Treasurer/Designated Record Keeper and Official

and Official.	
1a. Legal Defense Fund I.D. Number: 1b. Legal Defense Fund Name:	2a. Official's Full Name: Jessica Madeleine Flintoft
Legal Defense Fund for Scio Township Clerk Jessica Flintoff 1c. Legal Defense Fund Address: 865 North Wagner Road Ann Arbor, MI 48103	2b. Official's Office: Scio Township Clerk
1d. Legal Defense Fund Phone:	
3a. Treasurer's Full Name: David S. Read 3b. Treasurer's Residential Address: 713 Merlin Way Dexter, MI. 48130	3c. Treasurer's Business Address: 713 Merlin Way Dexter, MI. 48130
	3d. Treasurer's Phone Number(s): 7346577569
4a. Quarterly Transaction Report Covering: January 1 – March 31; Due: April 25th April 1 – June 30; Due: July 25 th	5. Dissolution of Legal Defense Fund: Effective Date of Dissolution //
☐ July 1 – September 30; Due: October 25th ☐ October 1 – December 31; Due: January 25th	By checking this item, I/We certify that the Legal Defense Fund has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Itemized Expenditure Schedule 2 and the Summary Page.
4b. Amendment to Transaction Report: also mark (4a) to indicate which Report is being amended)	
6. Verification: I\We certify that all reasonable diligence the best of my\our knowledge and belief the contents ar	was used in the preparation of this statement and attached schedules (if any) and to e true, accurate and complete.
Official's Signature and Date:	1,19,23 Date: David / Merc 1,19,23
# Treasurer's/Designated Record Keeper's Signature and	Date: 1 auch / Med 1, 19, 23

Clear Form

LEGAL DEFENSE FUND SUMMARY PAGE

FOR OFFICIAL USE ONLY

	Column I This Period	Column II Cumulative Calendar Year
1. Contributions	_{1a. \$} 15,900.00	_{1b. \$} 47,250.00
2. In-Kind Contributions	_{2a. \$} 0.00	_{2b. \$} 0.00
3. TOTAL CONTRIBUTIONS	_{3a. \$} 15,900.00	_{3b. \$} 47,250.00
4. Itemized Expenditures	4a. \$ 16,097.05	**************************************
5. Uniternized Expenditures (less than \$50.01 each - no Schedule)	5a. \$ 0.00	
6. TOTAL EXPENDITURES	6a. \$ 16,097.05	_{6b.} \$46,025.00
ВА	LANCE STATEMENT	
Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	7. \$ 1,422.05	-
Amount received during reporting period (Item 1a.)	8. \$ 15,900.00	
9. SUBTOTAL Add lines 7 and 8	9, \$ 17,322.05	-
10. Amount expended during reporting period (Item 6a.)	10, \$ 16,097.05	review
11. ENDING BALANCE (Subtract line 10 from line 9)	11.\$ 1,225.00	*
(assurance to notify mile of	* The ending balance must always be a	positive number.



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

Legal Defense Fund for Scio Township Clerk Jessica Flintoft

Enter contributor's name and address.	5. Amount	6. Amount (In-Kind)	7. Cumulative
2. Name and Address: William and Patricia Stein 1413 S. Zeeb Road Ann Arbor, MI. 48103 4. If over \$100.00 cumulative, please provide: Occupation: Retired Employer: N/A Place of Business: N/A	\$ [00.00	\$ 0.00	\$1,350.00
2. Name and Address: Jessica Flintoft 865 N. Miller Road Ann Arbor, MI 48103 4. If over \$100.00 cumulative, please provide: Occupation: Township Clerk Employer: Scio Township Place of Business:	\$ 4,500.00	\$ <u>0.00</u>	\$9,500.00
2. Name and Address: William and Patricia Stein 1413 S. Zeeb Road Ann Arbor, MI. 48103 4. If over \$100.00 cumulative, please provide: Occupation: Employer: Scio Township Place of Business: 10/13/22 10/13/22 827 N Zeeb Road, Ann Arbor Place of Business:	\$ <u>[00.00</u>	\$ 0.00	\$1,450.00
2. Name and Address: 3. Date of Receipt: 10/28/22 4. If over \$100.00 cumulative, please provide: Occupation: Employer: Place of Business:	\$	\$	\$
2. Name and Address: 3. Date of Receipt: 4. If over \$100.00 cumulative, please provide: Occupation: Employer: Place of Business:	\$	\$	\$
2. Name and Address: 3. Date of Receipt: 4. If over \$100.00 cumulative, please provide: Occupation: Employer: Place of Business: Grand Total: Grand Total:	\$ 4,700.00 \$ 15,900.00	\$ 0.00 \$ 0.00	\$ 12,300.00 \$ 24,850.00
(Complete on last page of Schedule) Page of	Forward to #1 Summary Page	\$ 0.00 Forward to #2 Summary Page	\$



ITEMIZED EXPENDITURES	1. Legal Defense Fund I.D. Number an		
SCHEDULE 2	Legal Defense Fund for Scio Towns	hip Clerk Jess	ica Flintoft
LEGAL DEFENSE FUND 2. Name and address of person or vendor paid	3. Purpose	4. Date	5. Amount
Dykema Gossett 400 Renaissance Center	Legal Fees	10/14/22	\$ 6,000.00
Detroit, MI 48243		 	9
Dykema Gossett	Legal Fees		
400 Renaissance Center		11/4/22	\$ ^{5,000.00}
Detroit, MI 48243		1-1/200-11/1-11/1-11/1-11/1-1	
Dykema Gossett	Legal Fees	12/2/22	E 007.0E
400 Renaissance Center Detroit, MI 48243		IZIZIZZ	\$5,097.05
			s
		L	Ψ
		· · · · · · · · · · · · · · · · · · ·	
			\$
			\$
			\$
			\$
			s
			\$
			\$
	Page Subtotal		\$ 16,097.05
	Grand Total (Complete on last page of Schedule)		\$ 16,097.05
Page 1 of 1			Forward to #3 Summary Page



LEGAL DEFENSE FUND COVER PAGE

Report must be legible, typed or printed in lnk and signed by the Treasurer/Designated Record Keeper and Official

and Official.	
1a. Legal Defense Fund I.D. Number: LDF-016 1b. Legal Defense Fund Name: Legal Defense Fund for Solo Township Clerk Jesska Flintoft 1c. Legal Defense Fund Address: 865 North Wagner Road Ann Arbor, MI 48103	2a. Official's Full Name: Jessica Madeleine Flintoft _{2b. Official's Office:} Scio Township Cierk
1d. Legal Defense Fund Phone:	
3a. Treasurer's Full Name: David: S. Read 3b. Treasurer's Residential Address: 713 Merlin Way Dexter, Ml. 48130	3c. Treasurer's Business Address: 713 Merlin Way Dexter, MI. 48130
	3d. Treasurer's Phone Number(s): 7346577569
4a. Quarterly Transaction Report Covering: ☐ January 1 ~ March 31; Due: April 25th ☐ April 1 — June 30; Due: July 25 th ☑ July 1 — September 30; Due: October 25th ☐ October 1 — December 31; Due: January 25th 4b. ☑ Amendment to Transaction Report: also mark (4a) to indicate which Report is being amended)	5. Dissolution of Legal Defense Fund: Effective Date of Dissolution / By checking this item, I/We certify that the Legal Defense Fund has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Itemized Expenditure Schedule 2 and the Summary Page.
the best of my\our knowledge and belief the contents ar Official's Signature and Date:	MA 1, 19,23
Treasurer's/Designated Record Keeper's Signature and	Date: Daniel Read 1,19,23



LEGAL DEFENSE FUND SUMMARY PAGE

Clear Form

FOR OFFICIAL USE ONLY

	Column I This Period	Column II Cumulative Calendar Year
1. Contributions	ta. \$ 3,050.00	1b. \$31,350.00
2. In-Kind Contributions	2a. \$ 0.00	_{2b. \$} 0.00
3. TOTAL CONTRIBUTIONS	_{3a. \$} 3,050.00	_{3b. \$} 31,350.00
4. Itemized Expenditures	4a. \$ 1,627.95	
5. Uniternized Expenditures (less than \$50.01 each - no Schedule)	_{5a. \$} 0.00	
6. TOTAL EXPENDITURES	_{6a. \$} 1,627.95	6b. \$ 29,927.95
ВА	LANCE STATEMENT	
7. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	7. \$ 0.0	
Amount received during reporting period (item 1a.)	8. \$ 3,050.00	
9. SUBTOTAL Add lines 7 and 8	9. \$ 3,050.00	
10. Amount expended during reporting period (Item 6a.)	10. \$ 1,627.95	
11. ENDING BALANCE	1,422.05	*
(Subtract line 10 from line 9)	* The ending balance must always be	a positive number.



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

Legal Defense Fund for Scio Township Clerk Jessica Flintoft

Enter contributor's name and address.		5. Amount	6. Amount (In-Kind)	7. Cumulative
Name and Address: 3. Date of Peter Heydon	f Receipt: 7/15/22			
3562 W. Huron River Drive Ann Arbor, MI 48103	į	\$ 2,000.00	\$ 0.00	\$2,000.00
4. If over \$100.00 cumulative, please provide: Occupation:	etired	•		
Employer: N/A Place of Busines	s: <u>N/A</u>			
Elaine Brock	f Receipt: 7/20/22			
3435 Miller Road Ann Arbor, MI 48103		\$ 350.00	\$ 0.00	\$350.00
4. If over \$100.00 cumulative, please provide: Occupation:	ttorney			
Employer: C3 Authority, LLC Place of Busines	s: Ann Arbor			
Jonathon Greenberg	f Receipt: 9/15/22			
650 Park Road Ann Arbor, MI 48103		\$300.00	\$ 0.00	\$300.00
4. If over \$100.00 cumulative, please provide: Occupation:	irector of Data	7	,	1
Employer: Cogstate Place of Busines				
2. Name and Address: 3. Date of	f Receipt: 9/21/22			
Jean Hergott				
685 Merlin Way Dexter, Ml. 48130		\$250.00	\$0.00	\$250.00
4. If over \$100.00 cumulative, please provide: Occupation:	nysician's Assistant		¥ <u>0.00</u>	4-30:00
Employer: Michigan Medicine Place of Busines				
	f Receipt: 9/30/22			
William and Patricia Stein 1413 s. Zeeb Road				<u></u>
Ann Arbor, Mt. 48103	e u a ferrar ud	\$100.00	\$ 0.00	\$1,100.00
4. If over \$100.00 cumulative, please provide: Occupation:	etired			
Employer: N/A Place of Busines				**************************************
2. Name and Address: 3. Date of Janet V. Haynes	of Receipt: 9/30/22			
1410 S. Zeeb Road			<u></u>	
Ann Arbor, MI 48103		\$50.00	\$0.00	\$50.00
4. If over \$100.00 cumulative, please provide: Occupation:				
Employer: Place of Busines	s:			
	Page Subtotal:	\$ 3,050.00	\$ 0.00	\$4,050.00
(Complete of	Grand Total: n last page of Schedule)	\$ 3,050	\$ 0.00	\$4,050.00
Page of		Forward to #1 Summary Page	Forward to #2 Summary Page	



ITEMIZED EXPENDITURES SCHEDULE 2 LEGAL DEFENSE FUND	1. L	Legal Defense Fund I.D. Number and gal Defense Fund for Scio Townsh	d Name: nip Clerk Jessi	ca Flintoft
Name and address of person or vendor paid	1	3. Purpose	4. Date	5. Amount
Bank of Ann Arbor 125 S. 5th Avenue Ann Arbor, MI 48107	 	Check Fee	7/26/22	\$ 27.95
Dykema Gossett 400 Renaissance Center Detroit, MI 48243		Legal Fees	8/24/22	\$ 1,600.00
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
		Page Subtotal		\$ 1,627.95
	(0	Grand Total omplete on last page of Schedule)		\$ 1,627.95
Page _ 1 _ of _ 1		emplote on last page of obligation		Forward to #3 Summary Page



LEGAL DEFENSE FUND COVER PAGE

Report must be legible, typed or printed in ink and signed by the Treasurer/Designated Record Keeper and Official.

and Official.	
1a. Legal Defense Fund I.D. Number:	2a. Official's Full Name; Jessica Madeleine Flintoft
1b. Legal Defense Fund Name: Legal Defense Fund for Scio Township Clerk Jessica Flintoft 1c. Legal Defense Fund Address: 865 North Wagner Road Ann Arbor, MI 48103	2b. Official's Office: Scio Township Clerk
1d. Legal Defense Fund Phone:	
3a. Treasurer's Full Name: David S. Read 3b. Treasurer's Residential Address: 713 Merlin Way Dexter, MI. 48130	3c. Treasurer's Business Address: 713 Merlin Way Dexter, Ml. 48130
	3d. Treasurer's Phone Number(s): 7346577569
4a. Quarterly Transaction Report Covering: January 1 – March 31; Due: April 25th April 1 – June 30; Due: July 25 th July 1 – September 30; Due: October 25th October 1 – December 31; Due: January 25th	5. Dissolution of Legal Defense Fund: Effective Date of Dissolution By checking this item, I/We certify that the Legal Defense Fund has no assets or outstanding debts, including late filling fees. Note: The disposition of residual funds must be reported on Itemized Expenditure Schedule 2 and the Summary Page.
(4a) to indicate which Report is being amended) 6. Verification: I/We certify that all reasonable diligence the best of my/our knowledge and belief the contents ar Official's Signature and Date:	was used in the preparation of this statement and attached schedules (if any) and to e true, accurate and complete.
Treasurer's/Designated Record Keeper's Signature and	Date: Daniel Read 1,19,23



LEGAL DEFENSE FUND SUMMARY PAGE

Clear Form

FOR OFFICIAL USE ONLY

	Column I This Period	Column II Cumulative Calendar Year
1. Contributions	ta. \$ 8,300.00	1b. \$ 28,300.00
2. In-Kind Contributions	_{2a. \$} 0.00	_{2b. \$} 0.00
3. TOTAL CONTRIBUTIONS	_{3a. \$} 8,300.00	_{3b. \$} 28,300.00
4. Itemized Expenditures	_{4a. \$} 8,300.00	
5. Uniternized Expenditures (less than \$50.01 each - no Schedule)	_{5a. \$} 0.00	
6. TOTAL EXPENDITURES	6a. \$ 8,300.00	_{6b. \$} 28,300.00
BAI	LANCE STATEMENT	
Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	7. \$ 0.0	_
8. Amount received during reporting period (Item 1a.)	8, \$ 8,300.00	_
9. SUBTOTAL Add lines 7 and 8	9. \$_8,300.00	
10. Amount expended during reporting period (Item 6a.)	10.\$ 8,300.00	
11. ENDING BALANCE	11.\$ 0.00	*
(Subtract line 10 from line 9)	* The ending balance must always be	a positive number.



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

Legal Defense Fund I.D. Number and Name:

Legal Defense Fund for Scio Township Clerk Jessica Flintoft

Enter contributor's name and address.	5. Amount	6. Amount (In-Kind)	7. Cumulative
2. Name and Address: 3. Date of Receipt: 5/8/22			
George Miller			
3100 Delhì Road	\$ 300.00	\$ 0.00	\$300.00
Ann Arbor, MI 48103			
4. If over \$100.00 cumulative, please provide: Occupation: Childcare Center owner The Discovery Center 775 S. Maple Board, Ann Arbor			
Employer: The Discovery Center Place of Business: 776 S. Maple Road, Ann Arbor	· · · · · · · · · · · · · · · · · · ·		
2. Name and Address: 3. Date of Receipt: 5/10/22			
Steve Schwartz			
2580 Craig Road Ann Arbor, MI 48103	\$ 5,000.00	\$ 0.00	\$15,000.00
'			
4. If over \$100.00 cumulative, please provide: Occupation: Author Employer: Self - employed Place of Business: 2580 Oralg Road, Ann Arbor			
2. Name and Address: 3. Date of Receipt: 5/19/22			
Frode Maaseidevag 5127 Dexter Ann Arbor Road			
Ann Arbor, MI 48103	\$2,000.00	\$ 0.00	\$2,000.00
4. If over \$100.00 cumulative, please provide: Occupation: Retired	· National Action		.[.7]
Employer: N/A Place of Business: N/A			
2. Name and Address: 3. Date of Receipt: 5/19/22			
Steven and Marci Feinberg 3498 Timberwood Lane			
Ann Arbor, Mi 48103	\$1,000.00	\$0.00	\$1,000.00
4. If over \$100.00 cumulative, please provide: Occupation: Retired	* I.		Y <u></u>
Employer: N/A Place of Business: N/A			
2. Name and Address: 3. Date of Receipt:			
	\$	\$	\$
4. If over \$100.00 cumulative, please provide: Occupation:			
Employer: Place of Business:			
Name and Address: 3. Date of Receipt:			
	\$	s	s
4. If over \$100.00 cumulative, please provide: Occupation:		'	`
Employer: Place of Business:	\$ 8,300.00	* IO OO	446 300
Page Subtotal: Grand Total:	<u> </u>	\$ 0.00	\$18,300
(Complete on last page of Schedule)	\$ 8,300.00	\$ 0.00	\$ 18,300.00
1 1	Forward to #1 Summary	Forward to #2 Summary	
Page of	Page	Page	



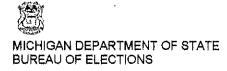
ITEMIZED EXPENDITURES SCHEDULE 2 LEGAL DEFENSE FUND	Legal Defense Fund I.D. Number ar Legal Defense Fund for Scio Towns	nd Name; ship Clerk Jess	sica Flintoft
2. Name and address of person or vendor paid	3. Purpose	4. Date	5. Amount
Dykema Gossett 400 Renaissance Center Detroit, MI 48243	Legal Fees	5/9/22	\$ 300.00
Dykema Gossett 100 Renaissance Center Detroit, MI 48243	Legal Fees	5/11/22	\$5,000.00
Dykema Gossett 400 Renaissance Center Detroit, MI 48243	Legal Fees	5/20/22	\$ 3,000.00
			\$
			\$
			\$
			\$
			\$
		,	\$
		-	\$
			\$
	Page Subtotal		\$ 8,300.00
	Grand Total (Complete on last page of Schedule)		\$ 8,300.00
Page 1 of 1			Forward to #3 Summary Page



LEGAL DEFENSE FUND COVER PAGE

Report must be legible, typed or printed in lnk and signed by the Treasurer/Designated Record Keeper and Official

and Official.	
1a. Legal Defense Fund I.D. Number: LDF-016	2a. Official's Full Name; Jessica Madeleine Flintoft
1b. Legal Defense Fund Name: Legal Defense Fund for Solo Township Clerk Jessica Filntoft 1c. Legal Defense Fund Address: 865 North Wagner Road Ann Arbor, MI 48103	2b. Official's Office: Scio Township Clerk
1d. Legal Defense Fund Phone:	
3a. Treasurer's Full Name: David S. Read 3b. Treasurer's Residential Address: 713 Merlin Way Dexter, MI. 48130	3c. Treasurer's Business Address: 713 Merlin Way Dexter, MI. 48130
	3d. Treasurer's Phone Number(s): 7346577569
4a. Quarterly Transaction Report Covering: ▼ January 1 – March 31; Due: April 25th	5. Dissolution of Legal Defense Fund: Effective Date of Dissolution
April 1 – June 30; Due: July 25 th	
☐ July 1 ~ September 30; Due: October 25th	By checking this item, i\We certify that the Legal Defense Fund has no assets or
October 1 – December 31; Due: January 25th	outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on itemized Expenditure Schedule 2 and the Summary Page.
4b. 🔀 Amendment to Transaction Report: also mark (4a) to indicate which Report is being amended)	
6. Verification: I\We certify that all reasonable diligence the best of my\our knowledge and belief the contents a	was used in the preparation of this statement and attached schedules (if any) and to e true, accurate and complete.
Official's Signature and Date:	1,19,23
Treasurer's/Designated Record Keeper's Signature and	Date: 1 19,23



LEGAL DEFENSE FUND SUMMARY PAGE

Clear Form

FOR OFFICIAL USE ONLY

	Column I This Period	Column II Cumulative Calendar Year
1. Contributions	1a. \$ 20,000.00	
2. In-Kind Contributions	_{2a. \$} 0.00	2b, \$
3. TOTAL CONTRIBUTIONS	3a. \$ 20,000.00	_{3b. \$} 20,000.00
4. Itemized Expenditures	4a. \$ 20,000.00	
5. Unitemized Expenditures (less than \$50.01 each - no Schedule)	_{5a. \$} 0.00	
6. TOTAL EXPENDITURES	_{6a. \$} 20,000.00	_{6b. \$} 20,000.00
BA	LANCE STATEMENT	
7. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	7. \$ 0.00	
8. Amount received during reporting period (Item 1a.)	8. \$ 20,000.00	_
9. SUBTOTAL Add lines 7 and 8	9. \$ 20,000.00	·
10. Amount expended during reporting period (Item 6a.)	10.\$ 20,000.00	
11. ENDING BALANCE	11.\$ 0.00	· · ·
(Subtract line 10 from line 9)	* The ending balance must always be a	positive number.



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

Legal Defense Fund for Scio Township Clerk Jessica Flintoft

Enter contributor's name and address.	5. Amount	6. Amount (in-Kind)	7, Cumulative
Name and Address: 3. Date of Receipt: 3/25/22 David and Alisande Read 710 Markin Marketin M			
713 Merlin Way Dexter, MI 48130	\$ 2,000.00	\$ 0.00	\$2,000.00
4. If over \$100.00 cumulative, please provide: Occupation; Retired Employer: N/A Place of Business: N/A			
Name and Address: Address: Sate of Receipt: 3/25/22 Kathleen Brant and Maureen Richards Sate of Receipt: 3/25/22 Ann Arbor, MI 48103	\$ 6,000.00	\$ 0.00	\$6,000.00
4. If over \$100.00 cumulative, please provide: Occupation: Retired Employer: N/A Place of Business: N/A			
2. Name and Address: 3. Date of Receipt: 3/25/22			
Steven Schwartz 2580 Craig Road Ann Arbor, MI 48103	\$ 10,000.00	\$ 0.00	\$10,000.00
4. If over \$100.00 cumulative, please provide: Occupation: Author Employer: Self-employed Place of Business: N/A			:
2. Name and Address: 3. Date of Receipt: 3/25/22 Peter Davis 107 Aprill Drive, Suite 3 Ann Arbor, MI 48103 4. If over \$100.00 cumulative, please provide: Occupation: Attorney	\$ 5 00.00	\$ <u>0.00</u>	\$500.00
Employer: Davis Law Firm, PC Place of Business: Scio Township			
2. Name and Address: William and Patricia Stein 1413 South Zeeb Road Ann Arbor, MI 48103 4. If over \$100.00 cumulative, please provide: Occupation: Retired Employer: N/A Place of Business: N/A	\$1,000.00	\$ 0.00	\$ <u>1,000.00</u>
2. Name and Address: Peter C. Flintoft 119 S. Main Street Chelsea, Mi 48118 4. If over \$100.00 cumulative, please provide: Occupation; Attorney Employer: Keusch, Flintoft & Fink, PC Place of Business: Chelsea	\$ 100.00	\$ <u>0.00</u>	\$100.00
Page Subtotal:	\$ 19,600.00	\$ 0.00	\$ 19,600.00
Grand Total: (Complete on last page of Schedule)	\$	\$	\$
Page of	Forward to #1 Summary Page	Forward to #2 Summary Page	



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense	Fund I.D. Number	and Name:
Legal Defense Fund	for Scio Township Cl	erk Jessica Flintoft

Enter contributor's name and address.	5. Amoun		7.
2. Name and Address: 3. Date of Receipt: 3/27/	22	(In-Kind)	Cumulative
Jim Knol			
1778 Snowberry Ridge Road	\$ 400.00	\$ 0.00	\$400.00
Ann Arbor, MI 48103			
4. If over \$100.00 cumulative, please provide: Occupation: Physician			
Employer: UofM Place of Business: Ann Arbor			
2. Name and Address: 3. Date of Receipt:			
	\$] \$	\$
4. If over \$100.00 cumulative, please provide: Occupation:			
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt:			
	· · · · · · · · · · · · · · · · · · ·		
			4
	\$[\$	4
4. If over \$100,00 cumulative, please provide: Occupation:			
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt:			
,	į		
A 15 aven \$400.00 avenulation where a manifely Consumation	*1	\$	\$ <u></u>
If over \$100.00 cumulative, please provide: Occupation:			
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt:			
	\$	\$	\$
4. If over \$100.00 cumulative, please provide: Occupation:		*	
Employer: Place of Business:			
Name and Address: 3. Date of Receipt:			
·			
		- I &	s = ===
4. If over \$100.00 cumulative, please provide: Occupation:	· !		الـــــــا
Employer: Place of Business:	ubtotal: \$ 400.0	0 0 000	-400.00
	7		\$400.00
(Complete on last page of S	I CULTELIA	\$ 0.00	\$ 20,000.00
2 2	Forward to #1 Summa	Forward to	
Page of2	Page	Page	



ITEMIZED EXPENDITURES	1. Legal Defense Fund I.D. Number and Name:		
SCHEDULE 2 LEGAL DEFENSE FUND	Legal Defense Fund for Scio Township Clerk Jessica Flintoft		
Name and address of person or vendor paid	3. Purpose	4. Date	5. Amount
Dykema Gossett 400 Renaissance Center Detroit, MI 48243	Legal Fees	3/31/22	\$ 20,000.00
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
	Page Subtotal		\$ 20,000.00
	Grand Total (Complete on last page of Schedule)		\$ 20,000.00
Page 1 of 1			Forward to #3 Summary Page



LEGAL DEFENSE FUND COVER PAGE

Report must be legible, typed or printed in ink and signed by the Treasurer/Designated Record Keeper and Official.

1a. Legal Defense Fund I.D. Number: LDF-016	2a. Official's Full Name:
	Jessica Madeleine Flintoft
Legal Defense Fund Name: Legal Defense Fund for Scio Township Clerk Jessica Flintoft 1c. Legal Defense Fund Address: 865 North Wagner Road	2b. Official's Office: Scio Township Clerk
Ann Arbor, MI 48103	
1d. Legal Defense Fund Phone: 7346577569	
3a. Treasurer's Full Name:	3c. Treasurer's Business Address:
David S. Read	713 Merlin Way
3b. Treasurer's Residential Address:	Dexter, MI 48130
713 Merlin Way Dexter, MI 48130	
	3d. Treasurer's Phone Number(s): 7346577569
4a. Quarterly Transaction Report Covering:	5. Dissolution of Legal Defense Fund:
January 1 – March 31; Due: April 25th	Effective Date of Dissolution
April 1 – June 30; Due: July 25 th	
☑ July 1 – September 30; Due: October 25th	
October 1 - December 31; Due: January 25th	By checking this item, I/We certify that the Legal Defense Fund has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Itemized Expenditure Schedule 2 and the Summary Page.
4b. Amendment to Transaction Report: also mark (4a) to indicate which Report is being amended)	
Verification: I\We certify that all reasonable diligence the best of my\our knowledge and belief the contents a	was used in the preparation of this statement and attached schedules (if any) and to re true, accurate and complete.
Official's Signature and Date:	10,28,22
Treasurer's/Designated Record Keeper's Signature and	1 1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1



LEGAL DEFENSE FUND SUMMARY PAGE

FOR OFFICIAL USE ONLY

	Column I This Period	Column II Cumulative Calendar Year
1. Contributions	1a. \$ 3,050.00	1b. \$ 31,600.00
2. In-Kind Contributions	2a. \$ 0.00	2b. \$ 0.00
3. TOTAL CONTRIBUTIONS	3a. \$ 3,050.00	3b. \$ 31,600.00
4. Itemized Expenditures	4a. \$ _1,627.95	
5. Unitemized Expenditures (less than \$50.01 each - no Schedule)	5a, \$ 0.00	
6. TOTAL EXPENDITURES	6a. \$ 1,627.95	6b. \$ 24,603.55
ВА	LANCE STATEMENT	
7. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	7. \$ _5,574.40	_
Amount received during reporting period (Item 1a.)	8. \$ 3,050.00	
9. SUBTOTAL Add lines 7 and 8	9. \$_8,624.40	<u> </u>
10. Amount expended during reporting period (Item 6a.)	10. \$ 1,627.95	
11. ENDING BALANCE	11. \$ 6,996.45	*
(Subtract line 10 from line 9)	* The ending balance must always b	e a positive number.



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

LDF-016 Legal Defense Fund for Scio Township Clerk Jessica Flintoft

Enter contributor's name and address.	5. Amount	6. Amount (In-Kind)	7. Cumulative
2. Name and Address: 3. Date of Receipt: 07/15/2022		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Peter N. Heydon			
3562 W. Huron River Drive Ann Arbor, MI 48103	\$ 2,000.00	\$	\$ 2,000.00
4. If over \$100.00 cumulative, please provide: Occupation: retired			
Employer: n/a Place of Business: n/a			
Name and Address: 3. Date of Receipt: 07/20/2022			
Elaine Brock			
3435 Miller Road	\$ 350.00	\$	\$ 350.00
Ann Arbor, MI 48103	φ σσσ.σσ	Ψ	Ψ_330.00
4. If over \$100.00 cumulative, please provide: Occupation: Attorney			
Employer: C3 Authority, LLC Place of Business: Ann Arbor, MI			
2. Name and Address: 3. Date of Receipt: 09/15/2022			
Jonathan Greenberg			
650 Park Road Ann Arbor, MI 48103	\$ 300.00	\$	\$300.00
If over \$100.00 cumulative, please provide: Occupation: Director of Data	φ_000.00	Ψ	Φ 300.00
Employer: Cogstate Place of Business: Ann Arbor, MI			
2. Name and Address: 3. Date of Receipt: 09/21/2022			
Jean M. Hergot			
685 Merlin Way Dexter, MI 48130	\$ 250.00	\$	\$ 250.00
4. If over \$100.00 cumulative, please provide: Occupation: Physician's Assistant	Ψ <u>πσσσσσ</u>	Ψ	φ230.00
Employer: Michigan Medicine Place of Business: Ann Arbor, MI			
2. Name and Address: 3. Date of Receipt: 09/30/2022			
Patricia Stein			
1413 S. Zeeb Road	\$ 100.00	\$	\$ 1,100.00
Ann Arbor, MI 48103	1	· ·	Ψ1,100.00
4. If over \$100.00 cumulative, please provide: Occupation: retired			
Employer: n/a Place of Business: n/a			
2. Name and Address: 3. Date of Receipt: 09/30/2022			
Janet V. Haynes 1410 S. Zeeb Road			
Ann Arbor, MI 48103	\$ 50.00	\$	\$ 50.00
If over \$100.00 cumulative, please provide: Occupation: retired			
Employer: n/a Place of Business: n/a			
Page Subtotal:	\$30500	\$ -0 -	\$4050.
Grand Total: (Complete on last page of Schedule)	\$3050.00	\$-0-	skin ch
(Sompote on last page of otherwise)	Forward to	Forward to	1 1030
Page of	#1 Summary Page	#2 Summary Page	



ITEMIZED EXPENDITURES SCHEDULE 2 LEGAL DEFENSE FUND		Legal Defense Fund I.D. Number and Name: LDF-016 Legal Defense Fund for Scio Township Clerk Jessica Flintoft			
Name and address of person or vendor paid		3. Purpose	4. Date	5. Amount	
Bank of Ann Arbor 125 S. 5th Avenue Ann Arbor, MI 48107		Fee for Checks	07/26/2022	\$ 27.95	
Dykema Gossett 100 Renaissance Center Detroit, MI 48243		Legal Fees	08/24/2022	\$ 1,600.00	
				\$	
				\$	
			***************************************	\$	
				\$	
		*		\$	
				\$	
,			***************************************	\$	
				\$	
				\$	
		Page Subtotal		\$ 1627.98	
	((Grand Total Complete on last page of Schedule)		\$ 1627.95	
Page/ of _/				Forward to #3 Summary Page	



LEGAL DEFENSE FUND COVER PAGE

Report must be legible, typed or printed in ink and signed by the Treasurer/Designated Record Keeper and Official.

allu Olliciai.	
1a. Legal Defense Fund I.D. Number: LDF-016 1b. Legal Defense Fund Name: Legal Defense Fund for Scio Township Clerk Jessica Flintoft 1c. Legal Defense Fund Address: 865 North Wagner Road Ann Arbor, MI 48103	2a. Official's Full Name: Jessica Madeleine Flintoft 2b. Official's Office: Scio Township Clerk
1d. Legal Defense Fund Phone: 7346577569	
3a. Treasurer's Full Name: David S. Read 3b. Treasurer's Residential Address: 713 Merlin Way Dexter, MI 48130	3c. Treasurer's Business Address: 713 Merlin Way Dexter, MI 48130
	3d. Treasurer's Phone Number(s): 7346577569
4a. Quarterly Transaction Report Covering: ☐ January 1 - March 31; Due: April 25th ☐ April 1 - June 30; Due: July 25 th ☑ July 1 - September 30; Due: October 25th ☐ October 1 - December 31; Due: January 25th 4b. ☐ Amendment to Transaction Report: also mark (4a) to indicate which Report is being amended)	5. Dissolution of Legal Defense Fund: Effective Date of Dissolution ———————————————————————————————————
6. Verification: I\We certify that all reasonable diligence the best of my\our knowledge and belief the contents at Official's Signature and Date: Treasurer's/Designated Record Keeper's Signature and	Mf 10,10,22



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

LDF-016 Legal Defense Fund for Scio Township Clerk Jessica Flintoft

Enter contributor's name and address.	5. Amount	6. Amount (In-Kind)	7. Cumulative
2. Name and Address: 3. Date of Receipt: 07/15/2022		,	
Peter N. Heydon 3562 W. Huron River Drive Ann Arbor, MI 48103	\$ 2,000.00	\$	\$ <u>2,000.00</u>
4. If over \$100.00 cumulative, please provide: Occupation: retired			
Employer: n/a Place of Business: n/a			
2. Name and Address: 3. Date of Receipt: 07/20/2022			
Elaine Brock 3435 Miller Road Ann Arbor, MI 48103	\$ 350.00	\$	\$ 350.00
4. If over \$100.00 cumulative, please provide: Occupation: Attorney			
Employer: C3 Authority, LLC Place of Business: Ann Arbor, MI			
2. Name and Address: 3. Date of Receipt: 09/15/2022			
Jonathan Greenberg 650 Park Road Ann Arbor, MI 48103 4. If over \$100.00 cumulative, please provide: Occupation: Director of Data	\$ 300.00	\$	\$300.00
Employer: Cogstate Place of Business: Ann Arbor, MI			
2. Name and Address: 3. Date of Receipt: 09/21/2022			
Jean M. Hergot 685 Merlin Way Dexter, MI 48130 4. If over \$100.00 cumulative, please provide: Occupation: Physician's Assistant	\$ <u>250.00</u>	\$	\$ <u>250.00</u>
Employer: Michigan Medicine Place of Business: Ann Arbor, MI			
2. Name and Address: 3. Date of Receipt: 09/30/2022			
Patricia Stein 1413 S. Zeeb Road Ann Arbor, MI 48103 4. If over \$100.00 cumulative, please provide: Occupation: retired	\$ <u>100.00</u>	\$	\$ <u>1,100.00</u>
Employer: n/a Place of Business: n/a			
2. Name and Address: 3. Date of Receipt: 09/30/2022			
Janet V. Haynes 1410 S. Zeeb Road Ann Arbor, MI 48103	\$ 50.00	\$	\$ 50.00
4. If over \$100.00 cumulative, please provide: Occupation: retired			
Employer: _n/a Place of Business: _n/a			
Page Subtotal:	\$30500	\$ -0-	\$4050.
Grand Total: (Complete on last page of Schedule)	\$3050.00	\$ -0 -	\$4050.
Page of	Forward to #1 Summary Page	Forward to #2 Summary Page	



ITEMIZED EXPENDITURES SCHEDULE 2 LEGAL DEFENSE FUND	Legal Defense Fund I.D. Number and Name: LDF-016 Legal Defense Fund for Scio Township Clerk Jessica Flinto					
2. Name and address of person or vendor paid		3. Purpose	4. Date 5. Amour			
Bank of Ann Arbor 125 S. 5th Avenue Ann Arbor, MI 48107		Fee for Checks	07/26/2022	\$ <u>27.95</u>		
Dykema Gossett 400 Renaissance Center Detroit, MI 48243		Legal Fees	08/24/2022	\$ <u>1,600.00</u>		
				\$		
				\$		
				\$		
				\$		
				\$		
				\$		
·				\$		
				\$		
				\$		
		Page Subtotal Grand Total		\$ 1627.95		
	((Complete on last page of Schedule)		\$ <u>/627.95</u> Forward to #3		
Page/ of/				Summary Page		



Received via disclosure@michigan.gov 08/15/2022

LEGAL DEFENSE FUND COVER PAGE

Report must be legible, typed or printed in ink and signed by the Treasurer/Designated Record Keeper and Official.

and Official.	
1a. Legal Defense Fund I.D. Number: 1b. Legal Defense Fund Name: Legal Defense Fund for Scio Township Clerk Jessica Flintoft 1c. Legal Defense Fund Address: 865 North Wagner Road Ann Arbor, MI 48103	2a. Official's Full Name: Jessica Madeleine Flintoft 2b. Official's Office: Scio Township Clerk
1d. Legal Defense Fund Phone: 7346577569	
3a. Treasurer's Full Name: David S. Read 3b. Treasurer's Residential Address: 713 Merlin Way Dexter, MI 48130	3c. Treasurer's Business Address: 713 Merlin Way Dexter, MI 48130 3d. Treasurer's Phone Number(s): 7346577569
4a. Quarterly Transaction Report Covering: ☐ January 1 - March 31; Due: April 25th ☐ April 1 - June 30; Due: July 25 th ☐ July 1 - September 30; Due: October 25th ☐ October 1 - December 31; Due: January 25th 4b. ☐ Amendment to Transaction Report: also mark (4a) to indicate which Report is being amended)	5. Dissolution of Legal Defense Fund: Effective Date of Dissolution / By checking this item, I/We certify that the Legal Defense Fund has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Itemized Expenditure Schedule 2 and the Summary Page.
6. Verification: I/We certify that all reasonable diligence the best of my/our knowledge and belief the contents an Official's Signature and Date: Treasurer's/Designated Record Keeper's Signature and	WA 7,13,2022



Clear Form

Contributions Schedule. Enter the cumulative amount of the direct contributions received DNP 32NATE LEGISTRAND Vests Schedule. Enter the cumulative amount of the direct contributions received DNP 32NAMMUS SCHEDULE SCHEDULE STREET TO S

YINO 32U JAIDITTO FOR OFFICIAL USE ONLY Column I, the grand total of in kind contributions reported in Column on the Column of t

	Column I This Period	Column II Cumulative Calendar Year
Contributions Contributions	1a. \$ 8550.00	_{1b. \$} 28550.00
2. In-Kind Contributions STAW IS IN ASSISTED OF OCCUPANT ASSISTED OF OCCUPANT ASSISTED OF OCCUPANT ASSISTED OCCUPANT AS	2a. \$ 3a. \$ 8550.00 4a. \$ 22,975.60	2b. \$ 3b. \$ 28550.00
Unitemized Expenditures (less than \$50.01 each - no Schedule) TOTAL EXPENDITURES	5a. \$	amount on 6b for the calentar ye
BA	LANCE STATEMENT	"Zero."
Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	7. \$ 20,000.00 enterting 20,000.00	ITEM 8: TOTAL CONTRIBUTION Transaction Report (Item 1a)
Amount received during reporting period (Item 1a.)	8. \$ 8550.00	
9. SUBTOTAL Add lines 7 and 8	9. \$_28,550.00	
10. Amount expended during reporting period (Item 6a.)	10. \$ 22,975.60	
11 ENDING BALANCE	11.\$ 5574.40	* TEMPORAL CURRENCY ON ANDRE
(Subtract line 10 from line 9)	* The ending balance must always be a p	Legal Defense Fund. redmun evitico



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

LDF-016 Legal Defense Fund for Scio Township Clerk Jessica Flintoft

Enter contributor's name and address.	5. Amount	6. Amount (In-Kind)	7. Cumulative
2. Name and Address: Frode Maaseidevaag 5127 Dexter Ann Arbor Road Ann Arbor, MI 48103 3. Date of Receipt: 05/23/2022 Tretired	\$ 2000.00	\$	\$2000
4. If over \$100.00 cumulative, please provide: Occupation: retired Employer: N/A Place of Business: N/A	fative contrib	and the cumu	Isubivibni
2. Name and Address: Steve Schwartz 2580 Craig Road Ann Arbor, MI 48103 4. If over \$100.00 cumulative, please provide: Occupation: Employer: Self-employed Place of Business: 2580 Craig Road, Ann Arbor Place of Business:	\$ 5000.00	ROTINUOM SISTEMATICAL BYIT AJUMU helico sidi not	\$15000
2. Name and Address: Steven and Marci Feinberg 3498 Timberwood Lane Ann Arbor, MI 48103 4. If over \$100.00 cumulative, please provide: Occupation: retired	\$1000.00	edinetria (J/	\$1000
Employer: N/A Place of Business: N/A	LETED SOH	EACH COM	NUMBER
2. Name and Address: George Miller 3100 Delhi Road Ann Arbor, MI 48103 4. If over \$100.00 cumulative, please provide: Occupation:	\$300.00	\$	\$300
2. Name and Address: Jessica Flintoft 865 North Wagner Road Ann Arbor, MI 48103 4. If over \$100.00 cumulative, please provide: Occupation: Scio Township Place of Business: 3. Date of Receipt: 5/2/2022 Township Clerk 827 N. Zeeb Road, Ann Arbor Place of Business:	\$250.00	\$	\$250
2. Name and Address: , 3. Date of Receipt: 4. If over \$100.00 cumulative, please provide: Occupation: Employer: Place of Business:	\$	\$	\$
Page Subtotal:	\$ 8550.00	\$	\$ 18550.00
Grand Total: (Complete on last page of Schedule)	\$ 8550.00 Forward to	\$ Forward to	\$ 18550.00
Page of	#1 Summary Page	#2 Summary Page	



ITEMIZED EXPENDITURES	1. L	egal Defense Fund I.D. Number and F-016	Name:	
SCHEDULE 2				
2. Name and address of person or vendor paid		3. Purpose	4. Date	5. Amount
Dykema 400 Renaissance Center Detroit, MI 48243		Legal fees	May 9,2022	\$ 1,804.00
Dykema 400 Renaissance Center Detroit, MI 48243		Legal fees	May 9, 2022	\$21,171.60
				\$
	152			\$
	1			\$
				\$
	2			\$
				\$
				\$
				\$
				\$
		Page Subtotal		\$ 22,975.60
	(Grand Total Complete on last page of Schedule)		\$ 22,975.60
Page / of /		\$1		Forward to #3 Summary Page



LEGAL DEFENSE FUND COVER PAGE Received via disclosure@michigan.gov 08/16/2022

Report must be legible, typed or printed in ink and signed by the Treasurer/Designated Record Keeper

and Official.	
1a. Legal Defense Fund I.D. Number: 1b. Legal Defense Fund Name: Legal Defense Fund for Scio Township Clerk Jessica Flintoft 1c. Legal Defense Fund Address: 865 North Wagner Road Ann Arbor, MI 48103	2a. Official's Full Name: Jessica Madeleine Flintoft 2b. Official's Office: Scio Township Clerk
1d. Legal Defense Fund Phone:	
3a. Treasurer's Full Name: David S. Read 3b. Treasurer's Residential Address: 713 Merlin Way Dexter, MI 48130	3c. Treasurer's Business Address: 713 Merlin Way Dexter, MI 48130
	3d. Treasurer's Phone Number(s): 7346577569
4a. Quarterly Transaction Report Covering: January 1 - March 31; Due: April 25th April 1 - June 30; Due: July 25 th July 1 - September 30; Due: October 25th October 1 - December 31; Due: January 25th 4b. Amendment to Transaction Report: also mark (4a) to indicate which Report is being amended)	5. Dissolution of Legal Defense Fund: Effective Date of Dissolution / By checking this item, I\We certify that the Legal Defense Fund has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Itemized Expenditure Schedule 2 and the Summary Page.
6. Verification: I\We certify that all reasonable diligence the best of my\our knowledge and belief the contents an Official's Signature and Date: Treasurer's/Designated Record Keeper's Signature and	WA 7,13,2022



LEGAL DEFENSE FUND SUMMARY PAGE

FOR OFFICIAL USE ONLY

	Column I This Period	Column II Cumulative Calendar Year
. Contributions	1a. \$ 20000.00	1b. \$ 20000.00
2. In-Kind Contributions	_{2a. \$} 0.00	2b. \$ 0.00
3. TOTAL CONTRIBUTIONS	3a. \$ 20000.00	3b. \$ 20000.00
4. Itemized Expenditures	4a. \$ 0.00	
5. Unitemized Expenditures (less than \$50.01 each - no Schedule)	5a. \$	
6. TOTAL EXPENDITURES	6a. \$ 0.00	6b. \$ 0.00
ВА	LANCE STATEMENT	
Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	7. \$ 0.00	
B. Amount received during reporting period (Item 1a.)	8. \$ 20000.00	
9. SUBTOTAL Add lines 7 and 8	9. \$ 20000.00	
Amount expended during reporting period (Item 6a.)	10.\$ 0.00	
11. ENDING BALANCE	11. \$ 20000.00	★ H
(Subtract line 10 from line 9)	* The ending balance must always b	be a positive number.



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

Legal Defense Fund for Scio Township Clerk Jessica Flintoft

Enter contributor's name and address.		5. Amount	6. Amount (In-Kind)	7. Cumulative
2. Name and Address: David and Alisande Read 713 Merlin Way Dexter, MI 48130 4. If over \$100.00 cumulative, please provide: Occupation:		\$ 2,000.00	\$ 0.00	\$ <u>2,</u> 000.00
Employer: N/A Place of Busine				
2. Name and Address: 3. Date Kathleen Brant and Maureen Richards 2534 Roseland Drive Ann Arbor, MI 48103		\$ 6,000.00	\$ 0.00	\$6,000.00
4. If over \$100.00 cumulative, please provide: Occupation: Employer: N/A Place of Busine				
	of Receipt: 03/25/2022	\$ 10,000.00	\$ 0.00	\$10,000.00
Employer: self-employed Place of Busine				*
 Name and Address: Peter Davis 107 Aprill Drive, Suite 3 Ann Arbor, MI 48103 If over \$100.00 cumulative, please provide: Occupation: 	of Receipt: 03/25/2022 Attorney	\$ <u>500.00</u>	\$ <u>0.00</u>	\$500.00
Employer: Davis Law Firm, PC Place of Busine	ess: Scio Township			
2. Name and Address: William and Patricia Stein 1413 South Zeeb Road Ann Arbor, MI 48103 4. If over \$100.00 cumulative, please provide: Occupation: Employer: N/A Place of Busine	EAST TO THE PROPERTY OF THE PR	\$ <u>1,000.00</u>	\$ <u>0.00</u>	\$ <u>1,000.00</u>
Jim Knol 1778 Snowberry Ridge Road Ann Arbor, MI 48103 4. If over \$100.00 cumulative, please provide: Occupation:	physician ess: Ann Arbor	\$ 400.00	\$ 0.00	\$ 400.00
	Page Subtotal: Grand Total:	\$ 19,900.00	\$ 0.00	\$ 19,900.00
(Complete	on last page of Schedule)	\$	\$	\$



ITEMIZED CONTRIBUTIONS SCHEDULE 1

LEGAL DEFENSE FUND

1. Legal Defense Fund I.D. Number and Name:

Legal Defense Fund for Scio Township Clerk Jessica Flintoft

Enter contributor's name and address.	5. Amount	6. Amount (In-Kind)	7. Cumulative
2. Name and Address: 3. Date of Receipt: 03/25/2022		S.	
Peter C. Flintoft			
119 S. Main Street	\$ 100.00	\$ 0.00	\$100.00
Chelsea, MI 48118		- 11 10 10 10 10 10 10 10 10 10 10 10 10	
4. If over \$100.00 cumulative, please provide: Occupation: Attorney	1 2		
Employer: Keusch Flintoft & Fink, PC Place of Business: Chelsea			
2. Name and Address: 3. Date of Receipt:			
	\$	\$	\$
4. If over \$100.00 cumulative, please provide: Occupation:		-	
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt:			
	\$	\$	\$
4. If over \$100.00 cumulative, please provide: Occupation:	ļ ———		<u> </u>
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt:			
			2
			-3
	\$	\$	\$
4. If over \$100.00 cumulative, please provide: Occupation:			-
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt:			
	\$	\$	\$
4. If over \$100.00 cumulative, please provide: Occupation:			
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt:			
· · · · · · · · · · · · · · · · · · ·		:	
	\$	\$	\$
4. If over \$100.00 cumulative, please provide: Occupation:	8		
Employer: Place of Business:			
Page Subtotal:	\$ 100.00	\$ 0.00	\$ 100.00
Grand Total: (Complete on last page of Schedule		\$ 0.00	\$ 20,000.00
	Forward to #1 Summary	Forward to	
Page 2 of 2	Page Page	#2 Summary Page	



ORIGINAL OR AMENDED

STATEMENT OF ORGANIZATION FORM FOR LEGAL DEFENSE FUND RECEIVED / FILED
1. Legal Defense Fund ID #:
2. Type of Filing: Soriginal Filing Amendment: Items: Eff. Date: 2022 MAY -6 PM 3: 37
3. Full Name of Legal Defense Fund: (Must include Official's first and last name and the words Legal Defense Fund") SEAL Legal Defense Fund for Scio Township Clerk Jessica Flintoft 4. Public Official Full Name (Last, First, M.I.): Flintoft, Jessica, M.
5a. Office (Check one): Governor State Senator MSU Trustee Circuit Court XLocal or Other please Governor State Rep. WSU Gov. District Court specify: Sec. of State State Bd. of Ed. Supreme Court Probate Court Township Clerk Attorney General UofM Reg. Appeals Court Municipal Court
5b. District/Circuit # or Jurisdiction: Scio Township
6. A description of the criminal, civil or administrative action at issue: Jessica Flintoft as Scio Township Clerk v. Scio Township Board of Trustees, Washtenaw County Circuit Court, 22-000414-CZ, filing for Declaratory Judgment and Injunctive Relief from Board's interference with Clerk carrying out her statutory duties.
7. Date of Initial Contribution/Expenditure: 03 / 28 / 2022
8a. Complete Mailing Address (May be PO Box): 8b. Complete Street Address (May not be PO Box):
P.O. Box 2273 Ann Arbor, MI 48106 865 North Wagner Road Ann Arbor, MI 48103
8c. Legal Defense Fund Phone #: <u>(510) 384-9652</u>
8d. Legal Defense Fund Fax #: N/A
8e. Legal Defense Fund E-mail Address: jessicaflintoft@gmail.com
8f. Legal Defense Fund Web Address: N/A
9a. Treasurer Name and Complete Street Address: David Read
713 Merlin Way Dexter, MI 48130
9b.Treasurer Phone #: (734) 657-7569
9c. Treasurer E-mail Address: davidread@bitsoflight.com
10. Designated Recordkeeper Name:
11. Name and Address of Depository or Intended Depository of Legal Defense Fund funds. (Michigan Bank, Credit Union or Savings & Loan Association)
Bank of Ann Arbor 2204 West Stadium Boulevard Ann Arbor, MI 48103
12. 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.
Public Official Signature: 5 / 2 / 22 Date
Current Treasurer Signature: <u>January & Class</u> Date



LEGAL DEFENSE FUND COVER PAGE

RECEIVED/FILED MICHIGARI DUPT OF STATE

2022 HAY -6 PM 3: 38

ELECTIONS/GREAT SEAL

Report must be legible, typed or printed in ink and signed by the Treasurer/Designated Record Keeper and Official

and Official.				
1a. Legal Defense Fund I.D. Number:	2a. Official's Full Name: Jessica Madeleine Flintoft			
1b. Legal Defense Fund Name: Legal Defense Fund for Scio Township Clerk Jessica Flintoft 1c. Legal Defense Fund Address: 865 North Wagner Road Ann Arbor, MI 48103	2b. Official's Office: Clerk of Scio Township			
1d. Legal Defense Fund Phone:				
3a. Treasurer's Full Name: David Read 3b. Treasurer's Residential Address: 713 Merlin Way Dexter, MI 48103	3c. Treasurer's Business Address: 713 Merlin Way Dexter, MI 48103			
·	3d. Treasurer's Phone Number(s): (734) 657-7569			
4a. Quarterly Transaction Report Covering:	Dissolution of Legal Defense Fund: Effective Date of Dissolution			
April 1 – June 30; Due: July 25 th	, ,			
☐ July 1 – September 30; Due: October 25th				
October 1 – December 31; Due: January 25th	By checking this item, I/We certify that the Legal Defense Fund has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Itemized Expenditure Schedule 2 and the Summary Page.			
4b. Amendment to Transaction Report: also mark (4a) to indicate which Report is being amended)				
6. 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.				
Official's Signature and Date:	5,2,22			
Treasurer's/Designated Record Keeper's Signature and	Date: January VKK J. L. LL			



LEGAL DEFENSE FUND SUMMARY PAGE

FOR OFFICIAL USE ONLY

	Column I This Period	Column II Cumulative Calendar Year
1. Contributions	_{1a. \$} 20,000.00	_{1b. \$} 20,000.00
2. In-Kind Contributions	_{2a. \$} 0.00	
3. TOTAL CONTRIBUTIONS	_{3a. \$} 20,000.00	_{3b. \$} 20,000.00
4. Itemized Expenditures	_{4a. \$} 1,804.00	
5. Unitemized Expenditures (less than \$50.01 each - no Schedule)	_{5a. \$} 0.00	
6. TOTAL EXPENDITURES	_{6a. \$} 1,804.00	_{6b. \$} 1,804.00
BA	LANCE STATEMENT	
Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	7. \$ 0.00	_
Amount received during reporting period (Item 1a.)	8. \$ 20,000.00	_
9. SUBTOTAL Add lines 7 and 8	9. \$ 20,000.00	_
Amount expended during reporting period (Item 6a.)	10.\$ 1,804.00	_
11. ENDING BALANCE (Subtract line 10 from line 9)	18,196.00	*
	* The ending balance must always be a	a positive number.



ITEMIZED CONTRIBUTIONS SCHEDULE 1 LEGAL DEFENSE FUND

Legal Defense Fund I.D. Number and Name:

Legal Defense Fund for Scio Township Clerk Jessica Flintoft

		* * * * * * * * * * * * * * * * * * * *	
Enter contributor's name and address.	5. Amount	6. Amount (In-Kind)	7. Cumulative
2. Name and Address: 3. Date of Receipt: 03/25/2022			
Peter C. Flintoft			
119 S. Main Street	\$ <u>100.00</u>	\$ <u>0.00</u>	\$ <u>100.00</u>
Chelsea, MI 48118 4. If over \$100.00 cumulative, please provide: Occupation: Attorney			
Employer: Keusch Flintoft & Fink, PC Place of Business: Chelsea			
2. Name and Address: 3. Date of Receipt:			
	\$	\$	\$
4. If over \$100.00 cumulative, please provide: Occupation:			
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt:			
2. Name and Address.			
		.	_
	\$	\$ <u></u>	\$
4. If over \$100.00 cumulative, please provide: Occupation:			
Employer: Place of Business:			
2. Name and Address: 3. Date of Receipt:			
	φ.	œ.	φ.
	a	Φ	ф <u></u>
4. If over \$100.00 cumulative, please provide: Occupation:			
Employer: Place of Business:			
Name and Address: 3. Date of Receipt:			
	\$	\$	\$
4. If over \$100.00 cumulative, please provide: Occupation:			
Employer: Place of Business: 2. Name and Address: 3. Date of Receipt:			
	\$	\$	\$
	\ \	Ψ	Ψ
4. If over \$100.00 cumulative, please provide: Occupation:			
Employer: Place of Business:	. 400.00		+ 400 00
Page Subtotal:	\$ 100.00	\$ 0.00	\$ <u>100.00</u>
Grand Total: (Complete on last page of Schedule)	\$ 20,000.00	\$ 0.00	\$ 20,000.00
Local Manner.	Forward to	Forward to	,
Page 2 of 2	#1 Summary Page	#2 Summary Page	