



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

November 13, 2013

Allen Telgenhof
301 State Street
Charlevoix, Michigan 49720

Dear Mr. Telgenhof:

The Department of State (Department) received a formal complaint filed against you by Robert Taylor, alleging that you violated the Michigan Campaign Finance Act (MCFA or Act), 1976 PA 388, MCL 169.201 *et seq.* The investigation and resolution of this complaint is governed by section 15 of the Act and the corresponding administrative rules, R 169.51 *et seq.* A copy of the complaint and supporting documentation is enclosed with this letter.

The MCFA requires a candidate or treasurer of a committee to file complete and accurate finance statements and reports. MCL 169.233. A person who knowingly files an incomplete or inaccurate statement may be subject to a civil fine of up to \$1,000.00. MCL 169.233(10). Additionally, a candidate, treasurer, or record-keeper who "knowingly omits or underreports individual contributions or individual expenditures . . . is subject to a civil fine of not more than \$1,000.00 or the amount of the contributions and expenditures omitted or underreported, whichever is greater." MCL 169.233(11).

The Act further requires the reporting of a late contribution within 48 hours of its receipt. MCL 169.232(1). The failure to timely file a late contribution report may result in late filing fees. MCL 169.232(4).

Mr. Taylor alleges that you failed to list required business addresses or cumulative totals for some contributors, failed to disclose certain contributions and expenditures related to fund raising events, and failed to file certain late contribution reports.

In support of his complaint, Mr. Taylor provided your candidate committee's statement of organization, your 2012 pre-election primary campaign statement, your 2012 post-election primary campaign statement, your 2012 pre-election general campaign statement, and your 2012 post-election campaign statement.

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

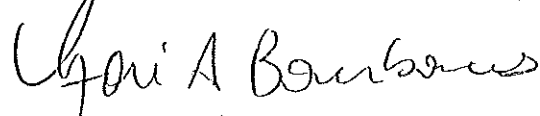
If you wish to file a written response to this complaint, you are required to do so within 15 business days of the date of this letter. Your response may include any written statement or

additional documentary evidence you wish to submit. All materials must be sent to the Department of State, Bureau of Elections, Richard H. Austin Building, 1st Floor, 430 West Allegan Street, Lansing, Michigan 48918. If you fail to submit a response, the Department will render a decision based on the evidence furnished by the complainant.

A copy of your reply will be provided to Mr. Taylor, who will have an opportunity to submit a rebuttal statement to the Department. After reviewing all of the statements and materials provided by the parties, the Department will determine whether "there may be reason to believe that a violation of [the MCFA] has occurred [.]" MCL 169.215(10). Note that the Department's enforcement powers include the possibility of entering a conciliation agreement or conducting an administrative hearing.

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

Sincerely,

A handwritten signature in black ink, appearing to read "Lori A. Bourbonais". The signature is fluid and cursive, with the first name "Lori" being more prominent.

Lori A. Bourbonais
Bureau of Elections
Michigan Department of State

c: Robert Taylor

**Michigan Department of State
Campaign Finance Complaint Form**

Reset Form

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

Please print or type all information.

I allege that the MCFA was violated as follows:

Section 1. Complainant		
Your Name Robert Taylor	Daytime Telephone Number 231-582-7460	
Mailing Address 2594 Eagle Island Road		
City Boyne City	State MI	Zip 49712

Section 2. Alleged Violator		
Name Allen Telgenhof		
Mailing Address 301 State Street		
City Charlevoix	State MI	Zip 49720

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

Section(s) of the MCFA violated: **1) MCL 169.226(e); 2) MCL 169.226(1)(d); MCL 169.232**

Explain how those sections were violated:

- 1) Mr. Telgenhof did not list the business address or the cumulative total with addresses on some contributors.
- 2) Mr. Telgenhof held two fundraisers and did not submit any forms regarding fundraisers.
- 3) Mr. Telgenhof received three contributions during the late reporting period and did not file any late contribution reports.

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

Attached are a packet detailing each violation. Also included are Mr. Telgenhof's

Affidavit of Identity, Statement of Organization, Pre-Election Primary,

Statement, Post-Election Primary Statement, Pre-Election General Statement

and the Post-Election General Statement.

Section 4. Certification (Required)

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

X

Robert H. Taylor
Signature of Complainant

10/31/2013
Date

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

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

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

X

Attached are a packet detailing each violation. Also included are Mr. Taylor's

Signature of Complainant

Date

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

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

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

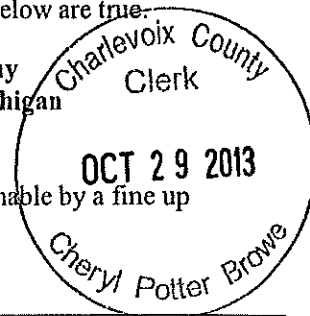
-- CAMPAIGN FINANCE COMPLIANCE AFFIDAVIT -- POST ELECTION --

- This form must be filed by any candidate subject to Michigan's Campaign Finance Act who is elected to a state, county, city, township, village or school office. The form must be filed *before* the candidate assumes office. Exceptions: an elected candidate whose Candidate Committee did not receive or expend more than \$1,000.00 during the election cycle is *not* required to submit this form. In addition, this form does not have to be filed by an individual elected to a U.S. Senate, U.S. House or precinct delegate position.
- An elected candidate who is required to file this Campaign Finance Compliance Affidavit must submit this form to the filing official designated to receive the elected candidate's campaign finance disclosure filings. (The attestation stipulated below may not be altered in any way).
- An elected candidate subject to the Campaign Finance Compliance Affidavit filing requirement who fails to submit this form prior to assuming office is guilty of a misdemeanor.
- If you need information on your current compliance status under the Michigan Campaign Finance Act, contact the Michigan Department of State's Bureau of Elections and/or the appropriate county clerks as necessary.

By signing this affidavit, I swear (or affirm) that the facts contained in the statement set forth below are true.

At this date, all statements, reports, late filing fees, and fines due from me or any Candidate Committee organized to support my election to office under the Michigan Campaign Finance Act, PA 388 of 1976, have been filed or paid.

I further acknowledge that making a false statement in this affidavit is perjury -- a felony punishable by a fine up to \$1,000.00 or imprisonment for up to 5 years, or both. (MCL 168.848, 933 and 936)



Printed Name of Candidate: Frieda A. Telgenhof

Committee ID Number(s): 22144

Telephone Number or Email: 231-373-6353

Office You Will Assume: Prosecutor District/Circuit #: 90th Dist./33rd Circ.

Signature of Candidate: [Signature]
(signature must be witnessed by Notary Public)

Michigan Notary Public, County of: Charlevoix Acting in the County of: Charlevoix

My commission expires: 5/22/2015

Subscribed and sworn to (or affirmed) before me on this date: October 29, 2013

by: Allen R. Telgenhof (Name of Elected Official).

Mary P. Shepard (Name of Notary Public) [Signature] (Signature of Notary Public)

NUMBER 1

CUMULATIVE TOTALS, RESIDENTIAL ADDRESSES, BUSINESS
ADDRESSES

MCL 169.226(e) and others

INCOMPLETE-INNACURATE FILINGS

RECORDING AND REPORTING RECEIPTS (Wording taken from SOS Committee Manual)

The committee treasurer or designated record keeper must:

- Record and report all contributions received, regardless of amount, from individuals by the amount, date received, and the donor's name and address. If single or cumulative contributions received from the same individual total \$100.01 during a calendar year or more, the donor's occupation, employer and principal place of business (address) must also be recorded and reported.

MCL 169.226(e)

(e) The full name of each individual from whom contributions are received during the period covered by the campaign statement, together with the individual's street address, the amount contributed, the date on which each contribution was received, and the cumulative amount contributed by that individual. The occupation, employer, and principal place of business shall be stated if the individual's cumulative contributions are more than \$100.00.

Mr. Telgenhof's campaign finance reports are attached.

- Received a contribution from Thomas Veryser on 4-30-12 [Pre-Election Primary page 2 of 17] and did not designate a business address. A dentist does not work out of his house.
- Received a contribution from David Campbell on 5-30-12 [Pre-Election Primary page 5 of 17] and did not designate a business address (if the address listed is the business address, then the personal address is incorrect)
- Received a contribution from Vicki Voisin on 6-22-12 [Pre-Election Primary page 11 of 17] for \$100 and a contribution from Vicki Voisin for \$100 on 7-25-12. [Post-Primary page 1 of 2]. The cumulative total was not listed which is more than \$100 and it requires the name, address, occupation, employer, principal place of business- none of this information is provided. Ms. Voisin does not live at a P.O. Box and she doesn't live at a P.O. Box. Her residential address is 502 Michigan Avenue.
- Received a contribution from Steven Sawyer for \$100 on 7-9-12 [Pre-Election Primary page 14 of 17] and a contribution from Steven Sawyer on 7-25-12 [Post-Primary page 1 of 2] for \$100. The total contribution is over \$100 and there is no information provided.

KNOWLEDGE

Filings show that Mr. Telgenhof knew he had to include the business addresses if the contributor is self-employed.

Mr. Telgenhof did report people who are self-employed but still listed their business address

- 5-30-12- [Pre-Election page 5 of 17] Scott Boss- Self-employed but still listed his business address, yet he did not include this information on Tom Veryser [4-30-2012] and David Campbell [5-30-12] on the same statement.
- See also Kraag C. Lieberman- self-employed 6-13-12 [Pre-Election Primary page 8 of 17, and Barney Way [Pre-Election Primary page 11 of 17]

Mr. Telgenhof listed some cumulative totals, showing that he knew he had to list it and provide the business address-

- 6-11-12- Matthew Allen- cumulative total listed [Pre-Election Primary page 7 of 17]
- 6-5-12; 6-7-12- Allen Telgenhof- cumulative total listed [Pre-Election Primary page 10 of 17]
- 10-11-12- Allen Telgenhof – cumulative total listed [Pre-Election General page 1 of 1]
- 9-27-12- Don Malosky- cumulative total listed [Pre-Election General page 1 of 1]
- Yet did not list the cumulative totals or the required addresses on subsequent filings pertaining to Vicki Voisin and Steve Sawyer.

CUMULATIVE TOTALS

Wording taken from the instructions for Completing Candidate Committee Schedule 1A- Itemized Contributions

Item 7. CUMULATIVE FOR THE ELECTION CYCLE. Enter the cumulative amount of all contributions received from the contributor for the election cycle through the date of the contribution being reported. Also include the value of any in-kind contributions of goods or services through this date from the contributor when calculating the cumulative amount.

Mr. Telgenhof reported the following for his contributions on the statement April 20, 2012 – July 22, 2012. Itemized Contributions Schedule 1A

- | | | | |
|---|---------|-----------|---|
| - | 6-5-12 | \$ 500.00 | Direct- with a cumulation of \$1,000? |
| - | 6-7-12 | \$1000.00 | loan- with no cumulation? |
| - | 7-5-12 | \$ 500.00 | (changed from direct to loan) cumulation of \$2,500 |
| - | 7-13-12 | \$454.00 | Direct- cumulation of \$2,954.00 |

In-Kind Contributions Schedule 1-1K [Telgenhof] [Pre-Primary Primary Schedule 1-1k pg. 2,3]

- 4-25-12 \$132.34 Printing

-	4-25-12	\$194.98	Bumper Stickers
-	4-25-12	\$89.95	Printing

Total of \$417.38 was not included in Schedule 1A

In-Kind Contributions Schedule 1-1K [Snyder] [Pre-Primary Schedule 1-1K pg. 1,2]

-	4-24-12	\$72.10	Supplies for Open House- cumulative total 145.09?
-	4-24-12	\$4.24	Supplies for Open house- cumulative total 149.33?
			Vendor not listed
-	4-26-12	\$72.99	Groceries for Open House
-	4-27-12	\$67.00	Food for Open House

Total of \$216.33 not included in Schedule 1A

The dates where the cumulative totals are listed do not make sense.

In-Kind Contributions Schedule 1-1K [Wietzke] [Pre-Primary Schedule 1-1K pg 3]

-	4-26-12	\$100	Refreshments for open house- Vendor not listed
---	---------	-------	--

Total of \$100 not listed in Schedule 1A

In-Kind Contributions Schedule 1-1K [Judy Telgenhof] [Post-Election Primary Schedule 1-1K pg. 1 of 1]

-	total of \$116.07 listed
-	This amount was not listed in Schedule 1-A, nor was this amount listed in the cumulative totals for Ms. Telgenhof.

MCL 169.226 (1)(b)

(1) A campaign statement of a committee, other than a political party committee, required by this act shall contain all of the following information:

(b) Under the heading "receipts", the total amount of contributions received during the period covered by the campaign statement; under the heading "expenditures", the total amount of expenditures made during the period covered by the campaign statement; and the cumulative amount of those totals. Forgiveness of a loan shall not be included in the totals. Payment of a loan by a third party shall be recorded and reported as an in-kind contribution by the third party.

In-kind contributions or expenditures shall be listed at fair market value and shall be reported as both contributions and expenditures. A contribution or expenditure that is by other than completed and accepted payment, gift, or other transfer, that is clearly not legally enforceable, and that is expressly withdrawn or rejected and returned before a campaign statement closing date need not be included in the campaign statement and if included may, in a later or amended statement, be shown as a deduction, but the committee shall keep adequate records of each instance.

PENALTIES

MCL 169.233(10)

(10) If a candidate, treasurer, or other individual designated as responsible for a committee's record keeping, report preparation, or report filing knowingly files an incomplete or inaccurate statement or report required by this section, that individual is subject to a civil fine of not more than \$1,000.00.

If applicable-

MCL 169.242(3) and (5)

(3) A person shall not receive a contribution from a person other than a committee unless, for purposes of the recipient person's record keeping and reporting requirements, the contribution is accompanied by the name and address of each person who contributed to the total amount of the contribution and the name, address, occupation, employer, and principal place of business of each person who contributed more than \$100.00 to the total amount of the contribution.

(5) A person who knowingly violates this section is guilty of a misdemeanor punishable, if the person is an individual, by a fine of not more than \$1,000.00 or imprisonment for not more than 90 days, or both, or, if the person is other than an individual, by a fine of not more than \$10,000.00.

NUMBER 2

FUNDRAISERS

MCL 169.226(1)(d)

MISSING SCHEDULES

FUNDRAISERS

Wording taken from SOS website:

FUND RAISERS

“Fund raising event” means an event such as a dinner, reception, auction or similar event where contributions are solicited or received by purchase of a ticket, payment of an attendance fee, making a donation or purchase of goods or services. All committees must ensure that appropriate records are kept at fund raising events and that receipts, expenditures and other required information are reported by the committee.

REPORTING A FUND RAISER

All contributions and expenditures for a fund raiser must be reported in detail on the Campaign Statement that covers the period during which the fund raiser is held. This means that all contributions and expenditures associated with the fund raiser must be reported including the name, address, date, amount and other required information. In addition, a committee, other than a Political Party Committee, **must also complete a Fund Raiser Schedule** that summarizes the event. The Fund Raiser Schedule is filed with the Campaign Statement that includes the date the Fund Raiser was held. Committees using the MERTS software or other approved software must ensure that the data is entered to provide the required information. Committees that maintain a Reporting Waiver are not required to file a Fund Raiser Schedule since no Campaign Statement is owed.

MCL 169.207 FUNDRAISER DEFINED

(4) “Fund raising event” means an event such as a dinner, reception, testimonial, rally, auction, or similar affair through which contributions are solicited or received by purchase of a ticket, payment of an attendance fee, making a donation, or purchase of goods or services.

MCL 169.226(1)(d)

(d) The following information regarding each fund-raising event shall be included in the report:

- (i) The type of event, date held, address and name, if any, of the place where the activity was held, and approximate number of individuals participating or in attendance.
- (ii) The total amount of all contributions.
- (iii) The gross receipts of the fund-raising event.
- (iv) The expenditures incident to the event.

Mr. Telgenhof had two fundraisers: the first fundraiser was noticed by the following mass e-mail to local attorneys, the second was posted on a news/forum for Beaver Island.

1)

From: Allen Telgenhof [mailto:atelgenhof@charlevoixlaw.com]
Sent: Monday, April 23, 2012 11:54 AM
To: banlaw@utmi.net; sbarney@plunkettcooney.com; dbarron@barronengstrom.com; beattylaw@sbcglobal.net; tcooper@plunkettcooney.com; deegan65@charter.net; jdeegan@plunkettcooney.com; Michael Corcoran; ldinon@plunkettcooney.com; efengstrom@barronengstrom.com; cgano@plunkettcooney.com; hgolski@upnorthlaw.com; kevingklevern@sbcglobal.net; Mary Beth Kur; jmurray@plunkettcooney.com; golsen@plunkettcooney.com; snabes@jbslegal.com; jdwursterplc@sbcglobal.net; Tom Schraw; Timothy D. Arner; rdinon@plunkettcooney.com; cglass@freeway.net; rjoseph@freeway.net; travis@lawofficeofdanharris.com; dan@lawofficeofdanharris.com; bryanklawuhn@hotmail.com; jschafer@molosky.com; fschmoll@rmsmlaw.net; joelschraw@schraw.com; northernmichiganlawyer@gmail.com; spencerlawfirm@sbcglobal.net; kbzahner@yahoo.com
Subject: campaign kickoff

Fellow attorneys,

Hopefully by now you have heard that I am a candidate for Charlevoix County Prosecuting Attorney. I know that it is difficult for attorneys to take a position, and I can certainly appreciate that. I did want you to know, however, that I would appreciate any support you could give. We are hosting a meet and greet here at my office, **101 M-66 North, Charlevoix, on Friday at 7:30 am** if you can attend. Free coffee, juice and bagels and good company. Hope to see you there!

In Kind contributions: [Pre-Election Primary – Schedule 1-1K pages 1-3]

▪	Valerie Snyder-	\$72.99	groceries for open house
▪	Valerie Snyder-	\$72.10	supplies for open house
▪	Valerie Snyder-	\$4.24	supplies for open house
▪	Valerie Snyder-	\$67.00	food for open house
▪	Kurt Wietzke-	\$100.00	Refreshments for open house

Total for open house \$316.33

Mr. Telgenhof posted pictures of the persons who attended this fundraiser on his website/Facebook page.

2) Beaver Island

June 14, 2012- Beaver Island Forum

Posted: Thu May 31, 2012 2:15 pm Post subject: Prosecutor candidate
Allen Telgenhof hosting meet and greet

Allen Telgenhof, candidate for Charlevoix County Prosecuting Attorney, will be hosting a meet and greet on Thursday, June 14, at the Peaine Township Hall from 6:30 pm to 8:00 pm.

Coffee, water and snacks will be served. Hope to see you there!

Pre-election Primary – Schedule 1B- Expenditure 1B		
▪	Expenditure- McDonough's Market (food)	\$105
▪	Fresh Air Aviation- Travel to BI	\$407
	Total	\$512.00

- ****No cost included for the Hall Rental-**
- if it was an In-kind contribution, then the Fair Market Value must be noted

FUNDRAISER SCHEDULE 1F-

- Not used in either fundraiser
- Language from the Fundraiser Schedule 1F states
 - The committee is required to file a separate Fund-Raiser Schedule for each fundraising event held during the period covered by the Campaign Statement
 - Receipts and expenditures listed on a Fund Raiser Schedule **must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-1K), Itemized Expenditures Schedule (1B) and the Summary Page**

Wording taken from SOS website-

CANDIDATE COMMITTEE - CAMPAIGN STATEMENTS

A committee discloses its campaign finance activity on Campaign Statements. A Campaign Statement consists of a cover page, a summary page and a series of schedules that itemize the committee's contributions, other receipts, expenditures, debts and fund raisers held by the committee. A fund raiser schedule summarizes each fund raiser held by the committee. Campaign Statement forms and instructions can be obtained from the Department of State's Bureau of Elections in Lansing, any county clerk or the Secretary of State's website. Certain committees are required to file their Campaign Statements electronically with the Bureau of Elections.

PENALTY

MCL 169.233(10,11)

(10) If a candidate, treasurer, or other individual designated as responsible for a committee's record keeping, report preparation, or report filing knowingly files an incomplete or inaccurate statement or report required by this section, that individual is subject to a civil fine of not more than \$1,000.00.

(11) If a candidate, treasurer, or other individual designated as responsible for a committee's record keeping, report preparation, or report filing knowingly omits or underreports individual contributions or individual expenditures required to be disclosed by this act, that individual is subject to a civil fine of not more than \$1,000.00 or the amount of the contributions and expenditures omitted or underreported, whichever is greater.

MCL 169.233(1)

(1) A committee, other than an independent committee or a political committee required to file with the secretary of state, supporting or opposing a candidate **shall file complete campaign statements** as required by this act and the rules promulgated under this act.

- If a "Statement" consists of a cover page, summary page and all appropriate schedules and the person does not file the schedules, is the "Statement" considered filed?
- It is my opinion that the Pre-Election Primary statement is so grossly lacking that the "Statement" as defined by the SOS website is not filed.
 - Cumulative totals not listed, addresses not listed, business addresses not listed, occupations not listed, no Fundraiser Schedules filed.

NUMBER 3

LATE CONTRIBUTION REPORTS

MCL 169.232

LATE CONTRIBUTION REPORTS

Close of books August 7, 2012 [See attached Schedule taken from the SOS website for 2012]

Pre-Election	Close of Books	July 22	Due	July 27
Late Contribution Reports		July 23-August 4	Due 48 hours after Receipt	

Telgenhof Statement 7-23-8-27 2012

-	Michelle Allen	7-25-12	\$500 [Post-Election Primary pg 1 of 2]
-	Richard Georgi	7-25-12	\$500 [Post-Election Primary pg 1 of 2]
-	Debra Woodward	7-25-12	\$500 [Post-Election Primary pg 2 of 2]

169.232 Report of late contributions; late filing fee; subsection (5) retroactive to January 1, 2010; "late contribution" defined.

Sec. 32.

(1) A committee, candidate, treasurer, or other individual designated as responsible for the committee's record keeping, record preparation, or report filing shall report a late contribution by filing with the filing officer within 48 hours after its receipt the full name, street address, occupation, employer, and principal place of business of the contributor.

(2) Filing of a report of a late contribution under subsection (1) may be by any written means of communication and need not contain an original signature.

(3) A late contribution shall be reported on subsequent campaign statements without regard to reports filed under subsection (1). If a campaign statement has not been filed, a late contribution may be reported, if practicable, in the campaign statement and need not, therefore, be reported in a subsequent campaign statement.

(4) A committee, candidate, treasurer, or other individual designated as responsible for the committee's record keeping, report preparation, or report filing who fails to report a late contribution as required by subsection (1) shall pay a late filing fee, that shall not exceed the lesser of the following:

(a) The total amount of the contributions omitted from the late contribution reports.

(b) \$2,000.00 determined as follows:

(i) Twenty-five dollars for each business day the report remains unfiled.

(ii) An additional \$25.00 for each business day after the first 3 business days the report remains unfiled.

(iii) An additional \$50.00 for each business day after the first 10 business days the report remains unfiled.

(5) A committee, other than a candidate committee, is only required to file a report of a late contribution for an election during which the committee made expenditures for the purpose of influencing the nomination or election of a candidate or for the qualification, passage, or defeat of a ballot question after the closing date of the last campaign statement required to be filed before an election. This subsection is retroactive and takes effect January 1, 2010.

(6) This state by appropriation or a county shall reimburse or waive any late filing fee paid or assessed under subsection (4) or (5) between January 1, 2010 and the effective date of the amendatory act that added this subsection. This subsection only applies to committees that have filed all other campaign statements required under this act in a timely manner. This subsection does not apply to candidate committees.

(7) As used in this section, for contributions made before the effective date of the amendatory act that added subsection (6), "late contribution" means a contribution of \$200.00 or more received after the closing date of the last campaign statement required to be filed before an election. For contributions made on or after the effective date of the amendatory act that added subsection (6), **late contribution means, for a candidate committee, contributions from the same contributor with a cumulative total of \$500.00 or more received after the closing date of the last campaign statement required to be filed before an election.** For contributions made on or after the effective date of the amendatory act that added subsection (6), late contribution means, for a committee other than a candidate committee, contributions from the same contributor with a cumulative total of \$2,500.00 or more received after the closing date of the last campaign statement required to be filed before an election.

Wording taken from the SOS website:

LATE CONTRIBUTION REPORTS (48 Hour Reports)

Committees must report all "late contributions" received by the committee.

For a candidate committee, a late contribution is any single or cumulative contribution of \$500.00 or more received from the same individual between the day following the close of books of the last campaign statement required to be filed by the committee and the 3rd day before the date of any election in which the committee/candidate participates. All types of contributions that meet the definition must be reported. This includes contributions of money, loans, in-kind contributions of goods and/or services and contributions from the candidate himself or herself.

- Mr. Telgenhof did not file any Late Contribution Reports.
- Mr. Telgenhof is the candidate and treasurer.
- The fine is \$1,500.00.



**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: <u>7/23/12</u> to <u>8/27/12</u>	
1. Committee I.D. Number <u>22144</u>	4. Candidate Last Name <u>Telgenhof</u> First Name <u>Allen</u> M.I. <u>R</u>
2. Committee Name <u>Friends for Allen Telgenhof</u>	4a. Office Sought Including District # or Community Served (If applicable) <u>Charlevoix County Prosecuting Attorney</u>
5. Committee's Mailing Address <u>101 M-66 N. A.</u> <u>Charlevoix, MI 49720</u> Area Code and Phone <u>231-547-3400</u> <small>If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.</small>	4b. County of Residence <u>Charlevoix</u>
7. Treasurer's Business Address <u>Same as above</u> Area Code and Phone _____	6. Treasurer's Name & Residential Address <u>Allen Telgenhof</u> <u>12153 Cottage Lane</u> <u>Charlevoix MI 49720</u> Area Code & Phone <u>231-547-7388</u>
	8. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record keeper) <u>N/A</u> Area Code and Phone _____

SEP 05 2012

9. TYPE OF STATEMENT

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

Pre-Election or Post-Election Statement relates to:

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

Date of Election, Convention or Caucus

8/7/12

9c. ☐ Annual Statement (_____ Coverage Year)

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

9e. ☐ Dissolution of Candidate Committee

Effective Date of Dissolution _____

By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

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

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.

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

Current Treasurer or Designated Record keeper	<u>Allen Telgenhof</u>	Signature <u>[Signature]</u>	Date <u>9/4/12</u>
	Type or Print Name	Signature	
Candidate	<u>Allen Telgenhof</u>	Signature <u>[Signature]</u>	Date <u>9/4/12</u>
	Type or Print Name	Signature	



BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number 27144
 2. Committee Name Friends For Allen Telgenhof

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

6. Amount

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

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 7/25/12
 Name & Address:

Voisin, Vicki
P.O. Box 743
CHARLEVOIX, MI 49720

\$ 100.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7/25/12
 Name & Address:

Sawyer, Stephen
4922 Poplar Lane
Bozette City, MI 49712

\$ 100.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 7/25/12
 Name & Address:

Allen, Michelle
8966 Alden Meadows Dr
Alden, MI 49612

\$ 500.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation housewife Employer _____

Business Address _____

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

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 7/25/12
 Name & Address:

Georgi, Richard
14505 Park Ave
CHARLEVOIX, MI 49720

\$ 500.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation real estate dev. Employer self

Business Address 14505 Park Ave, Charlevoix MI 49720

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

Page Subtotal

1200.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 22144

2. Committee Name Friends For Allen Telgenhof

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

6. Amount

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

3. Contribution #1

PAC Receipt? ☐ YES

4. Date of Receipt 7/25/12

Name & Address:

Woodward, Debra
P.O. Box 569
Charlevoix, MI 49720

\$ 500.00

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation X-Ray Tech Employer CRIT

Business Address Lakeshore Dr. Chx, MI 49720

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

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt 7/25/12

Name & Address

Schneider, Jean
9259 Flagg Road
East Jordan, MI

\$ 20.00

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation --- Employer ---

Business Address ---

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

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt 7/24/12

Name & Address:

Molosky, Donald
8 Meadowgate Lane
Harbor Springs, MI 49740

\$ 250.00

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation Attorney Employer Self

Business Address 201 Harbor Potoskey Rd. Potoskey MI 49770

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

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt 8/3/12

Name & Address

Laura Dinon
427 Kalenezoo Ave
Potoskey MI 49770

\$ 100.00

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation Attorney Employer Plunkett & Cooney, P.C.

Business Address 303 Howard St., Potoskey MI 49770

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

Page Subtotal

870.00

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

2070.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 22144
2. Committee Name FRIENDS FOR ALLEN TELGENHOF

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 Name & Address: <u>Telgenhof, Judy</u> <u>12153 Cottage Lane</u> <u>Charlevoix, MI 49720</u> If over \$100.00 cumulative, please provide: Occupation: <u>Bank Teller</u> Employer Name & Business Address: <u>Northwestern Bank</u> <u>1425 Bridge St</u> <u>Charlevoix, MI 49720</u> <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others. <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>food for party</u> 5. Date Of Receipt: <u>8/7/12</u> 6. Vendor Name & Address: <u>Pizza Hut</u> <u>1303 Bridge St</u> <u>Charlevoix, MI</u>	\$ <u>21.20</u>	\$ <u>21.20</u>
Contribution #2 Name & Address: <u>Telgenhof, Judy</u> <u>12153 Cottage Lane</u> <u>Charlevoix, MI 49720</u> If over \$100.00 cumulative, please provide: Occupation: <u>Bank Teller</u> Employer Name & Address: <u>Northwestern Bank</u> <u>1425 Bridge St</u> <u>Charlevoix, MI 49720</u> <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>sandwiches for party</u> 5. Date Of Receipt: <u>8/7/12</u> 6. Vendor Name & Address: <u>Andy's Party Store</u> <u>205 W. Garfield</u> <u>Charlevoix, MI 49720</u>	\$ <u>74.09</u>	\$ <u>95.29</u>
Contribution #3 Name & Address: <u>Telgenhof, Judy</u> <u>12153 Cottage Lane</u> <u>Charlevoix, MI 49720</u> If over \$100.00 cumulative, please provide: Occupation: <u>Bank Teller</u> Employer Name & Address: <u>Northwestern Bank</u> <u>12153 Cottage Lane</u> <u>Charlevoix, MI 49720</u> <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>soda, brownies + napkins for party</u> 5. Date Of Receipt: <u>7/26 + 8/4</u> 6. Vendor Name & Address: <u>Meijer</u> <u>1201 Lear Rd</u> <u>Petoskey, MI 49770</u>	\$ <u>20.78</u> \$ 20.78	\$ <u>116.07</u>

Page Subtotal 116.07

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

116.07

Enter this total
on line 6 of Summary
Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 22144
2. Committee Name Friends for Allen Telgenhof

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Practical Political Consulting</u> Address <u>220 Albert</u> <u>East Lansing, MI 48823</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>polling</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/23/12</u> Date	<u>\$ 600.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>Allen Telgenhof</u> Address <u>12153 Cottage Lane</u> <u>Charlevoix MI 49720</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>loan repayment</u> <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/30/12</u> Date	<u>\$ 500.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>Village Graphics</u> Address <u>111 Antrim St.</u> <u>Charlevoix MI 49720</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/30/12</u> Date	<u>\$ 217.30</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>Northwest Michigan Review</u> Address <u>319 State St</u> <u>Peterborough MI 49770</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/2/12</u> Date	<u>\$ 474.57</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>Hotcards.com</u> Address <u>1600 E. 23rd St.</u> <u>Cleveland, OH 44114</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>printing & mailing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/6/12</u> Date	<u>\$ 1204.46</u> Click Here for Memo Itemization Type

Subtotal this page 2996.33

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

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 22144
2. Committee Name Friends of Allan Telgenhof

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Allan Telgenhof</u> Address <u>12153 Cottage Lane</u> <u>Charlevoix MI 49720</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>loan repayment</u> <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/10/12</u> Date	<u>\$ 70.00</u>
Expenditure #2 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #3 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #4 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page .

70.00

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

3066.33

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 22194
2. Committee Name Friends for Alla Telgenhof

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Alla Telgenhof</u> <u>12153 Cottage Lane</u> <u>Charlevoix MI 49720</u>	4. Type: <u>personal loan</u> 5. Date Debt Was Incurred: <u>6/7/12</u> 6. Original Amount of Debt: <u>\$ 1000.00</u>	<u>6/11/12 \$ 500</u> <u>7/30/12 \$ 500</u> \$ \$ \$	\$ <u>1000.00</u>	\$ <u>0.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Kara Campbell</u> <u>307 Crain St.</u> <u>Charlevoix MI 49720</u>	4. Type: <u>personal loan</u> 5. Date Debt Was Incurred: <u>6/29/12</u> 6. Original Amount of Debt: <u>\$ 500.00</u>	\$ \$ \$ \$ \$	\$ <u>0</u>	\$ <u>500.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Alla Telgenhof</u> <u>12153 Cottage Lane</u> <u>Charlevoix MI 49720</u>	4. Type: <u>personal loan</u> 5. Date Debt Was Incurred: <u>7/5/12</u> 6. Original Amount of Debt: <u>\$ 500.00</u>	<u>8/10/12 \$ 70.00</u> \$ \$ \$ \$	\$ <u>70.00</u>	\$ <u>430.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

930.00

Grand Total of all Schedules 1E

930.00

(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 22144
2. Committee Name Friends for Allen Teegenhof

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS

Column I
This Period

Column II
Cumulative this election cycle

3. Contributions

a. Itemized (Schedule 1A - Column 6)

(3a.) \$ 2070.00

b. Unitemized (less than \$20.01 each - no Schedule)

(3b.) \$ NOT APPLICABLE

c. Subtotal of "Contributions"

(3c.) \$ 2070.00

(18.) \$ 16,643.00

4. Other Receipts (Schedule 1A -1, Column 6)

(4.) \$ 0.00

(19.) \$ 0.00

5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS
(Add Line 3c + Line 4)

(5.) \$ 2070.00

(20.) \$ 16,643.00

IN-KIND CONTRIBUTIONS & EXPENDITURES

6. In-Kind Contributions (Schedule 1-IK, Column 7)

(6.) \$ 116.07

(21.) \$ 849.78

7. In-Kind Expenditures (Schedule 1B-IK, Column 6)

(7.) \$ 0.00

(22.) \$ 0.00

EXPENDITURES

8. Expenditures

a. Itemized (Schedule 1B, Column 6)

(8a.) \$ 3066.33

b. Itemized Get-Out-the-Vote (Schedule 1B-G)

(8b.) \$ 0.00

c. Unitemized (less than \$50.01 each - no Schedule)

(8c.) \$ 0.00

9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)

(9.) \$ 3066.33

(23.) \$ 16,543.84

**INCIDENTAL EXPENSE DISBURSEMENTS
(Officeholders Only)**

10. Disbursements

a. Itemized (Schedule 1C, Column 6)

(10a.) \$ 0.00

b. Unitemized (less than \$50.01 each - no Schedule)

(10b.) \$ 0.00

11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS
(Add Line 10a + Line 10b)

(11.) \$ 0.00

(24.) \$ 0.00

DEBTS AND OBLIGATIONS

12. Debts and Obligations

a. Owed by the Committee (Schedule 1E)

(12a.) \$ 930.00

b. Owed to the Committee (Schedule 1E)

(12b.) \$ 0.00

BALANCE STATEMENT

13. Ending Balance of last report filed
(Enter zero if no previous reports have been filed.)

(13.) \$ 1,095.49

14. Amount received during reporting period
(Line 5, Total Contributions & Other Receipts)

(14.) + \$ 2,070.00

15. SUBTOTAL Add lines 13 and 14

(15.) = \$ 3,165.49

16. Amount expended during reporting period
(Add lines 9 and 11)

(16.) - \$ 3,066.33

17. ENDING BALANCE

(Subtract line 16 from line 15)

(17.) \$ 99.16



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE
COVER PAGE

FOR OFFICIAL USE ONLY

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

3. This Statement covers From:

8/28/12 to 10/21/12

1. Committee I.D. Number

22144

4. Candidate Last Name

First Name

M.I.

Telgenhof

Allen

R

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

Charlevoix County Prosecuting Attorney

4b. County of Residence

2. Committee Name

Friends for Allen Telgenhof

5. Committee's Mailing Address

101 M-66 North
Charlevoix, MI 49720

6. Treasurer's Name & Residential Address

Allen Telgenhof
12153 Cottage Lane
Charlevoix, MI 49720

Area Code and Phone 231-547-3420

If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

Area Code & Phone 231-547-7388

7. Treasurer's Business Address

Same as above

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

N/A

Area Code and Phone

Area Code and Phone

9. TYPE OF STATEMENT

9a. ☒ Pre-Election

OR

9b. ☐ Post-Election

9c. ☐ Annual Statement (Coverage Year)

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

9e. ☐ Dissolution of Candidate Committee

Effective Date of Dissolution

Pre-Election or Post-Election Statement relates to:

☐ Primary

☒ General

☐ Convention

☐ School

☐ Special

☐ Caucus

Date of Election, Convention or Caucus

11/6/12

By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

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

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in Items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.

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

Current Treasurer or

Designated Record keeper

Type or Print Name

Signature

Date

10/25/12

Candidate

Type or Print Name

Signature

Date

10/25/12



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 22144
2. Committee Name Friends for Allen Telgenhof

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

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

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 9/27/12
Name & Address:

Donald Molosky
8 Meadowgate
Harbor Spots, MI 49740

\$ 100.00 \$ 350.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation attorney Employer self

Business Address 201 Harbor Potoskey Rd., Potoskey MI 49770

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 10/10/12
Name & Address:

Kevin Klevorn
804 N. Lake St.
Boyer City, MI 49712

\$ 100.00 \$

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation Employer

Business Address

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

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 10/11/12
Name & Address:

Allen Telgenhof
12153 Cottage Lane
Charlevoix MI 49720

\$ 200.00 \$ 3154.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation attorney Employer Telgenhof & Snyder

Business Address 101 W-66 North, Charlevoix MI 49720

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

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt
Name & Address:

\$ \$

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation Employer

Business Address

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

Page Subtotal 400.00 AT

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

400.00 AT

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED OTHER RECEIPTS
SCHEDULE 1A-1
CANDIDATE COMMITTEE

1. Committee I.D. Number 22144

2. Committee Name Frederic Allen Telgenhof

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address: <u>Vista print</u> <u>95 Hayden Avenue</u> <u>Lexington, MA 02421</u>	Date of Receipt <u>8/28/12</u>	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input checked="" type="checkbox"/> Refund \Rebate <small>Click for Memo Itemization Type</small> <input type="checkbox"/> Other (Specify) _____	\$ <u>49.92</u>
Receipt #2 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <small>Click for Memo Itemization Type</small> <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #3 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <small>Click for Memo Itemization Type</small> <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #4 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <small>Click for Memo Itemization Type</small> <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #5 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <small>Click for Memo Itemization Type</small> <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #6 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <small>Click for Memo Itemization Type</small> <input type="checkbox"/> Other (Specify) _____	\$ _____
Receipt #7 Name & Address:	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <small>Click for Memo Itemization Type</small> <input type="checkbox"/> Other (Specify) _____	\$ _____

Page Subtotal

49.92

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

49.92

Enter this total on
line 4 of Summary
Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 22144
2. Committee Name Funds for Allen Telgenhof

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Allen Telgenhof</u> Address <u>12153 Cottage Lane</u> <u>Charlevoix MI 49720</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>loan repayment</u> <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/4/12</u> Date	<u>\$ 60.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>K-Meat</u> Address <u>06600 M-66 North</u> <u>Charlevoix MI 49720</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/5/12</u> Date	<u>\$ 14.17</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>US Postal Service</u> Address <u>6700 M-66 North</u> <u>Charlevoix MI 49720</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/5/12</u> Date	<u>\$ 36.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>Allen Telgenhof</u> Address <u>12153 Cottage Lane</u> <u>Charlevoix MI 49720</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>loan repayment</u> <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/9/12</u> Date	<u>\$ 20.00</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>Karen Campbell</u> Address <u>307 Crain St.</u> <u>Charlevoix MI 49720</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>loan repayment</u> <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/16/12</u> Date	<u>\$ 300.00</u> Click Here for Memo Itemization Type

Subtotal this page

430.17

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

430.17

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 22144
2. Committee Name Friends for Alla Telgenhof

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8) <input type="checkbox"/> FORGIVEN
Debt #1 Owed to or by: <input type="checkbox"/> Corp? <input type="checkbox"/> Yes <u>Karen Campbell</u> <u>307 Coan St</u> <u>Charlevoix MI 49720</u>	4. Type: <u>personal loan</u> 5. Date Debt Was Incurred: <u>6/29/12</u> 6. Original Amount of Debt: <u>\$ 500.00</u>	<u>10/16</u> \$ <u>300.00</u> \$ \$ \$ \$	\$ <u>300.00</u>	\$ <u>200.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Owed to or by: <input type="checkbox"/> Corp? <input type="checkbox"/> Yes <u>Alla Telgenhof</u> <u>12153 Cottage Lane</u> <u>Charlevoix MI 49720</u>	4. Type: <u>personal loan</u> 5. Date Debt Was Incurred: <u>7/5/12</u> 6. Original Amount of Debt: <u>\$ 500.00</u>	<u>8/10</u> \$ <u>70.00</u> <u>10/9</u> \$ <u>20.00</u> <u>9/4</u> \$ <u>60.00</u> \$ \$	\$ <u>150.00</u>	\$ <u>350.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Owed to or by: <input type="checkbox"/> Corp? <input checked="" type="checkbox"/> Yes <u>North Country Imagewear</u> <u>610 W. Sheridan, Ste. 2</u> <u>Petoskey MI 49770</u>	4. Type: <u>vendor debt</u> 5. Date Debt Was Incurred: _____ 6. Original Amount of Debt: <u>\$ 475.00</u>	\$ \$ \$ \$ \$	\$ <u>0</u>	\$ <u>475.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) \$ 1025.00

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 22144
2. Committee Name Friends for Alla Telgenhof

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input checked="" type="checkbox"/> Yes Owed to or by: Mac Donald Card Brinkley PO Box 286 Petoskey MI 49770	4. Type: <u>vendor debt</u> 5. Date Debt Was Incurred: <u>9/30/12</u> 6. Original Amount of Debt: <u>\$ 616.00</u>	\$ \$ \$ \$ \$ \$ 0	\$ \$ \$ \$ \$ \$ 0	\$ 616.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Tim Boyle 4001 Lakeshore Drive Charlevoix MI 49720	4. Type: <u>vendor debt</u> 5. Date Debt Was Incurred: <u>9/1/12</u> 6. Original Amount of Debt: <u>\$ 126.00</u>	\$ \$ \$ \$ \$ \$	\$ \$ \$ \$ \$ \$ 0	\$ 126.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Allan Telgenhof 12153 Cottage Lane Charlevoix MI 49720	4. Type: <u>personal loan</u> 5. Date Debt Was Incurred: <u>10/11/12</u> 6. Original Amount of Debt: <u>\$ 200.00</u>	\$ \$ \$ \$ \$ \$	\$ \$ \$ \$ \$ \$ 0	\$ 200.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt)

\$ 942.00

Grand Total of all Schedules 1E

(Complete on last page of Schedule showing amounts owed by or to the committee)

\$ 1967.00

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 22144

2. Committee Name Friends of Allen Telgenhof

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>400.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>400.00</u>	(18.) \$ <u>1,7,043.00</u>
4. Other Receipts (Schedule 1A-1, Column 6)	(4.) \$	<u>49.92</u>	(19.) \$ <u>49.92</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>449.92</u>	(20.) \$ <u>17,092.92</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>0</u>	(21.) \$ <u>849.78</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u>0</u>	(22.) \$ <u>0</u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>430.17</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>0</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>0</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>430.17</u>	(23.) \$ <u>16,974.01</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>0</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>0</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	<u>0</u>	(24.) \$ <u>0</u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>1,967.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u></u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>99.16</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>449.92</u>	
	(15.) = \$	<u>549.08</u>	
15. SUBTOTAL Add lines 13 and 14	(16.) - \$	<u>430.17</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(17.) \$	<u>98.91</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)			



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE
COVER PAGE

FOR OFFICIAL USE ONLY

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

<p>1. Committee I.D. Number 22144</p>		<p>3. This Statement covers From: 10/22/12 to 12/5/12</p>	
<p>2. Committee Name Fin for Allen Telge-Lf</p>		<p>4. Candidate Last Name Telge-Lf First Name Allen M.I. A</p> <p>4a. Office Sought Including District # or Community Served (If applicable) Charlevoix County Prosecuting Attorney</p> <p>4b. County of Residence Charlevoix</p>	
<p>5. Committee's Mailing Address 101 N-C66 N-S-R Charlevoix MI 49720 Area Code and Phone 231-547-3400</p> <p>If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.</p>		<p>6. Treasurer's Name & Residential Address N/A - candidate 13080 Cayhill Court Charlevoix MI 49720 Area Code & Phone 231-547-3400</p>	
<p>7. Treasurer's Business Address see above Area Code and Phone _____</p>		<p>8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) N/A Area Code and Phone _____</p>	
<p>9. TYPE OF STATEMENT</p> <p>9a. <input type="checkbox"/> Pre-Election OR 9b. <input checked="" type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> School <input type="checkbox"/> Special <input type="checkbox"/> Caucus</p> <p>Date of Election, Convention or Caucus _____</p>		<p>9c. <input type="checkbox"/> Annual Statement (_____ Coverage Year)</p> <p>9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)</p> <p>9e. <input type="checkbox"/> Dissolution of Candidate Committee</p> <p>Effective Date of Dissolution _____</p> <p>By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.</p> <p>Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.</p>	
<p>A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.</p>			
<p>10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.</p>			
<p>Current Treasurer or Designated Record keeper: Allen Telge-Lf Type or Print Name _____ Signature [Signature] Date: 12/5/12</p>		<p>Candidate: Allen Telge-Lf Type or Print Name _____ Signature [Signature] Date: 12/5/12</p>	



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 22144
2. Committee Name Friends for Allen Telgenhof

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

6. Amount

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

3. Contribution #1 PAC Receipt? ☐ YES
Name & Address:

4. Date of Receipt 10/26/12

Mary Beth K...
9095 Mercer
Charlevoix MI 49720

\$ 500.00

\$ 500.00

Click Here for Memo Itemization

5. If over \$100.00 cumulative, please provide:

Occupation Attorney Employer Self

Business Address 523 E. Mitchell St., Port Huron MI 49770

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

3. Contribution #2 PAC Receipt? ☐ YES
Name & Address

4. Date of Receipt 10/26/12

Kathy Way
8171 Shingley Rd
Charlevoix MI 49720

\$ 500.00

\$ 500.00

Click Here for Memo Itemization

5. If over \$100.00 cumulative, please provide:

Occupation Secretary Employer Mary Beth K..., P.C.

Business Address see above

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

3. Contribution #3 PAC Receipt? ☐ YES
Name & Address:

4. Date of Receipt 12/5/12

Allen Telgenhof

\$ 800.00

\$

Click Here for Memo Itemization

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #4 PAC Receipt? ☐ YES
Name & Address

4. Date of Receipt _____

\$

\$

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal

1000.00

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

1000.00

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE**

1. Committee I.D. Number 22144

2. Committee Name Friends for Althea Telgelet

This Schedule itemizes:

a ☒ Debts and obligations owed by or forgiven the committee OR b ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Karen Campbell</u> <u>307 Crown St</u> <u>Charlevoix MI 49720</u>	4. Type: <u>personal loan</u> 5. Date Debt Was Incurred: <u>6/29/12</u> 6. Original Amount of Debt: <u>\$ 500.00</u>	<u>10/14 \$ 300</u> <u>10/27 \$ 200</u> \$ \$ \$	\$ <u>500</u>	\$ <u>0</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Althea Telgelet</u> <u>12153 Cottage Lane</u> <u>Charlevoix MI 49720</u>	4. Type: <u>personal</u> 5. Date Debt Was Incurred: <u>7/5/12</u> 6. Original Amount of Debt: <u>\$ 500.00</u>	<u>8/10 \$ 70.00</u> <u>10/9 \$ 20.00</u> <u>9/4 \$ 60.00</u> <u>10/27 \$ 350.00</u> \$	\$ <u>500</u>	\$ <u>0</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input checked="" type="checkbox"/> Yes Owed to or by: <u>North Coast Insurance</u> <u>610 W. Sheridan, Ste. 2</u> <u>Peterborough MI 49770</u>	4. Type: <u>vendor</u> 5. Date Debt Was Incurred: _____ 6. Original Amount of Debt: <u>\$ 475.00</u>	<u>12/5 \$ 475.00</u> \$ \$ \$	\$ <u>475</u>	\$ <u>0</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) 0

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 22144
2. Committee Name Fred F. Allen Telge

This Schedule Itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Mac Donald Car Wash</u> <u>PO Box 286</u> <u>Peterborough MI 49770</u>	4. Type: <u>ve-l-</u> 5. Date Debt Was Incurred: <u>9/30/12</u> 6. Original Amount of Debt: <u>\$ 616.00</u>	12/5 \$ 616.00 \$ \$ \$ \$	\$ 616.00	\$ 0 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Tim Dugan</u> <u>4001 Lakeside Drive</u> <u>Clarkston MI 49720</u>	4. Type: <u>ve-l-</u> 5. Date Debt Was Incurred: <u>9/1/12</u> 6. Original Amount of Debt: <u>\$ 126.00</u>	12/5 \$ 126.00 \$ \$ \$ \$	\$ 126.00	\$ 0 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Allen Telge</u> <u>12153 Cottage Lane</u> <u>Clarkston MI 49720</u>	4. Type: <u>per-sal</u> 5. Date Debt Was Incurred: <u>10/11 & 12/5</u> 6. Original Amount of Debt: <u>\$ 1000.00</u>	\$ \$ \$ \$ \$	\$ 0	\$ 1,000.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt)

1000.00

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

1000.00

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 22144

2. Committee Name Fairfax Alb Telegraph

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>1800.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>1800.00</u>	(18.) \$ <u>18,842.00</u>
4. Other Receipts (Schedule 1A-1, Column 6)	(4.) \$	<u>0.00</u>	(19.) \$ <u>49.92</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>1800.00</u>	(20.) \$ <u>18,892.92</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>0</u>	(21.) \$ <u>849.78</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u>0</u>	(22.) \$ <u>0</u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>1767.00</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>0</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>0</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>1767.00</u>	(23.) \$ <u>18,741.01</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>0</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>0</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	<u>0</u>	(24.) \$ <u>0</u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>1000.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u>0</u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>98.91</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>1800.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>1898.91</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>1767.00</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>131.91</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ORIGINAL OR AMENDED

STATEMENT OF ORGANIZATION FORM FOR CANDIDATE COMMITTEES

<p>1. Committee ID #: <u>22144</u></p> <p>2. Type of Filing: <input checked="" type="checkbox"/> Original <input type="checkbox"/> Amendment to Items: _____ Eff. Date: _____</p> <p>3. Full Name of Committee (must include Candidate's first and last name): <u>Friends for Allen Telgenhof</u></p> <p>4a. Candidate Full Name (Last, First, M.I.): <u>Telgenhof, Allen, R</u></p> <p>4b. Political Party (if applicable): <u>Republican</u></p> <p>4c. County of Residence: <u>Charlevoix</u></p> <p>4d. Office Sought (Check one):</p> <table border="0"><tr><td><input type="checkbox"/> Governor</td><td><input type="checkbox"/> Lt. Governor</td><td><input type="checkbox"/> State Senator</td></tr><tr><td><input type="checkbox"/> State Rep.</td><td><input type="checkbox"/> Sec. of State</td><td><input type="checkbox"/> Attorney Gen.</td></tr><tr><td><input type="checkbox"/> State Bd. of Ed.</td><td><input type="checkbox"/> UofM Reg.</td><td><input type="checkbox"/> MSU Trustee</td></tr><tr><td><input type="checkbox"/> WSU Gov.</td><td><input type="checkbox"/> Supreme Court</td><td><input type="checkbox"/> Appeals Court</td></tr><tr><td><input type="checkbox"/> Circuit Court</td><td><input type="checkbox"/> District Court</td><td><input type="checkbox"/> Probate Court</td></tr><tr><td><input type="checkbox"/> Municipal Court</td><td></td><td></td></tr></table> <p>Local or other please specify: <u>prosecuting attorney</u></p> <p>4e. District/Circuit # or Jurisdiction:</p> <p>5. Date Committee was Formed: <u>04/18/12</u></p> <p>6a. Committee Phone #: <u>(231) 547-3400</u></p> <p>6b. Committee Fax #: <u>(231) 547-3444</u></p> <p>6c. Committee E-mail Address: <u>info@charlevoixlaw.com</u></p> <p>6d. Committee Website Address: <u>N/A</u></p> <p>7a. Complete Comm. Mailing Address (May be PO Box): <u>101 M-66 North</u> <u>Charlevoix, MI 49720</u></p> <p>7b. Complete Comm. Street Address (May not be PO Box): <u>see above</u></p> <p>8. Treasurer Name and Complete Address: <u>Allen R. Telgenhof</u> <u>101 M-66 North</u> <u>Charlevoix, MI 49720</u></p> <p>Phone #: <u>(231) 547-3400</u></p> <p>E-mail Address: <u>info@charlevoixlaw.com</u></p> <p>9. Designated Record Keeper Name and Complete Address: <u>Allen Telgenhof</u> <u>101 M-66 North</u> <u>Charlevoix, MI 49720</u></p> <p>Phone #: <u>(231) 547-3400</u></p> <p>E-mail Address: <u>info@charlevoixlaw.com</u></p>	<input type="checkbox"/> Governor	<input type="checkbox"/> Lt. Governor	<input type="checkbox"/> State Senator	<input type="checkbox"/> State Rep.	<input type="checkbox"/> Sec. of State	<input type="checkbox"/> Attorney Gen.	<input type="checkbox"/> State Bd. of Ed.	<input type="checkbox"/> UofM Reg.	<input type="checkbox"/> MSU Trustee	<input type="checkbox"/> WSU Gov.	<input type="checkbox"/> Supreme Court	<input type="checkbox"/> Appeals Court	<input type="checkbox"/> Circuit Court	<input type="checkbox"/> District Court	<input type="checkbox"/> Probate Court	<input type="checkbox"/> Municipal Court			<p>10. <input type="checkbox"/> REPORTING WAIVER REQUEST: If the committee does not expect to receive or expend in excess of \$1,000 in an election and checks this box, the filing requirement of pre, post and annual campaign statements is waived. The Reporting Waiver will be automatically lost if the committee exceeds the \$1,000 threshold.</p> <p>11. Name and Address of Depositories or Intended Depositories of committee funds. (Michigan Bank, Credit Union or Savings & Loan Association)</p> <p>a. Official Depository <u>Northwestern Bank</u> <u>US31</u> <u>Charlevoix, MI 49720</u></p> <p>b. Secondary Depository</p> <p>12. <input type="checkbox"/> This item applies only to Gubernatorial Candidate Committees: Check if this committee intends to seek qualifying contributions or make qualifying expenditures.</p> <p>13. ELECTRONIC FILING: This item applies to committees that file with the Michigan Department of State Bureau of Elections only and does not apply to Candidate Committees that file with the County Clerk's office.</p> <p>The Campaign Finance Act requires any committee that files with the Secretary of State and spends or receives \$20,000 in the preceding calendar year OR expects to spend or receive \$20,000 in the current calendar year to file campaign statements electronically. MERTS Plus software is provided to you free of charge to assist you in meeting this requirement.</p> <p><input type="checkbox"/> Committee spent or received or expects to spend or receive in excess of \$20,000 and is required to file electronically.</p> <p style="text-align: center;">** OR **</p> <p><input type="checkbox"/> Committee did not spend or receive or does not expect to spend or receive in excess of \$20,000 and would like to file electronically voluntarily.</p> <p>14. Verification: I/We certify that all reasonable diligence was used in the preparation of the above statement and that the contents are true, accurate and complete to the best of my/our knowledge or belief. If filing electronically, we further agree that the signatures below shall serve as the signatures that verify the accuracy and completeness of each statement filed electronically by the committee. I/We certify that all reasonable diligence will be used in the preparation of each statement electronically filed by this committee and that the contents of each statement will be true, accurate and complete to the best of my/our knowledge or belief. (Sign Name and Date)</p> <p><u>[Signature]</u> <u>4/18/12</u> Candidate</p> <p><u>[Signature]</u> <u>4/18/12</u> Current Treasurer</p> <p>..... Designated Record Keeper (Required only if filing electronically)</p>
<input type="checkbox"/> Governor	<input type="checkbox"/> Lt. Governor	<input type="checkbox"/> State Senator																	
<input type="checkbox"/> State Rep.	<input type="checkbox"/> Sec. of State	<input type="checkbox"/> Attorney Gen.																	
<input type="checkbox"/> State Bd. of Ed.	<input type="checkbox"/> UofM Reg.	<input type="checkbox"/> MSU Trustee																	
<input type="checkbox"/> WSU Gov.	<input type="checkbox"/> Supreme Court	<input type="checkbox"/> Appeals Court																	
<input type="checkbox"/> Circuit Court	<input type="checkbox"/> District Court	<input type="checkbox"/> Probate Court																	
<input type="checkbox"/> Municipal Court																			

PLEASE COMPLETE SECTIONS I, II, III AND IV BELOW (Print or Type) – See Reverse Side for Important Notifications

FD-104 (3/2008)



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

JUL 27 2012

CANDIDATE COMMITTEE
COVER PAGE

FOR OFFICIAL USE ONLY

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

1. Committee I.D. Number <u>22144</u>	3. This Statement covers From <u>7/20/12</u> to <u>7/22/12</u>
2. Committee Name <u>Friends for Allen Telgenhof</u>	4. Candidate Last Name <u>Telgenhof</u> First Name <u>Allen</u> M.I. <u>IC</u> 4a. Office Sought including District # or Community Served (if applicable) <u>Charlevoix County Prosecuting Attorney</u> 4b. County of Residence <u>Charlevoix</u>
5. Committee's Mailing Address <u>101 M-66 North</u> <u>Charlevoix, MI 49720</u> Area Code and Phone <u>231-547-3400</u> If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	6. Treasurer's Name & Residential Address <u>Allen Telgenhof</u> <u>12153 Cottage Lane</u> <u>Charlevoix MI 49720</u> Area Code & Phone <u>231-547-7388</u>
7. Treasurer's Business Address <u>101 M-66 North</u> <u>Charlevoix, MI 49720</u> Area Code and Phone <u>231-547-3400</u>	8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record Keeper) <u>N/A</u> Area Code and Phone _____

9. TYPE OF STATEMENT	
9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election	9c. <input type="checkbox"/> Annual Statement (_____ Coverage Year)
Pre-Election or Post-Election Statement relates to:	9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	9e. <input type="checkbox"/> Dissolution of Candidate Committee
<input type="checkbox"/> Convention <input type="checkbox"/> School	Effective Date of Dissolution _____
<input type="checkbox"/> Special <input type="checkbox"/> Caucus	By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.
Date of Election, Convention or Caucus _____	Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in Items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.

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

Current Treasurer or Designated Record keeper	<u>Allen Telgenhof</u>	Signature	<u>[Signature]</u>	Date	<u>7/27/12</u>
	Type or Print Name				
Candidate	<u>Allen Telgenhof</u>	Signature	<u>[Signature]</u>	Date	<u>7/27/12</u>
	Type or Print Name				



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 22144
2. Committee Name Friends for Allen Telgenhof

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>4/20/12</u>	
Name & Address: <u>Currier, Vince</u> <u>135 US-31 South</u> <u>Charlevoix, MI 49720</u>		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>4/24/12</u>	
Name & Address: <u>Campbell, Lewellyn</u> <u>307 Crain St</u> <u>Charlevoix, MI 49720</u>		\$ <u>500.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>4/26/12</u>	
Name & Address: <u>Wietzke, Phoebe</u> <u>4098 Lakeshore Rd</u> <u>Boyer City, MI 49712</u>		\$ <u>500.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>4/26/12</u>	
Name & Address: <u>Shear, Nancy</u> <u>249 Bluewater Trail</u> <u>Boyer City, MI 49712</u>		\$ <u>500.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>housewife</u> Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 1600.00

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 22144
2. Committee Name Friends for Allen Telgenhof

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

6. Amount

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

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 4/26/12
Name & Address:

Abdella, Joseph
110 Hunters Lane
Boyle City, MI 49712

\$ 100.00 \$

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 4/30/12
Name & Address:

Halverson, Dennis
104 Overlook Dr.
Charlevoix, MI 49720

\$ 50.00 \$

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 4/30/12
Name & Address:

Veryser, Thomas
330 Mission Dr.
Boyle City, MI 49712

\$ 500.00 \$

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation Dentist Employer self

Business Address _____

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

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 4/30/12
Name & Address:

Ervin III, Charles
151 Carriage Trace
Marietta, GA 30068

\$ 150.00 \$

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation retired Employer _____

Business Address _____

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

Page Subtotal

800.00

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 22144
2. Committee Name Friends for Allen Telgarhof

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>4/30/12</u>	
Name & Address: <u>MacGregor, Susan</u> <u>5685 Ridgeland Rd.</u> <u>Charlevoix, MI 49720</u>		\$ <u>250.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired Educator</u> Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>5/7/12</u>	
Name & Address: <u>Allen, Matthew</u> <u>8966 Alden Meadows</u> <u>Alden, MI 49612</u>		\$ <u>250.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>employment recruiter</u> Employer <u>Innovative Search Group</u>		Click Here for Memo Itemization	
Business Address <u>P.O. Box 208 Alden, MI 49612</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>5/10/12</u>	
Name & Address: <u>Hodge, Gaye</u> <u>3405 Black Rd</u> <u>Charlevoix, MI 49720</u>		\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>5/10/12</u>	
Name & Address: <u>Latture, David</u> <u>1457 Bush Circle Dr</u> <u>GRAND BLANC, MI 48439</u>		\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 600.00

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

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 22144
2. Committee Name Friends for Allen Telgenhof

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

6. Amount

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

3. Contribution #1 PAC Receipt? ☐ YES

4. Date of Receipt 5/18/12

Name & Address:

Cooper, Tom
303 Howard St.
Petoskey, MI 49770

\$ 50.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 5/18/12

Name & Address:

Newkirk, Howard
3096 Tall Pines
Bozette City, MI

\$ 500.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation retired Employer _____

Business Address _____

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

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt 5/18/12

Name & Address:

Hansen, Steven
4644 Sequanola Dr.
Charlevoix, MI 49720

\$ 100.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt 5/18/12

Name & Address:

Hansen, Robert A.
2731 M-66
East Jordan, MI 49727

\$ 75.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal

725.00

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 22144
2. Committee Name Friends for Allen Telgenhof

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

6. Amount

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 5/30/12
Name & Address:

Campbell, David
701 Bridge St
Charlevoix, MI 49720

\$ 250.00

5. If over \$100.00 cumulative, please provide:

Occupation LAWYER Employer self

Business Address

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

Click Here for Memo Itemization

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 5/30/12
Name & Address:

Boss, R. Scott
02362 S. BARNARD
Charlevoix, MI 49720

\$ 500.00

5. If over \$100.00 cumulative, please provide:

Occupation Boat Sales Employer Self

Business Address 6357 U.S. 31 S Charlevoix, MI 49720

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

Click Here for Memo Itemization

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 5/30/12
Name & Address:

Seely, Steven
201 Meach St. #8
Charlevoix, MI 49720

\$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address

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

Click Here for Memo Itemization

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 5/31/12
Name & Address:

BARNES, Gloria
08275 Shrigley Rd
Charlevoix, MI 49720

\$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address

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

Click Here for Memo Itemization

Page Subtotal:

850.00

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

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 22144
2. Committee Name Friends for Allen Telgenhof

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/5/12</u> Name & Address: <u>Parrish, Faye</u> <u>518 May St.</u> <u>Charlevoix, MI 49720</u>		\$ <u>50.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/7/12</u> Name & Address: <u>Boss, Kenneth</u> <u>203 Alice St.</u> <u>Charlevoix, MI 49720</u>		\$ <u>50.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/7/12</u> Name & Address: <u>Beuthin, Kurt</u> <u>07560 Indian Trails</u> <u>Charlevoix, MI 49720</u>		\$ <u>100.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/8/12</u> Name & Address: <u>Vogelheim, Joseph</u> <u>13666 Beechwood</u> <u>Charlevoix, MI 49720</u>		\$ <u>50.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

250.00

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

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 22144
2. Committee Name Friends for Allen Telgenhof

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/7/12</u> Name & Address: <u>Telgenhof, Allen</u> <u>12553 Cottage Lane</u> <u>Charlevoix, MI 49720</u>		\$ <u>1000.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>LAWYER</u> Employer <u>self</u> Business Address <u>101 M-66 Charlevoix, MI 49720</u> Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/11/12</u> Name & Address: <u>Sturock, John</u> <u>737 Sunset Ridge</u> <u>Charlevoix, MI 49720</u>		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/11/12</u> Name & Address: <u>Allen, Matthew</u> <u>8966 Alden Meadows</u> <u>Alden, MI 49612</u>		\$ <u>250.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>employment recruiter</u> Employer <u>Innovative Search Group</u> Business Address <u>P.O. Box 208 Alden, MI 49612</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/9/12</u> Name & Address: <u>IVAN, Judith</u> <u>08064 Eastern Ave</u> <u>Charlevoix, MI 49720</u>		\$ <u>30.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 1380.00

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

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 22144
2. Committee Name Friends for Allen Telgenhof

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

6. Amount

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

3. Contribution #1 PAC Receipt? ☐ YES

4. Date of Receipt 6/7/12

Name & Address:

Klooster, Joylene
15301 Klooster Rd.
Charlevoix, MI 49720

\$ 50.00

\$ _____

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 6/11/12

Name & Address:

FARMER, LAURA
17189 FERRY Rd.
Charlevoix, MI 49720

\$ 25.00

\$ _____

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt 6/12/12

Name & Address:

WAY, JOAN
05840 M-66 Hwy
Charlevoix, MI 49720

\$ 25.00

\$ _____

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt 6/13/12

Name & Address:

LIEBERMAN, KRAAG C.
103 Belvedere Ave.
Charlevoix, MI 49720

\$ 150.00

\$ _____

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation Lawyer Employer self

Business Address 103 Belvedere Ave Charlevoix MI 49720

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

Page Subtotal

250.00

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

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 22144
2. Committee Name Friends for Allen Telgenhof

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

6. Amount

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

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 6/25/12
Name & Address:

BARNES, Pamela
1020 Strydom Ct.
Charlevoix, MI 49720

\$ 50.00

Click Here for Memo Itemization

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 6/5/12
Name & Address:

Telgenhof, Allen
12153 Cottage Lane
Charlevoix, MI 49720

\$ 500.00

\$ 1500.00

Click Here for Memo Itemization

5. If over \$100.00 cumulative, please provide:

Occupation Lawyer Employer self

Business Address 101 M-66 Charlevoix, MI 49720

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

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 6/7/12
Name & Address:

Telgenhof, Allen
12153 Cottage Lane
Charlevoix, MI 49720

\$ 500.00

\$ 2000.00

Click Here for Memo Itemization

5. If over \$100.00 cumulative, please provide:

Occupation Lawyer Employer self

Business Address 101 M-66 Charlevoix MI 49720

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

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 6/7/12
Name & Address:

Telgenhof, Judy
12153 Cottage Lane
Charlevoix, MI 49720

\$ 500.00

Click Here for Memo Itemization

5. If over \$100.00 cumulative, please provide:

Occupation Bank Teller Employer Northwestern Bank

Business Address 1425 Bridge St Charlevoix MI 49720

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

Page Subtotal

1550.00

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

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

22144

2. Committee Name

Friends for Allen Telgenhof

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

6. Amount

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

3. Contribution #1

PAC Receipt?

☐ YES

4. Date of Receipt

6/19/12

Name & Address:

Way, Barney
12900 Nehemiah Lane
Charlevoix, MI 49720

\$ 500.00

\$

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation

Boat Sales

Employer

self

Business Address

6357 15315 Charlevoix, MI 49720

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

3. Contribution #2

PAC Receipt?

☐ YES

4. Date of Receipt

6/22/12

Name & Address

Voisin, Vicki
P.O. Box 743
Charlevoix, MI 49720

\$ 100.00

\$

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation

Employer

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

3. Contribution #3

PAC Receipt?

☐ YES

4. Date of Receipt

6/22/12

Name & Address:

Glass, Charles
P.O. Box 724
Harbor Springs, MI 49740

\$ 100.00

\$

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation

Employer

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

3. Contribution #4

PAC Receipt?

☐ YES

4. Date of Receipt

6/22/12

Name & Address

Klooster, Conrad
1010 James St
Charlevoix, MI 49720

\$ 50.00

\$

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation

Employer

Business Address

Type of Contribution:

☒ Direct

☐ Loan from a person

☐ Fund Raiser

Page Subtotal

750.00

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

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 22144

2. Committee Name Friends for Allen Telgenhof

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

6. Amount

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

3. Contribution #1 PAC Receipt? ☐ YES

4. Date of Receipt 6/27/12

Name & Address:

Hall, Doug
9115 Whippoorwill Ln.
Charlevoix, MI 49720

\$ 250.00

Click Here for Memo Itemization

5. If over \$100.00 cumulative, please provide:

Occupation Business Manager Employer UPS

Business Address 101 Mitchell St Petoskey 49770

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

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 6/27/12

Name & Address:

Shepard, Mary
18340 Faculak Rd.
Charlevoix, MI 49720

\$ 300.00

Click Here for Memo Itemization

5. If over \$100.00 cumulative, please provide:

Occupation secretary Employer Telgenhof & Snyder

Business Address 101 M-bb Charlevoix, MI 49720

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

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt 6/27/12

Name & Address:

Schaller, Elsa
P.O. Box 1736
Petoskey, MI 49770

\$ 100.00

Click Here for Memo Itemization

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt 6/29/12

Name & Address:

Campbell, Karen
307 CRAIN ST
Charlevoix, MI 49720

\$ 500.00

Click Here for Memo Itemization

5. If over \$100.00 cumulative, please provide:

Occupation RN Employer Charlevoix Area Hospital

Business Address Lakeshore Dr. Charlevoix, MI 49720

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

Page Subtotal

1150.00

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

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 22144
2. Committee Name Friends for Allen Telgenhof

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

6. Amount

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

3. Contribution #1 PAC Receipt? ☐ YES

4. Date of Receipt 7/2/12

Name & Address:

Veryser, Karen
330 Mission Dr.
Boyer City, MI 49712

\$ 200.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation homemaker Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 7/5/12

Name & Address:

Telgenhof, Allen
12133 Cottage Lane
Charlevoix, MI 49720

\$ 500.00 \$ 2500.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation Lawyer Employer self

Business Address 106 M-16 Charlevoix, MI 49720

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

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt 7/6/12

Name & Address:

Morgan, Bill
13070 Country Club Dr
Cllo, MI 48420

\$ 250.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation accountant Employer Taylor + Morgan

Business Address 2302 Stonebridge Dr Flint, MI 48532

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

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt 7/9/12

Name & Address:

Campbell, Doug
4738 Scottish Dr
Murfreesboro, TN 37129

\$ 125.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation teacher Employer Brentwood Academy

Business Address Granny White, Brentwood, TN 37027

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

Page Subtotal 1075.00

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 22144
2. Committee Name Friends for Allen Telgenhof

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

6. Amount

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

3. Contribution #1 PAC Receipt? ☐ YES
Name & Address:

4. Date of Receipt 7/9/12

Sawyer, Steve
4922 Poplar Lane
Bozette City, MI 49712

\$ 100.00

\$ _____

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES
Name & Address:

4. Date of Receipt 7/9/12

Johnson, MARGO
12233 Meanderline
Charlevoix, MI 49720

\$ 100.00

\$ _____

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #3 PAC Receipt? ☐ YES
Name & Address:

4. Date of Receipt 7/12/12

Ross, Henry
5580 Lakeshore Rd.
Bozette City, MI 49712

\$ 100.00

\$ _____

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #4 PAC Receipt? ☐ YES
Name & Address:

4. Date of Receipt 7/13/12

Telgenhof, KAY
11444 U.S. Hwy 31
Williamsburg, MI 49690

\$ 100.00

\$ _____

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal

400.00

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 22144
2. Committee Name Friends for Allen Telgenhof

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

6. Amount

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

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 7/13/12
Name & Address:

SHERMAN, JR, Theodore
225 Crosby Dr.
East Jordan, MI 49727

\$ 99.00

Click Here for Memo Itemization

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7/13/12
Name & Address:

Greenwalt, William E.
842 Front St.
Bozyc City, MI 49712

\$ 50.00

Click Here for Memo Itemization

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 7/13/12
Name & Address:

Telgenhof, Allen
12153 Cottage Lane
Charlevoix, MI 49720

\$ 454.00 \$ 2954.00

Click Here for Memo Itemization

5. If over \$100.00 cumulative, please provide:

Occupation lawyer Employer self

Business Address 101 M-66 Charlevoix, MI 49720

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

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 7/18/12
Name & Address:

JACKSON, LUAN
P.O. Box 777
Charlevoix, MI 49720

\$ 500.00

Click Here for Memo Itemization

5. If over \$100.00 cumulative, please provide:

Occupation mental health therapist Employer self employed

Business Address P.O. Box 777 Charlevoix, MI 49720

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

Page Subtotal

1103.00

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

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 22144
2. Committee Name Friends for Allen Telgeshof

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

6. Amount

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

3. Contribution #1

PAC Receipt? ☐ YES

4. Date of Receipt 7/19/12

Name & Address:

Deegan, Jennifer
340 State St
Harbor Springs, MI 49740

\$ 100.00

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt 7/19/12

Name & Address:

McCreadie, Timothy
12779 Clover Lane
Charlevoix, MI 49720

\$ 250.00

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation MANAGER Employer Cutco Company

Business Address 12779 Clover Lane Charlevoix MI 49720

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

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt 7/19/12

Name & Address:

Riley, Michael
2080 Alice St
Farwell, MI 49622

\$ 50.00

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt 7/20/12

Name & Address:

Paul Mitchell III
1760 Glencairn Dr.
Saginaw, MI 48609

\$ 500.00

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation Managing partner Employer PM3 Holdings

Business Address 39577 Woodland Ave, Ste 200, Bloomfield Hills, MI 48304

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

Page Subtotal

900.00

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

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 27144
2. Committee Name Friends For Allen Telgenhof

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

6. Amount

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

3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt 7/20/12

Name & Address:

Sherry Mitchell
1760 Glencairn Dr.
Saginaw, MI 48609

\$ 500.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation homemaker Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7/20/12

Name & Address:

Alison Mellon
PO Box 723
Boysen City, MI 49712

\$ 50.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address:

\$ _____

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

Name & Address:

\$ _____

[Click Here for Memo Itemization](#)

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal

550.00

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

14,573.00

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 221 44

2. Committee Name Funds for Allen Telgehof

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>14,573.00</u>	(18.) \$
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	(19.) \$
c. Subtotal of "Contributions"	(3c.) \$	<u>14,573.00</u>	(20.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u>0.00</u>	(21.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>14,573.00</u>	(22.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>733.71</u>	(23.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u>0.00</u>	(24.) \$
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>13,477.51</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>13,477.51</u>	
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>0</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>0</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	<u>0</u>	
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>1500.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u>0.00</u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>0.</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>14,573.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>14,573.00</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>13,477.51</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>1,095.49</u>	



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 22144
2. Committee Name Friends for Allen Telgenhof

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Practical Political Consulting, Inc</u> Address <u>220 Albert Ave</u> <u>East Lansing, MI 48823</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>polling</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/11/12</u> Date	<u>608.00</u>
Expenditure #2 Name <u>Build A Sign</u> Address <u>11525 Stonehollow Dr.</u> <u>Suite 100</u> <u>Austin, TX 78758</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/8/12</u> Date	<u>\$ 100.00</u>
Expenditure #3 Name <u>PAY PAL, Inc.</u> Address <u>2211 N. 1st St</u> <u>SAN JOSE, CA 95131</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>service charge</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/10/12</u> Date	<u>\$ 1.50</u>
Expenditure #4 Name <u>Charlevoix Community Shopper</u> Address <u>P.O. Box 298</u> <u>Charlevoix, MI 49720</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/10/12</u> Date	<u>\$ 299.00</u>
Expenditure #5 Name <u>Allen Telgenhof</u> Address <u>12153 Cottage Lane</u> <u>Charlevoix, MI 49720</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>loan repayment</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/11/12</u> Date	<u>\$ 500.00</u>

Subtotal this page 1500.50

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

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 22144

2. Committee Name Friends for Allen Telgenhof

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Petoskey News Review</u> Address <u>319 State St</u> <u>Petoskey, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/20/12</u> Date	\$ <u>250.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>Vistaprint</u> Address <u>95 Hayden Avenue</u> <u>Lexington, MA 02421</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/23/12</u> Date	\$ <u>46.74</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>Vistaprint</u> Address <u>95 Hayden Avenue</u> <u>Lexington, MA 02421</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/23/12</u> Date	\$ <u>133.70</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>Sawicki + Sons</u> Address <u>1521 W. Lafayette</u> <u>Detroit, MI 48216</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/24/12</u> Date	\$ <u>1,925.49</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>U.S. Post Office</u> Address <u>6700 M-66N</u> <u>Charlevoix, MI 49720</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/30/12</u> Date	\$ <u>45.00</u> Click Here for Memo Itemization Type

Subtotal this page

2,400.43

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 22144
2. Committee Name Friends for Allen Telgenhof

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Charlevoix Courier</u> Address <u>112 Mason St</u> <u>Charlevoix, MI 49720</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/30/12</u> Date	<u>\$ 980.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>Boysie City Gazette</u> Address <u>5 W Main</u> <u>Boysie City, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/31/12</u> Date	<u>\$ 735.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>John Curtis Photo Video</u> Address <u>3955 S. Pleasantview</u> <u>Harbor Springs, MI 49740</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/5/12</u> Date	<u>\$ 375.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>Charlevoix Community Shopper</u> Address <u>P.O. Box 298</u> <u>Charlevoix, MI 49720</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/4/12</u> Date	<u>\$ 436.00</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>Northwestern Bank</u> Address <u>1425 Bridge St.</u> <u>Charlevoix, MI 49720</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>bank charges</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/4/12</u> Date	<u>\$ 64.00</u> Click Here for Memo Itemization Type

Subtotal this page 2,590.00

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

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 22144
2. Committee Name Friends for Allen Telgenhof

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Discountmugs.com</u> Address <u>12610 Northwest 115 Ave</u> <u>Medley, FL 33178</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>pens</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/11/12</u> Date	\$ <u>90.00</u>
Expenditure #2 Name <u>McDonough's Market</u> Address <u>38240 Michigan Ave</u> <u>BEAVER ISLAND, MI 49782</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>food</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/14/12</u> Date	\$ <u>105.00</u>
Expenditure #3 Name <u>Fresh Air Aviation</u> Address <u>66918 Old Norwood Rd.</u> <u>Charlevoix, MI 49720</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>TRAVEL</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/14/12</u> Date	\$ <u>407.00</u>
Expenditure #4 Name <u>EAST JORDAN F-Z Mart</u> Address <u>651 Water St.</u> <u>EAST JORDAN, MI 49727</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>water/gas</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/15/12</u> Date	\$ <u>58.78</u>
Expenditure #5 Name <u>K-MART</u> Address <u>06600 M 66 North</u> <u>Charlevoix, MI 49720</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>water</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/15/12</u> Date	\$ <u>21.00</u>

Subtotal this page

681.78

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

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 22144
2. Committee Name Friends for Allen Telgenhof

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<p>Expenditure #1</p> <p>Name <u>SAWICKI + SONS</u></p> <p>Address <u>1521 W. LAFAYETTE</u> <u>DETROIT, MI 48216</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Signs</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>6/19/12</u></p> <p>Date</p>	<p><u>\$1772.85</u></p>
<p>Expenditure #2</p> <p>Name <u>EAST JORDAN FREEDOM FESTIVAL</u></p> <p>Address <u>P.O. BOX 137</u> <u>EAST JORDAN, MI</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>ENTRY FEE</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>6/18/12</u></p> <p>Date</p>	<p><u>\$100.00</u></p>
<p>Expenditure #3</p> <p>Name <u>Village Graphics</u></p> <p>Address <u>111 ANTRIM ST.</u> <u>CHARLEVOIX, MI 49720</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>printing</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>6/22/12</u></p> <p>Date</p>	<p><u>\$204.58</u></p>
<p>Expenditure #4</p> <p>Name <u>John Curtis Photo Video</u></p> <p>Address <u>3955 S. PLEASANTVIEW</u> <u>HARBOR SPRINGS, MI 49740</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>advertising/website</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>6/27/12</u></p> <p>Date</p>	<p><u>\$775.00</u></p>
<p>Expenditure #5</p> <p>Name <u>Petoskey News Review</u></p> <p>Address <u>319 State St</u> <u>Petoskey, MI</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Advertising</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>6/22/12</u></p> <p>Date</p>	<p><u>\$600.00</u></p>

Subtotal, this page

3,452.43

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

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 22144
2. Committee Name Friends for Allen Telgenhof

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Petoskey News Review</u> Address <u>319 State St</u> <u>Petoskey, MI 49770</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/28/12</u> Date	<u>\$ 340.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>Vistaprint</u> Address <u>95 Hayden Ave</u> <u>Lexington, MA 02421</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>website</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/28/12</u> Date	<u>\$ 19.99</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>Charlevoix Community Shopper</u> Address <u>P.O. Box 298</u> <u>Charlevoix, MI 49720</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/3/12</u> Date	<u>\$ 507.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>NORTHWESTERN BANK</u> Address <u>1475 Bridge St</u> <u>Charlevoix, MI 49720</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>bank charges</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/3/12</u> Date	<u>\$ 32.00</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>Petoskey News Review</u> Address <u>319 State St</u> <u>Petoskey, MI 49770</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/11/12</u> Date	<u>\$ 479.32</u> Click Here for Memo Itemization Type

Subtotal this page

1338.31

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

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number Friends for Allen Telgenhof
2. Committee Name 22144

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>PRACTICAL Political Consulting</u> Address <u>220 Albert Ave</u> <u>LANSING, MI 48823</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>voter lists</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/13/12</u> Date	<u>\$623.40</u>
Expenditure #2 Name <u>NORTH COUNTRY ImageWEAR</u> Address <u>610 W. Sheridan St Ste 2</u> <u>Petoskey, MI 49770</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/18/12</u> Date	<u>\$ 500.00</u>
Expenditure #3 Name <u>Petoskey News Review</u> Address <u>319 State St</u> <u>Petoskey, MI 49770</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/18/12</u> Date	<u>\$ 365.20</u>
Expenditure #4 Name <u>Vistaprint</u> Address <u>45 Hayden Ave.</u> <u>Lexington, MA 02421</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>website</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/20/12</u> Date	<u>\$ 24.96</u>
Expenditure #5 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	Date _____	\$ _____

Subtotal this page 1513.56
Grand Total of all Schedules 1B
(Complete on last page of Schedule) 13,477.51

Enter this total
on line 8a of
Summary Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 22144
2. Committee Name Friends For Allen Telgenhof

3. Name and Address from whom received
If contribution is from an individual, enter last
name first. Check box to indicate if contribution
is from a Political Committee or an Independent
Committee (Both are commonly called PACs).
Report all in-kind contributions.

4. Type of In-Kind Contribution (Check applicable box)
5. Date of Receipt
6. Name & Address of Vendor from whom goods or services were
purchased

7. Amount or
Fair Market
Value

8. Cumulative
for Election
Cycle (Through
date in Item 5)

Contribution #1 PAC Receipt? ☐ Yes
Name & Address:

Snyder, Valerie
12727 Pineridge Dr.
Charlevoix, MI 49720

If over \$100.00 cumulative, please provide:
Occupation:

Employer Name & Business Address:

4. ☐ Endorsement or Guarantee of Bank Loan

☒ Goods Donated or Loaned ☐ Services Donated

☐ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description groceries for open house

5. Date Of Receipt: 4/26/12

6. Vendor Name & Address:

Oleson's Food Store
112 Antrim
Charlevoix, MI 49720

Click Here for Memo Itemization

☐ Fund Raiser Contribution

Contribution #2 PAC Receipt? ☐ Yes
Name & Address:

Snyder, Valerie
12727 Pineridge Dr.
Charlevoix, MI 49720

If over \$100.00 cumulative, please provide:
Occupation:

Employer Name & Address:

4. ☐ Endorsement or Guarantee of Bank Loan

☒ Goods Donated or Loaned ☐ Services Donated

☐ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description supplies for open house

5. Date Of Receipt: 4/24/12

6. Vendor Name & Address:

Gordon Food Service
1010 Spring St.
Petoskey, MI 49770

Click Here for Memo Itemization

☐ Fund Raiser Contribution

Contribution #3 PAC Receipt? ☐ Yes
Name & Address:

Snyder, Valerie
12727 Pineridge Dr.
Charlevoix, MI 49720

If over \$100.00 cumulative, please provide:

Occupation:

Employer Name & Address:

4. ☐ Endorsement or Guarantee of Bank Loan

☒ Goods Donated or Loaned ☐ Services Donated

☐ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description supplies for open house

5. Date Of Receipt: 4/24/12

6. Vendor Name & Address:

Click Here for Memo Itemization

☐ Fund Raiser Contribution

Page Subtotal 149.33

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

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 22144
2. Committee Name Friends of Allen Telgenbf

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
--	---	--------------------------------------	--

Contribution #1 PAC Receipt? ☐ Yes
Name & Address:

Valerie Snyder
12727 Pineridge
Charlevoix, MI 49720

If over \$100.00 cumulative, please provide:
Occupation: lawyer

Employer Name & Business Address:

Telgenbf & Snyder
101 N-66 North
Charlevoix MI 49720

☐ Fund Raiser Contribution

4. ☐ Endorsement or Guarantee of Bank Loan

☐ Goods Donated or Loaned ☐ Services Donated

☒ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description food for open house

5. Date Of Receipt: 4/25/12

6. Vendor Name & Address:

Lott's Bakes
604 Bridge St.
Charlevoix, MI 49720

[Click Here for Memo Itemization](#)

\$ 67.00 \$ 216.73

Contribution #2 PAC Receipt? ☐ Yes
Name & Address:

Allen Telgenbf
12153 Cottage Lane
Charlevoix MI 49720

If over \$100.00 cumulative, please provide:
Occupation: lawyer

Employer Name & Address:

Telgenbf & Snyder
101 N-66 North
Charlevoix MI 49720

☐ Fund Raiser Contribution

4. ☐ Endorsement or Guarantee of Bank Loan

☐ Goods Donated or Loaned ☐ Services Donated

☒ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description printing

5. Date Of Receipt: 4/25/12

6. Vendor Name & Address:

Village Graphics
111 Antrim St
Charlevoix MI 49720

[Click Here for Memo Itemization](#)

\$ 132.45 \$

Contribution #3 PAC Receipt? ☐ Yes
Name & Address:

Allen Telgenbf
12153 Cottage Lane
Charlevoix MI 49720

If over \$100.00 cumulative, please provide:

Occupation: lawyer

Employer Name & Address:

101 N-66 North
Charlevoix MI 49720

☐ Fund Raiser Contribution

4. ☐ Endorsement or Guarantee of Bank Loan

☐ Goods Donated or Loaned ☐ Services Donated

☒ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description bumper stickers

5. Date Of Receipt: 4/25/12

6. Vendor Name & Address:

Build-A-Sign.com
11525 Stuebgen Dr.
Austin, TX 78758

[Click Here for Memo Itemization](#)

\$ 194.98 \$ 327.43

Page Subtotal 394.43

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

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 22144
2. Committee Name Friends for Allen Telgenhof

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
<p>Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>Telgenhof, Allen</u> <u>12153 Cottage Lane</u> <u>Charlevoix, MI 49720</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: <u>lawyer</u> Employer Name & Business Address: <u>Telgenhof & Snyder</u> <u>101 M-66 North</u> <u>Charlevoix MI 49720</u></p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan</p> <p><input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated</p> <p><input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others</p> <p><input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description: <u>printing</u></p> <p>5. Date Of Receipt: <u>4/25/12</u></p> <p>6. Vendor Name & Address: <u>Vistaprint</u> <u>95 Hayden Ave</u> <u>Lexington, MA 02421</u></p> <p>Click Here for Memo Itemization</p>	\$ <u>89.95</u>	\$ <u>417.38</u>
<p>Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>Kurt Witzke</u> <u>4098 Lakeshore Rd.</u> <u>Boyer City, MI 49712</u></p> <p>If over \$100.00 cumulative, please provide: Occupation: <u>retired</u> Employer Name & Address:</p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan</p> <p><input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated</p> <p><input type="checkbox"/> Goods or Services Purchased by Candidate or Others</p> <p><input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description: <u>refreshments for open house</u></p> <p>5. Date Of Receipt: <u>4/26/12</u></p> <p>6. Vendor Name & Address:</p> <p>Click Here for Memo Itemization</p>	\$ <u>100.00</u> FNU	
<p>Contribution # 3 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address:</p> <p>If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:</p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan</p> <p><input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated</p> <p><input type="checkbox"/> Goods or Services Purchased by Candidate or Others</p> <p><input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description:</p> <p>5. Date Of Receipt:</p> <p>6. Vendor Name & Address:</p> <p>Click Here for Memo Itemization</p>		

Page Subtotal 189.95

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) 733.71

Enter this total
on line 6 of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number _____

2. Committee Name _____

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven by the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: <i>Allen Telgenhof</i> <i>12153 Cottage Lane</i> <i>Charlevoix MI 49720</i>	4. Type: <i>personal loan</i> 5. Date Debt Was Incurred: <i>6/17/12</i> 6. Original Amount of Debt: <i>\$ 1000.00</i>	<i>6/11/12 \$ 500.00</i> \$ _____ \$ _____ \$ _____ \$ _____	\$ <i>500.00</i>	\$ <i>500.00</i> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <i>Karen Campbell</i> <i>307 Crain St.</i> <i>Charlevoix MI 49720</i>	4. Type: <i>personal loan</i> 5. Date Debt Was Incurred: <i>6/29/12</i> 6. Original Amount of Debt: <i>\$ 500.00</i>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <i>500.00</i> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: <i>Allen Telgenhof</i> <i>12153 Cottage Lane</i> <i>Charlevoix MI 49720</i>	4. Type: <i>personal loan</i> 5. Date Debt Was Incurred: <i>7/5/12</i> 6. Original Amount of Debt: <i>\$ 500.00</i>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <i>500.00</i> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) *1500.00*

Grand Total of all Schedules 1E *1500.00*
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



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

December 9, 2013

Robert Taylor
2594 Eagle Island Road
Boyne City, Michigan 49712

Dear Mr. Taylor:

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

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

Sincerely,

A handwritten signature in cursive script that reads "Lori A. Bourbonais".

Lori A. Bourbonais
Bureau of Elections
Michigan Department of State

c: Allen Telgenhof

BUREAU OF ELECTIONS
MI DEPT OF STATE

November 19, 2013

2013 NOV 25 PM 3:46

Lori A. Bourbonais
Bureau of Elections
Michigan Department of State
430 W. Allegan
Lansing, MI 48918

Re: Friends for Allen Telgenhof/Complaint filed by Robert Taylor

Dear Ms. Bourbonais:

I am writing in response to the formal complaint made by Robert Taylor on October 30, 2013.

I reported each and every contribution made to my committee. It does not even appear that Mr. Taylor questions this. He claims that I did not use the proper forms, did not list all of the addresses and perhaps had a math error or two. If you find any of these allegations to be true, I am happy to correct them as you see fit.

Specifically, with respect to the allegations regarding business addresses, it appears that business addresses were not listed for some people who described themselves as self-employed, retired, homemakers or housewives. If we were given business addresses for people who were self-employed, we reported those.

As to the allegation that I should've submitted fundraiser forms, the events that are described in Mr. Taylor's complaint were not fundraisers. By his own "evidence", both of these events were called "meet and greets" and there was no charge for tickets, etc. Again, all of the costs for these meet and greets were disclosed on my campaign finance reports.

Please let me know if you need any further information from me regarding this complaint.

Sincerely,



Allen Telgenhof



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

January 3, 2014

Allen Telgenhof
301 State Street
Charlevoix, Michigan 49720

Dear Mr. Telgenhof:

This letter concerns the complaint that was recently filed against you by Robert Taylor, which relates to purported violations of the Michigan Campaign Finance Act (MCFA or Act), 1976 PA 388, MCL 169.201 *et seq.* The Department of State has received a rebuttal statement from the complainant, a copy of which is enclosed with this letter.

Section 15(10) of the MCFA, MCL 169.215(10), requires the Department to determine within 60 business days from the receipt of the rebuttal statement whether there is a reason to believe that a violation of the Act has occurred. Mr. Taylor's complaint remains under investigation at this time. At the conclusion of the review, all parties will receive written notice of the outcome of the complaint.

Sincerely,

A handwritten signature in black ink that reads "Lori A. Bourbonais".

Lori A. Bourbonais
Bureau of Elections
Michigan Department of State

c: Robert Taylor

December 19, 2013

2014 JAN -2 PM 2:41

Bureau of Elections
Richard H. Austin Building
1st Floor
430 West Allegan Street
Lansing, MI 48918

Re: Rebuttal Statement

Ms. Bourbonais:

I have received Mr. Telgenhof's response and I am sending you this rebuttal statement. Mr. Telgenhof states that he has reported each and every contribution made to his committee. I am not in a position to verify that at this time but I simply take issue in HOW those contributions were reported. Mr. Telgenhof simply didn't follow the rules or the law when he submitted his reports.

Regarding paragraph 1 of Mr. Telgenhof's letter, Mr. Telgenhof did not use the proper forms pursuant to the law. Mr. Telgenhof does not take issue that he received three contributions during the Late Contribution Report time frame. He simply did not file a Late Contribution Report. It does not matter that he listed these contributions on the next report, the law is clear that he must file a Late Contribution Report when a candidate receives a contribution of \$500 or more during the Late Contribution Reporting period. I am requesting that he be fined pursuant to the statute (\$1,500 total) for not filing these three forms and that he also be required to file these forms.

Regarding the second paragraph, Mr. Telgenhof admits that there are addresses that were reported that are not correct. He simply states that "If we were given business addresses for people who were self-employed, we reported those." That is not what the law requires and it is his duty to see that the law is complied with. I am asking that you require Mr. Telgenhof to submit correct filings. He can start with correcting the items that I have noted and correct any other errors.

Regarding paragraph three, it appears that Mr. Telgenhof and I have differing opinions as to what is a fundraiser. Mr. Telgenhof calls them a "meet and greet" and believes that they are exempt from having to file the fundraising forms. The definition of a fundraiser is "an event such as a dinner, reception, testimonial, rally, auction or similar affair through which contributions are solicited or received by purchase of a ticket, payment of an attendance fee, making a donation, or purchase of goods or services." Mr. Telgenhof states that these "meet and greet" functions are not a fundraiser because a person did not have to buy a ticket. If you follow the logic of Mr. Telgenhof, one could rent a hall (or get a hall donated like on Beaver Island), provide food and beverages, ask the persons attending to support him and contribute to his campaign and this is not a fundraiser because it is called a "meet and greet." Mr. Telgenhof's own e-mail to his first "meet and greet" asks for any support they could give. Isn't this a "rally where contributions are solicited"?

I am asking that Mr. Telgenhof fill out the proper forms for having three fundraisers. I believe they are a clear violation of the law and rules. The reason that I am requesting that Mr. Telgenhof fill out the necessary forms and reports properly is that elections and campaigns should be transparent. If a person were to go to the County Clerk's office and view his documents, they are not complete or accurate. They need to be complete and accurate.

In closing, Mr. Telgenhof doesn't dispute that he failed to file three late contribution reports for the three contributions he received during the late contribution report period. The fine for this failure is \$1,500.00. Mr. Telgenhof is the candidate/treasurer and an attorney. Ignorance of the law is no excuse. I am asking that you impose this fine and require Mr. Telgenhof to file these Late Contribution Reports, the Fundraiser Reports and to correct any other address or mathematical errors in his reports.

Sincerely,

Robert Taylor
2594 Eagle Island Road
Boyne City, MI 49712

Home 231-582-7460
Cell 231-282-1158



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

April 1, 2014

Allen Telgenhof
301 State Street
Charlevoix, Michigan 49720

Dear Mr. Telgenhof:

The Department of State (Department) has concluded its investigation of the complaint filed by Robert Taylor against you, which alleged that you violated the Michigan Campaign Finance Act (MCFA or Act), 1976 PA 388, MCL 169.201 *et seq.* This letter concerns the disposition of Mr. Taylor's complaint, which was filed on November 4, 2013. You filed an answer to the complaint on November 25, 2013. Mr. Taylor filed a rebuttal statement with the Department on January 2, 2014.

The MCFA requires a candidate or treasurer of a committee to file complete and accurate campaign finance statements and reports. MCL 169.233. A person who knowingly files an incomplete or inaccurate statement may be subject to a civil fine of up to \$1,000.00. MCL 169.233(10). Additionally, a candidate, treasurer, or record-keeper who "knowingly omits or underreports individual contributions or individual expenditures . . . is subject to a civil fine of not more than \$1,000.00 or the amount of the contributions and expenditures omitted or underreported, whichever is greater." MCL 169.233(11).

The Act further requires the reporting of a late contribution within 48 hours of its receipt. MCL 169.232(1).

The Act also provides that if Department determines there may be "reason to believe that a violation of this act has occurred[.]" the Department is required by law to "endeavor to correct the violation or prevent a further violation by using informal methods." MCL 169.215(10).

Mr. Taylor alleged that you failed to list required business addresses and cumulative totals for some contributors, failed to disclose certain contributions and expenditures related to fundraising events, and failed to file certain late contribution reports. Mr. Taylor provided copies of your 2012 Pre- and Post-Primary campaign statements, Statement of Organization, campaign finance compliance affidavit; a list of contributions without addresses or cumulative totals; an email and forum posting announcing meet and greet events; and a list of late contributions totaling \$1,500.00.

Mr. Taylor alleged that you failed to include a business addresses or cumulative totals for some contributors as required by MCL 169.226(1)(e). Mr. Taylor provided copies of your 2013 Pre-Primary and 2013 Post-Primary campaign statements in support of his allegations. You stated that you did not provide business addresses for those contributors who "described themselves as

self-employed, retired, homemakers or housewives.” While a business address is not necessary for those contributors who are retired, homemakers, or housewives, a business address must be included for self-employed contributors of more than \$100.00 (cumulative for the election cycle) who do not work from home (a dentist may be one example). MCL 169.226. Additionally, the MCFA requires a campaign statement to list cumulative totals for contributors who give more than one contribution (direct or in-kind or both) in an election cycle. *Id.*

Please file an amended 2012 Pre-Primary campaign finance statement and an amended 2012 Post-Primary campaign finance statement with the Charlevoix County Clerk and provide proof of these filings to the Department by April 18, 2014. These statements must reflect business addresses for all self-employed contributors who work outside of their home, and cumulative totals for Vicki Voisin and Steven Sawyer and any other person who made more than one direct or in-kind contribution, or both. As the filing official, the Charlevoix County clerk will review these statements for completeness and accuracy. Any further questions regarding these statements should be directed to the County Clerk.

Mr. Taylor further alleged that you failed to disclose certain contributions and expenditures related to two “fund raising” events. Mr. Taylor provided copy of an email and a message board posting in support of this allegation. You stated in your answer that you did hold two “meet-and-greets[,]” but no fundraisers. The evidence supplied by Mr. Taylor refers to these events as “meet and greets.” The Act defines a fund raising event as “a dinner, reception, testimonial, rally, auction, or similar affair through which contributions are solicited or received by purchase of a ticket, payment of an attendance fee, making a donation, or purchase of goods or services.” MCL 169.207(4). According to your answer, “there was no charge for tickets, etc.” and all costs associated with the “meet and greets” were disclosed on your reports. The Department finds that there is insufficient evidence to show that any funds were raised at these events and this portion of Mr. Taylor’s complaint is dismissed.

Finally, Mr. Taylor alleged that you failed to file a late contribution report for July 25, 2012. A review of your 2012 Post-Primary report indicates that you received three contributions of \$500.00 each on July 25, 2012. A late contribution to a candidate committee means “contributions from the same contributor with a cumulative total of \$500.00 or more received after the closing date of the last campaign statement required to be filed before an election.” MCL 169.232(7). You received three contributions of \$500.00 each on July 25, 2012, which was after the closing date for your 2012 Pre-Primary campaign statement and before the 2012 primary election. The Department has determined that you were required to file one late contribution report for that date, listing all three of those contributions.

Please file a late contribution report for July 25, 2012 listing those three contributions with the Charlevoix County Clerk, pay a late filing fee of \$1,500.00 to the Charlevoix County Clerk, and provide proof of filing and payment to the Department by April 18, 2014. The late filing fee for failing to file a late contribution report is either the amount of the undisclosed contributions or \$2,000.00, whichever is less. MCL 169.232(4).

Having found these violations, the Department must now “endeavor to correct the violation or prevent a further violation by using informal methods.” MCL 169.215(10). The Department offers to resolve Mr. Taylor’s complaint against you through execution of the enclosed conciliation agreement, which requires that you file a late contribution report and pay the late

Allen Telgenhof

April 1, 2014

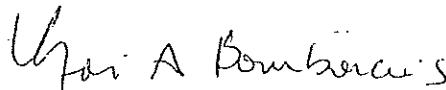
Page 3

filing fee of \$1,500.00 to the Charlevoix County Clerk, and file an amended 2012 Pre-Primary campaign statement and an amended 2012 Post-Primary campaign statement to correct your errors and omissions in regards to cumulative totals and business addresses.

If you are inclined to execute the conciliation agreement, please return the original signed document to this office on or before April 18, 2014, along with proof of filing of your late contribution report, amended 2012 Pre-Primary campaign statement and amended 2012 Post-Primary campaign statement with the Charlevoix County Clerk, and proof of payment of \$1,500.00 to the Charlevoix County Clerk.

Please be advised that if the Department is unable to resolve this complaint informally, it is required by MCL 169.215(10)-(11) to commence an administrative hearing to enforce the civil penalties provided by law. "If after a hearing the secretary of state determines that a violation of this act has occurred, the secretary of state may issue an order requiring the person to pay a civil fine equal to triple the amount of the improper contribution or expenditure plus not more than \$1,000.00 for each violation." MCL 169.215(11).

Sincerely,



Lori A. Bourbonais
Bureau of Elections
Michigan Department of State

Enclosure



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

In the Matter of:

Allen Telgenhof
301 State Street
Charlevoix, Michigan 49720

Committee Id. No. 22144

CONCILIATION AGREEMENT

Pursuant MCL §169.215(10) of the Michigan Campaign Finance Act (the Act), MCL §169.201 *et seq.*, the Secretary of State and Allen Telgenhof (Respondent) hereby enter into a conciliation agreement with respect to certain acts, omissions, methods, or practices prohibited by the Act.

The Secretary of State alleges that there may be reason to believe that the Respondent violated MCL §169.232(1) by failing to report late contributions within 48 hours after receipt. There may also be reason to believe that the Respondent violated MCL §169.233(10) by filing an incomplete 2012 Pre-Primary campaign statement and an incomplete 2012 Post-Primary campaign statement.

Therefore, the Respondent, without admitting any issue of law or fact, except as stated herein, hereby voluntarily enters into this conciliation agreement and assures the Secretary of State that he will comply with the Act and the Rules promulgated to implement the Act.

By executing this conciliation agreement, the Respondent certifies that he has:

1. Filed with the Charlevoix County Clerk a late contribution report covering July 25, 2012 and amended 2012 Pre- and Post-Primary campaign statements which accurately reflect business addresses for all contributors of more than \$100.00 and cumulative totals where necessary.
2. Agreed to pay a fee of \$1,500.00 to the Charlevoix County Clerk under the following terms:
 - a. \$500.00 on execution of this agreement,
 - b. \$500.00 30 days after execution of this agreement,
 - c. \$500.00 60 days after execution of this agreement.
3. Provided proof of filing of the late contribution report and amended 2012 Pre- and Post-Primary reports.

Respondent shall provide proof of payment to the Secretary of State for each \$500.00 installment payment made to the Charlevoix County Clerk for late-filing fees within 10 days of each payment.

The Secretary of State and the Respondent further agree that this agreement is in effect and enforceable for four years from the date it is signed by the Secretary of State or her duly authorized representative.

The Secretary of State and the Respondent further agree that this agreement, unless violated, shall constitute a complete bar to any further action by the Secretary of State with respect to the alleged violation that resulted in the execution of this agreement.

The Secretary of State and the Respondent further agree that the complaint and investigation that resulted in this agreement are disposed of and will not be the basis for further proceedings, except pursuant to this agreement.


The Secretary of State and the Respondent further agree that this agreement will not prevent the Secretary of State from taking action for violations of this agreement.

The Secretary of State and the Respondent further agree that the Respondent's performance under this agreement shall be given due consideration in any subsequent proceedings.

The Secretary of State and the Respondent further agree that this agreement, when signed, shall become a part of the permanent public records of the Department of State.

The Secretary of State and the Respondent finally agree that the signatories below are authorized to enter into and bind the parties to this agreement, and have done so by signing this agreement on the date below.

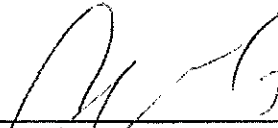
**RUTH JOHNSON
SECRETARY OF STATE**



Christopher M. Thomas, Director
Bureau of Elections

Date: 5-1-14

RESPONDENT



Allen Telgenhof

Date: 5-1-14