



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 77617</p> <p>2. Committee Name Committee to Elect Greg Stewart</p> <p>5. Committee's Mailing Address 7350 Kenilworth Lambertville, Michigan 48144-9459</p> <p>Area Code and Phone <u>(734) 856-4105</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></p> <p>7. Treasurer's Business Address Marti A. Stewart 7350 Kenilworth Lambertville, Michigan 48144-9459</p> <p>Area Code and Phone <u>(734) 856-4105</u></p>		<p>3. This Statement covers From: <u>08/28/12</u> to <u>10/21/12</u></p> <p>4. Candidate Last Name Stewart First Name Greg M.I. W.</p> <p>4a. Office Sought Including District # or Community Served (If applicable) Bedford Township Supervisor</p> <p>4b. County of Residence Monroe</p> <p>6. Treasurer's Name & Residential Address Marti A. Stewart 7350 Kenilworth Lambertville, Michigan 48144-9459</p> <p>Area Code & Phone <u>(734) 856-4105</u></p> <p>8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) Marti A. Stewart 7350 Kenilworth Lambertville, Michigan 48144-9459</p> <p>Area Code and Phone <u>(734) 856-4105</u></p>																					
<p>9. TYPE OF STATEMENT</p> <p>9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <table style="width:100%;"><tr><td><input type="checkbox"/> Primary</td><td><input checked="" type="checkbox"/> General</td></tr><tr><td><input type="checkbox"/> Convention</td><td><input type="checkbox"/> School</td></tr><tr><td><input type="checkbox"/> Special</td><td><input type="checkbox"/> Caucus</td></tr></table> <p>Date of Election, Convention or Caucus <u>11/06/12</u></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														
<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>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><small>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.</small></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> <table style="width:100%;"><tr><td style="width:40%;">Current Treasurer or Designated Record keeper</td><td style="width:30%;">Marti A. Stewart</td><td style="width:10%;">/</td><td style="width:20%;">Signature</td><td style="width:10%;">Date</td></tr><tr><td></td><td>Type or Print Name</td><td></td><td></td><td></td></tr><tr><td>Candidate</td><td>Greg W. Stewart</td><td>/</td><td>Signature</td><td>Date</td></tr><tr><td></td><td>Type or Print Name</td><td></td><td></td><td></td></tr></table>				Current Treasurer or Designated Record keeper	Marti A. Stewart	/	Signature	Date		Type or Print Name				Candidate	Greg W. Stewart	/	Signature	Date		Type or Print Name			
Current Treasurer or Designated Record keeper	Marti A. Stewart	/	Signature	Date																			
	Type or Print Name																						
Candidate	Greg W. Stewart	/	Signature	Date																			
	Type or Print Name																						



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77617
2. Committee Name Committee to Elect Greg Stewart

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>09/10/12</u> Name & Address: Carol H. Frederick 3254 Deer Creek Drive Lambertville, Michigan 48144		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Housewife</u> 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>09/22/12</u> Name & Address: James A. Ingmire 3136 Bruce Gardens Circle Franklin, TN 37064		\$ <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>09/10/12</u> Name & Address: Edward Grabowski 7366 Kenilworth Lambertville, Michigan 48144		\$ <u>200.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> 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>09/22/12</u> Name & Address: Richard J. MacAdams 7066 Edinburgh Lambertville, Michigan 48144		\$ <u>25.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> 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 375.00

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 77617
2. Committee Name Committee to Elect Greg Stewart

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>09/18/12</u> Name & Address: Greg W. Stewart 7350 Kenilworth Lambertville, Michigan 48144		\$ <u>2000.00</u>	\$ <u>4144.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>City Administrator</u> Employer <u>City of Luna Pier, Michigan</u> Business Address <u>4657 Buckeye Street Luna Pier, Michigan 48157</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>10/06/12</u> Name & Address: John and Linda Luchansky 7163 Glenmore Lambertville, Michigan 48144		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Lawyer</u> Employer <u>U.S. Armed Forces</u> 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>10/06/12</u> Name & Address: Robert Cook 3899 Woodhaven Lambertville, Michigan 48144		\$ <u>200.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> 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>10/15/12</u> Name & Address: Philip LaVoy 9044 Lawrence Dr. Temperance, Michigan 48144		\$ <u>40.00</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

2340.00

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

2745.00

Enter this total on
line 3a of Summary
Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 77617
2. Committee Name Committee to Elect Greg Stewart

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Monroe Evening News Address 20 West First Street Monroe Michigan 48162 <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertisement</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/04/12</u> Date	\$ <u>93.44</u>
Expenditure #2 Name Bedford Press Address 3363 Hemmingway Lane Lambertville, Michigan 48144 <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertisement</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/08/12</u> Date	\$ <u>190.00</u>
Expenditure #3 Name HELP Printers Address 9673 Lewis Ave. Temperance, Michigan 48182 <input type="checkbox"/> Fund Raiser	Purpose: <u>Election Cards</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/19/12</u> Date	\$ <u>493.10</u>
Expenditure #4 Name Bedford Press Address 3363 Hemmingway Lane Lambertville, Michigan 48144 <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertisement</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/20/12</u> Date	\$ <u>235.00</u>
Expenditure #5 Name Mail Works II Address 5272 Tractor Toledo, Ohio 43612 <input type="checkbox"/> Fund Raiser	Purpose: <u>POSTAGE MAILING</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/01/12</u> Date	\$ <u>470.87</u>

Subtotal this page **\$1,482.41**

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 77617
2. Committee Name Committee to Elect Greg Stewart

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Bedford Office Source</u> Address <u>3600 W. Sterns Road</u> <u>Lambertville, Michigan 48144</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>10/06/12</u> Date	\$ <u>355.10</u>
Expenditure #2 Name <u>Bedford Press</u> Address <u>3363 Hemmingway</u> <u>Lambertville, Michigan 48144</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertisement</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/06/12</u> Date	\$ <u>235.00</u>
Expenditure #3 Name <u>Bedford Township Republican Club</u> Address <input type="checkbox"/> Fund Raiser	Purpose: <u>Get out the vote</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/08/12</u> Date	\$ <u>100.00</u>
Expenditure #4 Name <u>MONROE Evening News</u> Address <u>20 W. FIRST STREET</u> <u>MONROE MI 48162</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PRINT AD</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/15/2012</u> Date	\$ <u>342.80</u>
Expenditure #5 Name <u>MONROE BANK TRUST</u> Address <u>102 E. FRONT STREET</u> <u>MONROE MI 48161</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>CHECKS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/15/12</u> Date	\$ <u>5.00</u>

Subtotal this page 1037.90

Grand Total of all Schedules 1B
(Complete on last page of Schedule) 2520.31

Enter this total
on line 8a of
Summary Page



ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK

1. Committee I. D. Number 77617

2. Committee Name Committee to Elect Greg Stewart

CANDIDATE COMMITTEE

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 <u>all</u> 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? <input type="checkbox"/> Yes Name & Address: Gene and Linda Stock 9289 Crabb Road Temperance, MI 48182 If over \$100.00 cumulative, please provide: Occupation: <u>Sporting Goods</u> Employer Name & Business Address: Gene and Linda Stock 9289 Crabb Road Temperance, MI 48182 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>T-Shirts and coolies</u> 5. Date Of Receipt: <u>10/06/12</u> 6. Vendor Name & Address: Stock Sports Inc 9289 Crabb Road Temperance, MI 48182	\$ <u>200.00</u> \$	
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: <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 type="checkbox"/> Goods or Services Purchased by Candidate or Others \$ \$ <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description 5. Date Of Receipt: 6. Vendor Name & Address:		
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: <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 type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description 5. Date Of Receipt: 6. Vendor Name & Address:		
Page Subtotal		\$200.00	
Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		\$200.00	

Enter this total
on line 6 of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**SUMMARY PAGE
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77617
2. Committee Name COMMITTEE TO ELECT GREG STEWART

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>2715.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>2715.00</u>	(18.) \$ <u>6429.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)			
(4.) \$			(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)			
(5.) \$			(20.) \$ <u>6429.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)			
(6.) \$		<u>200.00</u>	(21.) \$ <u>200.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)			
(7.) \$			(22.) \$
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>2420.31</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>100.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$		
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)			
(9.) \$			(23.) \$ <u>5916.01</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$		
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$		
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)			
(11.) \$			(24.) \$
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$		
b. Owed to the Committee (Schedule 1E)	(12b.) \$		
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>318.30</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>2715.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>3033.33</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>2520.31</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>513.02</u> *	



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: 10/22/12 to 11/26/12

1. Committee I.D. Number

77617

4. Candidate Last Name First Name M.I.

Stewart Greg W.

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

Bedford Township Supervisor

4b. County of Residence Monroe

5. Committee's Mailing Address

7350 Kenilworth Dr.
Lambertville, Michigan 48144-9459

6. Treasurer's Name & Residential Address

Marti A. Stewart
7350 Kenilworth
Lambertville, Michigan 48144-9459

Area Code and Phone (734) 856-4105

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 (734) 856-4105

7. Treasurer's Business Address

Marti A. Stewart
7350 Kenilworth
Lambertville, Michigan 48144-9459

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

Marti A. Stewart
7350 Kenilworth
Lambertville, Michigan 48144-9459

Area Code and Phone (734) 856-4105

Area Code and Phone (734) 856-4105

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

11/06/12

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 Marti A. Stewart

Designated Record keeper /
Type or Print Name

Signature

Date _____

Candidate Greg W. Stewart

/
Type or Print Name

Signature

Date _____



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77617
2. Committee Name Committee to Elect Greg Stewart

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>10/26/12</u> Name & Address: <u>John Cioroch</u> <u>6557 Black Diamond Ln.</u> <u>Lambertville, Mi. 48144</u>		\$ <u>50.00</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 #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/26/12</u> Name & Address: <u>Pete Zaums</u> <u>7051 Edinburgh Dr.</u> <u>Lambertville, Mi. 48144</u>		\$ <u>200.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Lawyer</u> Employer <u>Self employed</u> Business Address <u>8113 Secor Rd. Lambertville, Mi. 48144</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 # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/26/12</u> Name & Address: <u>Gail Hurley</u> <u>174 Marengo Dr.</u> <u>Temperance , Mi. 48144</u>		\$ <u>25.00</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>10/26/12</u> Name & Address: <u>Steve Lennex</u> <u>7261 Forest Valley</u> <u>Lambertville, Mi. 48144</u>		\$ <u>50.00</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	

Page Subtotal 325.00

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

Enter this total on
line 3a of Summary
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 77617
2. Committee Name Committee to Elect Greg Stewart

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)
<p>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/02/12</u></p> <p>Name & Address:</p> <p>Karen Fischer 9500 Summerfield Rd. Temperance, Mi. 48182</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>RN</u> Employer <u>ProMedica</u></p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>200.00</u>	\$ _____
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/23/12</u></p> <p>Name & Address:</p> <p>Greg Stewart 7350 Kenilworth Dr. Lambertville, Mi. 48144</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>Supervisor</u> Employer <u>Bedford Township</u></p> <p>Business Address <u>8100 Jackman Rd. Temperance, Mi. 48182</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ <u>428.48</u>	\$ <u>4572.48</u>
<p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____</p> <p>Name & Address: _____</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ _____	\$ _____
<p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____</p> <p>Name & Address: _____</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser</p>		\$ _____	\$ _____

Page Subtotal \$628.48

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

\$953.48

Enter this total on
line 3a of Summary
Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 77617
2. Committee Name Committee to Elect Greg Stewart

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Bedford Office Source Address 3600 W. Secor Rd. Lambertville, Mi. 48144 <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>10/26/12</u> Date	\$ <u>742.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name Bedford Press Address 3363 Hemmingway Lambertville, Mi. 48144 <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertisement</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/03/12</u> Date	\$ <u>325.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name HELP Printers Address 9673 Lewis Ave. Temperance, Mi. 48182 <input type="checkbox"/> Fund Raiser	Purpose: <u>Mailings</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/23/12</u> Date	\$ <u>395.70</u> Click Here for Memo Itemization Type
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	\$ _____ Click Here for Memo Itemization Type
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	\$ _____ Click Here for Memo Itemization Type

Subtotal this page **\$1,462.70**
Grand Total of all Schedules 1B
(Complete on last page of Schedule) **1462.70**
Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 77617

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Committee to Elect Greg Stewart

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>953.48</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>953.48</u>	(18.) \$ <u>\$7,382.48</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _____	(19.) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ _____	(20.) \$ <u>\$7,382.48</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ _____	(21.) \$ <u>\$200.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ _____	(22.) \$ _____
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$1,462.70</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ _____	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ _____	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>\$1,462.70</u>	(23.) \$ <u>\$7,378.71</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ _____	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ _____	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ _____	(24.) \$ _____
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ _____	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _____	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>\$513.02</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$953.48</u>	
	(15.) = \$ <u>\$14,466.50</u>	
15. SUBTOTAL Add lines 13 and 14		
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$1,462.70</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$3.80</u>	*