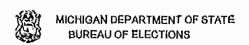


MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

CANDIDATE COMMITTEE

FOR OFFICIAL USE ONLY

COVER PAGE	•	•
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement of	overs From: 05/23/12 to 07/22/12
1. Committee).D. Number	4. Candidale Last	Name First Name M.I.
77657	Pirrone	Paul V
2. Committee Name	l	<u> </u>
Pirrone for Bedford Township Trustee	4b. County of Resid	Township Trustee
5. Committee's Mailing Address		ne & Residential Address
407 Oak Creek Dr	Thomas M. S	
Temperance MI 48182	407 Oak Cre	
Tomporance in 10102	Temperance	1 (.)
	Tomporanco	
Area Code and Phone (734) 224-0462	·	
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	e (734) 224-0462
7. Treasurer's Business Address		
	Designated Record	ord keeper's Name and Mailing Address (If the committee has a dikeeper)
407 Oak Creek Dr	,	,
Temperance MI 48182		
		<i>.+</i>
)	
(704) 204 0400		
Area Code and Phone (734) 224-0462	Area Code and Ph	one
9. TYPE OF STATEMENT		
9a. Pre-Election OR 9b. Pos	i-Election	вс Annual Statement (Coverage Year)
	l,	9d, Amendment to Campaign Statement (Complete Item 9a, 9b, 9c
Pre-Election or Post-Election Statement relates to:	1	or 9e to Indicate which Statement is being amended)
Primary Ger	neral	ge. Dissolution of Candidate Committee
Convention	1001	Effective Date of Dissolution
Special Cau	icus	
Special Later	[3	By checking this Item, ItWe certify that the committee has no assets or outstanding debts, including late filing fees. Further, ItWe request that if
Date of Election, Convention or Cattous	ļ!	the dissolution cannot be granted, that this be considered a request for
08/07/12	I	the Reporting Walver.
		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 re Schedules. Direct contributions, in-kind contributions, loans, expe	equired Campaign St	atements. The Campaign Statements must include all applicable
If any of the information listed in Items 2, 4, 5, 6, 7, or 8 has change	red since the informa	tion was shown on the committee's Statement of Organization, an
before the filing deadline of a required campaign statement,	inis Campaign Stater It <mark>at campaign state</mark> r	dion was shown on the committee's Statement of Organization, an ment. If a request for a Reporting Walver is not received on or ment cannot be waived.
10. Verification: NWe certify that all reasonable diligence was used mylour knowledge and belief the contents are true, accurate and c	in the preparation of	this statement and attached schedules (if any) and to the best of
Current Treasurer of Thomas M. Sexton	trons	5 Juston 7/22/12
Designated Record keeper	T	Dale
Type of Print Name	Signature	1
Cendidate Paul V. Pirrone	/ (Youl)) more
Type of Print Name	Signature	



1. Commillee I.D. Number

SUMMARY PAGE ANDIDATE COMMITTEE

2. Commillee Name Pirrone for Bedford Township Trustee

CANDIDATE COMMITTEE	2. Odistilition Hallio	
RECEIPTS	Column I This Period	Column ((Cumulative (his election cycle
3. Contributions		Sumulative this should by su
a. Itemized (Schedule 1A - Column 6)	(3в.) \$ 2,375.00	
b, Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$_\$2,375.00	(18.) \$\$2,375.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 30 + Line 4)	(5.) \$ \$2,375.00	(20.) \$ \$2,375.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$2,093.44	
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 + Lina 8b + Une 8c)	(9.) \$	(23.) \$ \$2,093.44
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10, Disbursements a, Ilemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unilemized (less than \$50.01 each - no Schedule) 11, TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(10b.) \$	
DEBTS AND OBLIGATIONS	(11.) \$	(24.) \$
12. Debte and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedula 1E)	(12b.) \$	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ \$0.00	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$ \$2,375.00	
(Line 5, Total Confributions & Other Receipts)	(15.) = \$ \$2,375.00	
16. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(16.) - \$ \$2,093.44	
(Add lines 9 and 11) 17, ENDING BALANCE	(17.) \$ \$281.58	•
(Sub(ract line 16 from line 15)		



SCHEDULE 1B CANDIDATE COMMITTEE

1. Commillee I. D. Number

_	1.7	65	$\overline{}$	

CANDIDATE COMMITTEE	2. Committee Name Pirrone for Bedford Township Trustee				
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	6. Date	6, Amount		
Expenditure #1					
Name Keystone Press Inc		06/28/12	\$ 351,10		
Address	Purpose: Letterhead and Envelopes	Date			
1801 Broadway PO Box 9183 Toledo OH 43697-9183	Click	Here for Memo	llemization Type		
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement				
Expanditure #2					
Name Clear Images	Occasion To a Oblida	05/25/12 Date	s <u>541.22</u>		
Address	Purpose: Campaign Tee Shirts	2410			
121 11th St	Click	Here for Memo	llemization Type		
Toledo OH 43604	Check box if this expenditure is payment of	,			
Fund Raiser	debt or obligation reported on previous statement				
Expenditure #3					
Name Clear Images	Compoint Vard Siese	05/25/12 Date	s <u>726.12</u>		
Address	Purpose: Campaign Yard Signs	Dale			
121 11th St Toledo OH 43604	Click !	Here for Memo I	iemizalion Type		
Fund Raiser	Chack box if this expenditure is payment of debt or obligation reported on previous statement				
Expenditure #4	Statement				
Name Mail Works		06/25/12	s 475.00		
Address	Purpose: Campaign Direct Mail	Dale	170.00		
5272 Tractor Rd. Suite J Toledo POH 43612	Click	Here for Memo	lemizallon Type		
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement				
Expenditure #5					
Name					
Address	Purpose:	Date	\$		
Fund Raiser	Click Check box if this expenditure is payment of debt or obligation reported on previous statement		llemization Type		
	Subt	ofal this page	\$2,093.44		
	Grand Total of all	Schedules 18	\$2.002.44		

(Complete on last page of Schedule)

\$2,093.44

Enter this total on line 8a of Summary Page

Page ____ of ___



MICHIGAN DEPARTMENT OF STATE **BUREAU OF ELECTIONS**

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

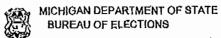
1. Committee I.D. Number	165	1	
1			_

Pirrone for Bedford Township Trustee CANDIDATE COMMITTEE 2. Commillee Name Enter contributor's name and address. If contribution is from an individual, enter last name, first name, **B.** Amount 7. Cumulativa for middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Election Cycle for Each Committee (PAC) Report all contributions regardless of amount. Contributor (Through date of receipt) 3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 05/31/12 Name & Address: Ironworkers Local # 55 1078 Atlantic Ave _s 500.00 500.00 Toledo OH 43609 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization ____ Employer_ Business Address Type of Contribution: Fund Raiser Direct: Loan from a person PAC Receipt? 4. Date of Receipt 06/15/12 3. Contribution #2 Name & Address Bollermakers Local #85 \$500.00 319 Glenwood Rd, PO Box 35 00،005 ۽ Rossford OH 43460 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Employer_ Occupation ._ Business Address _ Type of Contribution: | Direct Fund Ralser Loan from a person 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/07/12 Name & Address: Electricians Local #8 £ 500.00 <u>. 500,00</u> 807 Lime City Rd Rossford OH 43460 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Employer_ Occupation_ **Business Address** Direct Type of Contribution: / Loan from a person Fund Raiser 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt Name & Address Associated General Contractors .250.00 1845 Collingwood 250.00 Toledo OH 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation_ **Business Address** Type of Contribution: | Direct Loan from a person Fund Raiser Page Subtotet \$1,750.00 Grand Total of All Schedules 1A

Page 1 of 3

(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



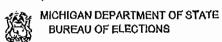
ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

. Committee I.D. Number	1 (0) 1	
-------------------------	---------	--

	Pirrone for Bedford Township Trustee
2. Commillee Name	Littorie ioi pedioid Township Trastee

Enter confributor'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)
Contribution # 1 PAC Receipt? Name & Address:	YES 4. Date of Rec	∞lpt 06/07/12		
Henry Gurtzweiler Inc 921 Galena St Toledo OH 43611			_{\$} 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please pro			Click Here for	or Memo Itemization
Occupation	_ Employer			ì
Business Address Type of Contribution: ✓ Direct	Loan from a person	Fund Raiser		
3. Contribulion #2 PAC Receipt?	YES 4. Dale of Rec	zeípt <u>06/07/12</u>		
Pearl Albert Green 8819 Jackman Rd Temperance MI 48182	•		_{\$} 50.00	ş 50.00
5. If over \$100.00 cumulative, piesse pro	Vide:		Click Here fo	or Memo Itemization
Occupation	Employer			
Business Address				
Type of Contribution: Direct	Losn from a person	Fund Raiser		
3. Contribution #3 PAC Receipt? Name & Address:	YES 4. Date of Re	celpt 06/07/12	· · · · · · · · · · · · · · · · · · ·	-
Mark Maliy 8920 Galloway Court Sylvania OH 43560			\$ 100.00	<u>\$ 100.00</u>
5. If over \$100.00 cumulative, please pro	vide:		Click Here to	r Memo Itemization
Occupation	_ Employer			
Business AddressDirect	Loan from a person	Fund Raiser		
3. Contribution #4 PAC Receipt? Name & Address	YES 4, Da(e of Re	eceipt 06/07/12		
John Mohr 3407 Walnut St Lambertville MI 48144			§75.00	_{\$} 75.00
If over \$100.00 cumulative, please pro	ovlde:		Click Here fo	or Memo Itemization
Occupation	Employer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
		Page Subtotal	\$425.00	
2		Grand Totel of All Schedules 1A mplete on last page of Schedule)	Enter this total on line 3a of Summan	
Page 2 of 3			Page.	,



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Commítlee I.D. Number / (D5 1

2. Committee Name Pirrone for Bedford Township Trustee

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 Efection Cycle for Each Contributor (Through date of receipt)	
3. Contribution # 1 Name & Address:	PAC Receipt7	YES 4. Date of Rec	2elpt 06/01/12			
Foundation Steel 5445 County Rd Waseon OH 435	# 19 667	uldo.		_{\$} 200.00	_{\$} 200.00	
5. If over \$100.00 cum	-			Click Here f	or Memo Itemization	
Occupation		_ Employer				
Business Address	7	<u> </u>	-			
Type of Conlibution:		Loan from a person	Fund Raiser			
3. Contribulio n # 2 Name & Address	PAC Receipt?	YES 4. Date of Rec	eipt	\$	\$	
5. If over \$100.00 came	ilative, please pro	vlde:		Click Here for	or Memo Itemization	
Occupation		Employer				
Business Address						
Type of Contribution:	Direct	Loan from a person	Fund Raiser			
3. Contribution # 3 Name & Address:	PAC Recelpt?	YES 4. Date of Re	celpt			
					· · · · · · · · · · · · · · · · · · ·	
5. if over \$100.00 cum	ilative, please pro	vide:		Click Here fo	or Memo Itemization	
					•	
•		Employer				
Business Address Type of Coniribution:	Dírect	Loan from a person	Fund Raiser			
9. Confribulion # 4 Name & Address	PAC Receipt?		eceipt	Access of the second		
				\$	- \$	
5. If over \$100.00 cum	ılative, pleace pro	vìde:		Click Hare fo	or Memo Itemization	
Occupation		Employer		Ollow Hele IC	A MOUTO HOURSHOU	
Business Address						
Type of Contribution:	Direct	Loan from a person	Fund Raiser			
			Page Subtotal	\$200.00		
			Grand Total of All Schedules 1A			
Page 3 of 3		(Go.	mplete on last page of Schedule)	Enter (his total on line 3s of Summar Page.	 y	



CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement covers From: 07/23/12 to 08/27/12		
1. Committee I.D. Number	4. Candidate Last Name First Name M.I.		
77657	Pirrone Paul V		
	4a. Office Sought Including District # or Community Served (If applicable)		
2. Committee Name	Bedford Townshiep Trustee		
Pirrone for Bedford Township Trustee	4b. County of Residence Monroe		
5. Committee's Mailing Address	6. Treasurer's Name & Residential Address		
407 Oak Creek Dr	Thomas M. Sexton		
Temperance, MI 48182	407 Oak Creek Dr.		
	Temperance, MI 48182		
Area Code and Phone (734) 224-0462			
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) 224-0462		
7. Treasurer's Business Address	8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)		
407 Oak Creek Dr	besignated record receptly		
Temperance, MI 48182			
Area Code and Phone (734) 224-0462	Area Code and Phone		
9. TYPE OF STATEMENT			
	Flection 9c. Annual Statement (Coverage Year)		
9a. Pre-Election OR 9b. ✓ Posi	-Election 9c. Annual Statement (Coverage Year)		
	9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c		
Pre-Election or Post-Election Statement relates to:	or 9e to indicate which Statement is being amended)		
√ Primary Ger	9e. Dissolution of Candidate Committee		
Y Filliary	Effective Date of Dissolution		
Convention Sch	nool		
Special Cau	By checking this item, IWe certify that the committee has no assets or		
Date of Election, Convention or Caucus	outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for		
08/07/12	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 re	equired Campaign Statements. The Campaign Statements must include all applicable nditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold.		
Schedules: Direct contributions, in-kind contributions, loans, expe If any of the information listed in items 2, 4, 5, 6, 7, or 8 has chang	ed since the information was shown on the committee's Statement of Organization, an		
amendment to the Statement of Organization should accompany to before the filing deadline of a required campaign statement, to	ed since the information was shown on the committee's Statement of Organization, an his Campaign Statement. If a request for a Reporting Waiver is not received on or hat campaign statement cannot be waived.		
	in the preparation of this statement and attached schedules (if any) and to the best of omplete		
Current Treasurer or Thomas M. Sexton -	The Talletter along		
Designated Record keeper	Streeting Date 9/6/12		
Type or Print Name	Signature		
Candidate Paul V. Pirrone	Jane Junery Dale 9/6/12		
Type or Print Name	Signature		

77567

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Pirrone for Bedford Townbship Trustee

CANDIDATE COMMITTEE		
RECEIPTS	Column ! This Period	Column II Cumulative this election cycle
3. Contributions		Community this decisin system
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>325.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$_\$325.00	(18.) \$ \$2,700.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$325.00	(20.) \$ \$2,700.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-JK, Column 7)	(6.) \$	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$435.91</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.) \$ _\$435.91	(23.) \$ \$2,529.35
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Uniternized (less than \$50.01 each - no Schedule)	(10b.) \$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(100.) \$	-
DEBTS AND OBLIGATIONS	(11.) \$	(24.) \$
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	(13.) \$ \$281.56	_
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$_\$325.00	
(Line 5, Total Contributions & Other Receipts)	(15.) = \$ \$606.56	
15. SUBTOTAL Add lines 13 and 14	(16.) - \$ \$435.91	
16. Amount expended during reporting period (Add lines 9 and 11)	6470 CE	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$170.65	·



ITEMIZED EXPENDITURES **SCHEDULE 1B CANDIDATE COMMITTEE**

1. Committee I. D. Number

77657

2. Committee Name Pirrone for Bedford Township Trustee

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name HELP Printers		07/13/12	\$ 162.40
Address	Purpose: Post Cards	Date	102.10
Address			
9673 Lewis Ave	Click H	lere for Memo	temization Type
Temperance MI 48182	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2	Colonian		
Name Rite Aid Pharmacy		08/21/12	.
Title Aid I Haimaey	The all Man Oamle	Date	\$ <u>5.33</u>
Address	Purpose: Thank You Cards	Duio	
2430 Glendale	Click H	lere for Memo	temization Type
Toledo OH 43614			,
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name See Attached Listing		08/03/12	4.47E.00
	Purpose: Passing Out Campaign Flyers	Date	\$ <u>175.00</u>
Address	Purpose: 1 dooring out comparignt tyors		
Per Attached	Memo	ltemization Bel	ow
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4	Statement		
Name Paul Pirrone		00107140	
Faul Fillotte		08/07/12	\$ 93.18
Address	Purpose: Mileage Reimbursement (168 Mi @ 55 /2 4/mile) Memo	Date	
402 Oak Creek Dr	(168 mi @ 554z 4/1111e)		
Temperance MI 48182	/ Memo	Itemization Bel	ow
_ `	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name			
		Data	\$
Address	Purpose:	Date	
	Click H	lere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
	Subto	tal this page	\$435.91
	Grand Total of all 5 (Complete on last page		\$435.91

Enter this total on line 8a of Summary Page

Itemized Expenditures Schedule 1B Attachment

Expenditure # 3 Detail Listing Committee ID # 77657

Kendall Wier \$20.00

7441 Tallgrass

Temperance MI 48182

Alexa Libstoff \$30.00

466 Oak Creed Dr

Temperance MI 8182

Ryan Libstoff \$30.00

466 Oak Creed Dr

Temperance MI 8182

Valarie Pirrone \$25.00

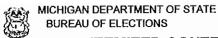
2500 Pinewood

Temperance MI 48182

Aaron Maison \$70.00

9654 W. Bancroft

Holland OH 43528

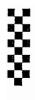


ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

2. Committee Name Pirrone for Bedford Township Trustee

<u> </u>	I	Contributor (Through date of receipt)		
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 08/06/12 Name & Address:				
Hicks Insurance 7355 Lewis Ave Temperance MI 48182	_{\$} 50.00	_{\$} 50.00		
5. If over \$100.00 cumulative, please provide:	Oliale I laws for	. Mana lianination		
Occupation Employer	Click Here to	r Memo Itemization		
Business Address				
Type of Contribution: ✓ Direct Loan from a person Fund Raiser				
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/18/12 Name & Address				
Daniel Bunce 1564 Pool St Toledo OH 43605	_{\$} 100.00	ş 100.00		
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization		
Occupation Employer				
Business Address				
Type of Contribution:				
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 08/06/12 Name & Address:	-			
Joshua Hughes 532 Robindale Ave Oregon OH 43616 5. If over \$100.00 cumulative, please provide:	\$ 75.00 Click Here for	\$ 75.00 Memo Itemization		
Occupation Employer				
Business Address				
Type of Contribution:				
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 08/06/12 Name & Address				
Matthew Szollosi 1660 Grand Bay Dr. Oregon OH 43616	_{\$} 100.00	_{\$} 100.00		
5. If over \$100.00 cumulative, please provide:	Click Horo for	Memo Itemization		
OccupationEmployer	Click Here for	wemo temization		
Business Address				
Type of Contribution: ✓ Direct Loan from a person Fund Raiser				
	\$325.00			
<u> </u>	\$325.00			
(Complete on last page of Schedule)	Enter this total on line 3a of Summary Page.	J		



County of Monroe County Clerk's Office 106 E. First Street Monroe, Michigan 48161 FAX # 734-240-7045

Fax Transmiss	ion Cover Sheet	
Date: 9-6	-2012	
To: Paul	Pirrone	·
Fax# <u>419</u> -	-593-0082	
From: Nan	a,	
# of pages:		·
Comment:	······································	
. '		
	3	
		- 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,

CONFIDENTIALITY NOTICE -

The information contained in this facsimile message is intended for the personal and confidential use of the designated recipient(s). If you are not the intended recipient or an individual responsible for delivering it to the intended recipient, you have received in document in error. If you have this communication in error, please notify us immediately be telephone at 734-240-7020.