



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: 2 17 12 to 7 22 12
Mo Day Year Mo Day Year

1. Committee I.D. Number 77822
2. Committee Name Committee to Elect
Walt Wilburn Supervisor

4. Candidate Last Name Wilburn First Name Walter M.I. C

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

4b. County of Residence Monroe.

5. Committee's Mailing Address
51 E. Erie Rd.
Temperance MI 48182
Area Code and Phone 419-392-6793

6. Treasurer's Name & Residential Address
Tammy Lamb
2167 Stimup Dr.
Temperance MI 48182
Area Code & Phone (734) 847-2203

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.

7. Treasurer's Business Address
2167 Stimup Dr.
Temperance MI 48182
Area Code and Phone (734) 847-2203

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

Meg Smith
8128 Summerfield Rd.
Lambertville MI 48144
Area Code and Phone (734) 856-5887

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
Month Day Year

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

Month Day Year

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 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 Tammy Lamb Date 7 23 12
Type or Print Name Signature Mo Day Year
Candidate Walter C. Wilburn Date 7 23 12
Type or Print Name Signature Mo Day Year



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 77822
2. Committee Name Committee to Elect
Wait Wilburn Supervisor

**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>\$4,880.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>\$4,880.00</u>	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$		(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>\$4,880.00</u>	(20.) \$
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.) \$	<u>\$3,568.39</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>\$3,568.39</u>	(23.) \$
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.) \$	<u>-0-</u>	(24.) \$
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>\$700.00</u>	
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>-0-</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>\$4,880.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>\$4,880.00</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>\$3,568.39</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>\$1,311.61</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77822
2. Committee Name Committee to Elect WAIT Wilburn
Supervisor

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 from committees regardless of amount.

3. Contribution #	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name: <u>WAIT Wilburn.</u> Address: <u>51 E. Erie Rd. Temperance, MI 48182</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Twp. Supervisor</u> Employer <u>Bedford Twp.</u> Business Address <u>8100 Jackman Rd. Temperance, MI 48182</u> Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<u>2/17/12</u>	<u>\$700.⁰⁰</u>	
3. Contribution #2 Name: <u>Mary Ann McBe</u> Address: <u>P.O. Box 103 Lambertville, MI 48144</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<u>4/11/12</u>	<u>\$100.⁰⁰</u>	
3. Contribution #3 Name: <u>William Decker</u> Address: <u>1951 W. Erie Rd. Temperance, MI 48182</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<u>4/11/12</u>	<u>\$100.⁰⁰</u>	
3. Contribution #4 Name: <u>John Dye</u> Address: <u>423 W. Erie Rd. Temperance MI 48182</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Ford Motor</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<u>4/11/12</u>	<u>\$230.⁰⁰</u>	

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

\$1,130.⁰⁰

Enter this total on
line 3 of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77822
2. Committee Name Comm. to Elect WAIT Wilburn
Supn

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 from committees 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>4/23/12</u> Name: <u>Sherrri Meyer</u> Address: <u>1053 Mapleway Dr. Temperance, MI 48182</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$30. ⁰⁰	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/23/12</u> Name: <u>Dale Zorn</u> Address: <u>7498 Ida East Rd., Ida, MI 48140</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$100. ⁰⁰	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/23/12</u> Name: <u>Richard Shuff</u> Address: <u>5244 Lynnhaven Dr., Sylvania, OH</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$20. ⁰⁰	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/23/12</u> Name: <u>Joyce Blanton</u> Address: <u>7705 Secor Rd., Lambertville, MI 48144</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$25. ⁰⁰	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		175. ⁰⁰	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77822
2. Committee Name Comm. to Elect Walt Wilburn Supr

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 from committees 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>4/23/12</u> Name: <u>Dr. Rick Szczygielski</u> Address: <u>1184 Birchwood Dr. Temperance, MI 48182</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$25.00	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/23/12</u> Name: <u>Barry, Mary Buschmann</u> Address: <u>3480 Shadywood Circle, Lambertville, MI 48144</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$50.00	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/23/12</u> Name: <u>Patricia Lyden</u> Address: <u>2740 Consecar Rd. Lambertville, MI 48144</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$100.00	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/23/12</u> Name: <u>Virginia Harrouk & Abraham Harrouk</u> Address: <u>2110 Anita Ave., Grosse Pointe, Woods, MI 48236</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>owner gas station</u> Employer <u>Self-employed</u> Business Address <u>Lewis Ave., Temperance, MI 48182</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$300.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		475.00	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 77822
2. Committee Name Comm. to Elect WAIT-Milburn Supr.

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 from committees 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>4/23/12</u> Name: <u>Anthony Brescol</u> Address: <u>1076 Washington Ave., Temperance, MI 48182</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$25. ⁰⁰	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>5/1/12</u> Name: <u>Lawrence O Dell</u> Address: <u>7264 Cedar Rd., Temperance, MI 48182</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$50. ⁰⁰	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/23/12</u> Name: <u>Thomas McKenzie</u> Address: <u>2220 Rauch Rd., Temperance, MI 48182</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$50. ⁰⁰	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/23/12</u> Name: <u>Paul Bourque & Maryann Bourque</u> Address: <u>8005 Gay Run Ct., Temperance, MI 48182</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$50. ⁰⁰	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		175. ⁰⁰	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 77822
2. Committee Name Comm to Elect Whit Wible
Supv.

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 from committees 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>4/23/12</u> Name: <u>Frank Arnold</u> Address: <u>726 E. Second St., Monroe, MI 48161</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$45. ⁰⁰	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/23/12</u> Name: <u>Cynthia McElvaine</u> Address: <u>8334 Galloway Dr. Lambertville, MI 48144</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$50. ⁰⁰	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name: <u>Florence Townsend</u> Address: <u>8094 Monroe Rd., Lambertville, MI 48144</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Townsend Carpet</u> Business Address <u>Monroe Rd., Lambertville, MI 48144</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$100. ⁰⁰	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/23/12</u> Name: <u>Brian Beverly</u> Address: <u>703 Mildred Ave. Jasperville, MI 48182</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Self-employed</u> Employer <u>Universal Concrete</u> Business Address <u>703 Mildred Ave. Jasperville MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$200. ⁰⁰	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		\$395.	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77822
2. Committee Name Comm. to Elect. WAIT Wilbur Sup.

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 from committees 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 Name: <u>Pearl Albert Green</u> Address: <u>8819 Jackman Rd., Temperance, MI 48182</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>4/23/12</u>	\$50	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES Name: <u>Norb Abel</u> Address: <u>8855 Secor Rd., Lambertville, MI 48144</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Self-employed</u> Business Address <u>owner Scholhouse Commons</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>4/23/12</u>	\$100.	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES Name: <u>Christine Courgo</u> Address: <u>7236 Hidden Valley Lambertville, MI 48144</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>4/23/12</u>	\$100.	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES Name: <u>Rolland, Susan Brown</u> Address: <u>8521 Crabbs Rd., Temperance, MI 48182</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Office Mgr.</u> Employer <u>Rawlins Hqs A/c.</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	4. Date of Receipt <u>5/8/12</u>	\$200.	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		\$450	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77822
2. Committee Name Comm to Elect WALT Wilburn
Supr.

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 from committees 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 Name: <u>Chris Reninus.</u> Address: <u>6946 Meadowview Lambertrille, MI 48144</u> 4. Date of Receipt <u>5/30/12</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	\$40		
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES Name: <u>Kent Cousino</u> Address: <u>8673 Mary Meadow Temperance, MI 48182</u> 4. Date of Receipt <u>5/30/12</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	\$50		
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES Name: <u>Tim Little</u> Address: <u>6948 Streamview Dr. Lambertrille, MI 48144</u> 4. Date of Receipt <u>5/30/12</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	\$100.		
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES Name: <u>Jeff Pauli</u> Address: <u>8339 Jam Ct., Temperance, MI 48182</u> 4. Date of Receipt <u>5/31/12</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	\$50		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		240. ⁰⁰	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 77822
2. Committee Name Comm to Elect Whit Wilburn Supr

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 from committees 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>5/31/12</u> Name: <u>Heath Velliguette</u> Address: <u>1034 N. Park Temperance MI 48182</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</p>		\$100	
<p>3. Contribution # 2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>6/25/12</u> Name: <u>Tammy Lamb</u> Address: <u>2167 Stirrup Dr. Temperance MI 48182</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</p>		\$100	
<p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/5/12</u> Name: <u>Donald Basye</u> Address: <u>8673 Mary Meadows Temperance MI 48182</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</p>		\$100	
<p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/9/12</u> Name: <u>Michael Hellen</u> Address: <u>2167 Stirrup Dr Temperance MI 48182</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</p>		\$100	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		\$400.00	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77822
2. Committee Name Comm to Elect WAIT Wilburn
Superior

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 from committees 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 Name: <u>Donald Basye</u> Address: <u>8673 Mary Meadows Temperance, MI 48182</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Disabled</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$100. ⁰⁰	\$200. ⁰⁰
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES Name: <u>William Pearson</u> Address: <u>3600 W. Sterns Rd Lambertville, MI 48144</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired from</u> Employer _____ Business Address <u>Leup</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$200. ⁰⁰	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES Name: <u>Cynthia McIlvain</u> Address: <u>8334 Callaway Dr. Lambertville, MI 48144</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		\$30. ⁰⁰	\$80
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES Name: <u>Liam Rybka</u> Address: <u>3258 Nina Lane Toledo, OH 43613</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		\$30. ⁰⁰	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		\$360. ⁰⁰	

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line 3 of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 77822
2. Committee Name Comm to Elect Walt W. Iburn
Superior

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 from committees 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>7/17/12</u> Name: <u>Shana Meyer</u> Address: <u>1053 Mapleway Dr., Temperance, MI 48182</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</p>		\$ 30. ⁰⁰	\$ 60. ⁰⁰
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/17/12</u> Name: <u>Lillian Hamache</u> Address: <u>11200 Summerfield Rd, Petersburg, MI 49270</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</p>		\$ 90. ⁰⁰	
<p>3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/17/12</u> Name: <u>Margaret Smith</u> Address: <u>8125 Summerfield Rd, Lambertville, MI</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</p>		\$ 30. ⁰⁰	
<p>3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/17/12</u> Name: <u>Gail Hurley</u> Address: <u>174 Marengo Dr Temperance, MI 48182</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</p>		\$ 60. ⁰⁰	
<p>Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)</p>		\$ 210. ⁰⁰	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77822
2. Committee Name Comm to Elect Walt Wilburn
Supervisor

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 from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Ex Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES Name: <u>Susan Carroll</u> Address: <u>7819 Towbridge Ct Sylvania, OH 43560</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	4. Date of Receipt <u>11/7/12</u>	\$30. ⁰⁰	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES Name: <u>Craig Lamb</u> Address: <u>2167 Stirrup Dr. Temperance, MI 48182</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	4. Date of Receipt <u>7/17/12</u>	\$100. ⁰⁰	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES Name: <u>Tom Townsend</u> Address: <u>8094 Monroe Rd., Lambertville, MI 48144</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	4. Date of Receipt <u>7/17/12</u>	\$70. ⁰⁰	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES Name: <u>Norb Abel</u> Address: <u>8855 Secor Rd., Lambertville, MI 48144</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Self-employed</u> Business Address <u>owner Schoolhouse Commons</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	4. Date of Receipt <u>11/7/12</u>	\$40. ⁰⁰	\$140. ⁰⁰
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		\$240. ⁰⁰	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77822

2. Committee Name Committee to Elect Matt Wilburn

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 from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for E: Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/17/12</u> Name: <u>Kandy Taulbee</u> Address: <u>8756 Secor Rd., Lambertrille, MI 48144</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		\$40. ⁰⁰	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/17/12</u> Name: <u>Karry & Diana Wilburn</u> Address: <u>8214 S. Stony Creek Carleton, MI 48117</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		\$60. ⁰⁰	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/17/12</u> Name: <u>Jim & Corrynn Lorentz</u> Address: <u>3536 Lakeshore Dr. Newport, MI 48166</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		\$60. ⁰⁰	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/17/12</u> Name: <u>Doreen Wilburn</u> Address: <u>14 Cail Dr., Monroe, MI 48162</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		\$30. ⁰⁰	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		\$190. ⁰⁰	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 77822
2. Committee Name Comm to Elect Whit Wilburn
Superior

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 from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Ex Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/17/12</u> Name: <u>Juanita Wilburn</u> Address: <u>8435 Deaso Newport, MI 48166</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		\$30. ⁰⁰	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/17/12</u> Name: <u>Debbie Revard</u> Address: <u>14 Cail Dr Monroe, MI 48162</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		\$30. ⁰⁰	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/17/12</u> Name: <u>Lindsey Longmuir</u> Address: <u>515 Toll St. Monroe, MI 48162</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		\$40. ⁰⁰	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/17/12</u> Name: <u>Laura Longmuir</u> Address: <u>515 Toll St., Monroe, MI 48162</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		\$30. ⁰⁰	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		130. ⁰⁰	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77822
2. Committee Name Comm to Elect Walt Wilbur
Way Supervisor

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 from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for E: Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/17/12</u> Name: <u>Charlie Bil</u> Address: <u>2527 E. Labo Rd., Newport, MI 48166</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		\$60. ⁰⁰	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/19/12</u> Name: <u>Ramy EIDI</u> Address: <u>4662 Crosstick Ct. Sylvaia, OH 43560</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Self employed</u> Employer <u>Commercial REAL Estate</u> Business Address <u>Same as Above</u> <u>Developer.</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$250. ⁰⁰	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name: _____ Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input 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 _____ Name: _____ Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		\$310. ⁰⁰ 4880.00	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 77822
2. Committee Name Comm to Elect Walt Wilburn Superior

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1 Name <u>Bedford Press</u> Address <u>3363 Hemmingway</u> <u>Lambertville, MI 48144</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PA</u> <u>Advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/22/12</u>	<u>\$29.95</u>
Expenditure #2 Name <u>Hos Sports.</u> Address <u>8952 Lewis Ave.</u> <u>Temperance, MI 48182</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PA</u> <u>T-Shirts</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/22/12</u>	<u>\$71.55</u>
Expenditure #3 Name <u>Postmaster</u> Address <u>Lambertville, MI 48144</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>MA</u> <u>stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/28/12</u>	<u>\$90.⁰⁰</u>
Expenditure #4 Name <u>Bedford Twp Hall</u> Address <u>8100 Jackman Rd.</u> <u>Temperance</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>RE</u> <u>Hall Rental</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/19/12</u>	<u>\$100.⁰⁰</u>
Expenditure #5 Name <u>Krogen</u> Address <u>Lambertville, MI</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Gift Card - D.J.</u> <u>ET</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/19/12</u>	<u>\$60.</u>

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

351.50

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 77822
2. Committee Name Comm to Elect Walt Wilkins Super.

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1 Name <u>Kroger</u> Address <u>Lambertville, MI 48144</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>FE</u> <u>cake</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/19/12</u>	<u>\$19.98</u>
Expenditure #2 Name <u>H&S Sports</u> Address <u>8952 Lewis</u> <u>Temperance, MI 48182</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PA</u> <u>T-Shirts</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/18/12</u>	<u>\$115.54</u>
Expenditure #3 Name <u>BBA</u> Address <u>8204 Secor Rd</u> <u>Lambertville, MI 48144</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PA</u> <u>Advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/18/12</u>	<u>\$60.⁰⁰</u>
Expenditure #4 Name <u>H&S Sports</u> Address <u>8952 Lewis Ave</u> <u>Temperance, MI 48182</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PA</u> <u>T-Shirts</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/23/12</u>	<u>\$23.85</u>
Expenditure #5 Name <u>Bedford Now</u> Address <u>8335 Monroe Rd</u> <u>Lambertville, MI 48144</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PA</u> <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>	<u>\$94.80</u>

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

314.17

Enter this total
on line 8a of
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 77822
2. Committee Name Committee to Elect Walt Wilkins Super

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1 Name <u>H & S Sports</u> Address <u>8952 Lewis Ave.</u> <u>Indianapolis, IN 46182</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PA</u> <u>T-Shirts</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/6/12</u>	<u>38.16</u>
Expenditure #2 Name <u>Bedford Now</u> Address <u>8335 Monroe Rd.</u> <u>Lambertville, MI 48144</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PA</u> <u>Advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/18/12</u>	<u>94.80</u>
Expenditure #3 Name <u>H & S Sports</u> Address <u>8952 Lewis Ave.</u> <u>Indianapolis, IN 46182</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PA</u> <u>T-Shirts</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/21/12</u>	<u>\$34.98</u>
Expenditure #4 Name <u>Bedford Press</u> Address <u>3363 Henning Way</u> <u>Lambertville, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PA</u> <u>Advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/21/12</u>	<u>\$539.00</u>
Expenditure #5 Name <u>Postmaster</u> Address <u>Lambertville MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>MA</u> <u>Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/21/12</u>	<u>552.00</u>

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

1258.94

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 77822

2. Committee Name Committee to Elect Wirt Wilbur-Super

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1 Name <u>Bedford Now</u> Address <u>8335 Monroe Rd</u> <u>Lambertville, MI 48144</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PA</u> <u>Advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/27/12</u>	<u>94.80</u>
Expenditure #2 Name <u>Bedford Press</u> Address <u>3363 Hemmingway</u> <u>Lambertville, MI 48144</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PA</u> <u>Advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/9/12</u>	<u>\$240.00</u>
Expenditure #3 Name <u>Bedford Now</u> Address <u>8335 Monroe Rd</u> <u>Lambertville, MI 48144</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PA</u> <u>Advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/9/12</u>	<u>\$189.60</u>
Expenditure #4 Name <u>Graphic Signs</u> Address <u>10931 Summerfield Rd</u> <u>Temperance, MI 48182</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PA</u> <u>Signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/16/12</u>	<u>\$1,099.22</u>
Expenditure #5 Name <u>Bedford Now</u> Address <u>8335 Monroe Rd</u> <u>Lambertville, MI 48144</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PA</u> <u>Advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/20/12</u>	<u>20.14</u>

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

1,643.7
\$3,568.39

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

77822

2. Committee Name

Committee to Elect Walt Wilburn
Superior

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 (Indicate type and you may assign an expenditure code) 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: Walt Wilburn 51 E. Erie Rd. Temperance, MI 48182	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred:</u> 6. <u>Original Amount of Debt:</u> \$	2,17,12 700. ⁰⁰ / / \$ / / \$ / / \$ / / \$	\$	\$ 700. ⁰⁰ <input type="checkbox"/> FORGIV
If bank loan, name of endorser or guarantor:		Amount Endorsed: \$		
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> 6. <u>Original Amount of Debt:</u> \$	/ / \$ / / \$ / / \$ / / \$	\$	<input type="checkbox"/> FORGIVE
If bank loan, name of endorser or guarantor:		Amount Endorsed: \$		
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> 6. <u>Original Amount of Debt:</u> \$	/ / \$ / / \$ / / \$ / / \$		<input type="checkbox"/> FORGIVE
If bank loan, name of endorser or guarantor:		Amount Endorsed: \$		

Page Subtotal (Outstanding debt)

\$ 700.⁰⁰

Grand Total of all Schedules 1E

\$ 700.⁰⁰

(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 Pa

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.

Page 1 of 1

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77822

2. Committee Name Committee to Elect Walt Wilbur
Superior

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held

4 21 12
Month Day Year

4. Number of Individuals Attending
or Participating (whichever is
greater)

35+

5. Type of Fund Raising Activity

Open House
Birthday Party

6. Address and Name (If any) of
place where the activity was held

Carr Park
Lewis Ave
Temperance, MI
☐ Private Residence

7. Total Contributions

\$1,800.⁰⁰

8. Other Receipts

9. Gross Receipts (Add lines 7 and 8)

\$1,800.⁰⁰

10. Total Cost of Event

179.⁹⁸

(Total Cost includes In-Kind Contributions
and All Expenditures Made For the Event)

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)

Contribution Split
(%)

Expenditure Split
(%)

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

Page 1 of 1

INSTRUCTIONS FOR SCHEDULE 1F, FUND RAISER



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: <u>7 23 12</u> to <u>8 27 12</u> <small>Mo Day Year Mo Day Year</small>	
1. Committee I.D. Number <u>77822</u> 2. Committee Name <u>Committee to Elect</u> <u>Walt Wilburn Supervisor</u>	4. Candidate Last Name <u>Wilburn</u> First Name <u>WALTER</u> M.I. <u>C</u> 4a. Office Sought Including District # or Community Served (If applicable) <u>Bedford Sup. Supervisor</u> 4b. County of Residence <u>Monroe</u>
5. Committee's Mailing Address <u>51 E. Erie Rd</u> <u>Temperance MI 48182</u> Area Code and Phone <u>419-392-6793</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>	6. Treasurer's Name & Residential Address <u>Tammy Lamb</u> <u>2167 Shumup Dr</u> <u>Temperance, MI 48182</u> Area Code & Phone <u>(734) 847-2203</u>
7. Treasurer's Business Address <u>2167 Shumup Dr</u> <u>Temperance, MI 48182</u> Area Code and Phone <u>(734) 847-2203</u>	8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) <u>Doug Smith</u> <u>8125 Summerfield Rd.</u> <u>Lambertville, MI 48144</u> Area Code and Phone <u>(734) 856-5887</u>

REC'D & FILED
 12 AUG 29 AM 3:17
 COUNTY CLERK
 MONROE, MICH.

9. TYPE OF STATEMENT 9a. <input type="checkbox"/> Pre-Election OR 9b. <input checked="" type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Convention <input type="checkbox"/> Special </div> <div style="width: 45%;"> <input type="checkbox"/> General <input type="checkbox"/> School <input type="checkbox"/> Caucus </div> </div> <div style="margin-top: 10px;"> Date of Election, Convention or Caucus <u>8 7 12</u> <small>Month Day Year</small> </div>	9c. <input type="checkbox"/> Annual Statement (_____ Coverage Year) 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended) 9e. <input type="checkbox"/> Dissolution of Candidate Committee <div style="margin-top: 20px;"> Effective Date of Dissolution _____ <small>Month Day Year</small> </div> <p style="font-size: 0.8em;">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 the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.</p> <p style="font-size: 0.8em;">Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.</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.**

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>Tammy Lamb</u> <small>Type or Print Name</small>	Signature <u>[Signature]</u> Date <u>8 28 12</u> <small>Mo Day Year</small>
Candidate <u>Walt Wilburn</u> <small>Type or Print Name</small>	Signature <u>[Signature]</u> Date <u>8 28 12</u> <small>Mo Day Year</small>



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 77822
2. Committee Name Committee to Elect Walt
Wilburn Supervisor

**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>1,550.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>1,550.00</u>	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$		(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>1,550.00</u>	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>\$400.00</u>	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$		(22.) \$
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>184.44</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>184.44</u>	(23.) \$
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>1,311.61</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>1,550.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>2,861.61</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>305.19</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>2,556.42</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 77822
2. Committee Name Committee to Elect Walt Wilbur
Supervisor

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 from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Ex Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u> Name: <u>April Urbanski</u> Address: <u>8236 Lewis Ave. Temperance, MI 48182</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$50. ⁰⁰	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u> Name: <u>John Bates</u> Address: <u>9300 Secor Rd., Lambertville, MI 48144</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$100. ⁰⁰	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u> Name: <u>Shayla Pitzer</u> Address: <u>7248 Crabb Rd., Temperance 48182</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$25. ⁰⁰	
3. Contribution #4 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u> Name: <u>Mannik & Smith Group</u> Address: <u>2345 Haggerty Rd South Canton, MI 48188</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$100	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		\$275. ⁰⁰	

Enter this total on
line 3 of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77822
2. Committee Name Committee to Elect Walt Wilburn
Superior

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 from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Ex Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u> Name: <u>Rodney & Kristen Velez</u> Address: <u>3279 E. Greystone Pl. Midland, MI 48642</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$150. ⁰⁰	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/25/12</u> Name: <u>Steve & Susan Heer</u> Address: <u>3339 Hemmingway Ln. Lambertville, MI</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$150. ⁰⁰	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/26/12</u> Name: <u>David & Jessica Thompson</u> Address: <u>1671 Spruce Ct., Temperance, MI</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		\$200. ⁰⁰	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/26/12</u> Name: <u>John & Joanne Dye</u> Address: <u>423 W. Erie Rd., Temperance, MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>retired</u> Employer <u>Ford Motor Company</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$150. ⁰⁰	\$380. ⁰⁰
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		\$650. ⁰⁰	

Enter this total on
line 3 of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77822
2. Committee Name Committee to Elect Walt Wilburn
Supervisor

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 from committees 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 Name: <u>David & Dorothy Pienta</u> Address: <u>7162 Twin Canyon Rd. Lambertville, MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Self-employed</u> Employer <u>Automatic Handling</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$500.00	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES Name: <u>Kyle Oakley</u> Address: <u>1600-G Parkct. Monroe, MI 48162</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		\$25.00	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES Name: <u>Joseph Costello Jr</u> Address: <u>3950 E. Dunbar Rd, Monroe, MI 48161</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		\$100.00	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES Name: _____ Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		<u>\$625.00</u> <u>\$1550.00</u>	

Enter this total on
line 3 of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK
CANDIDATE COMMITTEE

1. Committee I. D. Number 77832
2. Committee Name Committee to Elect Walt Wilburn Supervisor

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? <input type="checkbox"/> Yes Name <u>John Bates</u> Address: <u>9300 Secor Rd</u> <u>Temperance MI 48182</u> If over \$100.00 cumulative, please provide: Occupation: <u>Owner</u> <u>Quimbys</u> Employer: Business Address: <u>3536 Sterns Rd</u> <u>Lambertville</u> <input checked="" type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input checked="" 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>banquet room, food, refreshment</u> <u>staff person</u> 5. Date Of Receipt: <u>7/25/12</u> 6. Vendor Name & Address: <u>Quimby</u> <u>3536 Sterns Rd., Lambertville</u>	\$400.00	
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name Address: If over \$100.00 cumulative, please provide: Occupation: Employer: Business 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: Business 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
Grand Total of all Schedules 1-IK
(Complete on last page of Schedule)

\$400.00

\$400.00

Enter this total
on line 6 of
Summary
Page

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 77822
2. Committee Name Committee to Elect Walt Wilburn *Sept 1982*

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>7</u> <u>25</u> <u>12</u> Month Day Year	4. Number of Individuals Attending or Participating (whichever is greater) <u>50+</u>	5. Type of Fund Raising Activity <u>Meet & Greet</u>	6. Address and Name (If any) place where the activity was held <u>Quimby's</u> <u>3536 Sterns Rd</u> <u>Lambertville, PA</u> <input type="checkbox"/> Private Residence <i>48144</i>
--	--	---	---

7. Total Contributions \$ 575.00
8. Other Receipts _____
9. Gross Receipts (Add lines 7 and 8) \$ 575.00
10. Total Cost of Event \$ 400.00
(Total Cost includes In-Kind Contributions
and All Expenditures Made For the Event)

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contribution Schedule (1A), Itemized In-Kind Contributions Schedule (1-1K), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

Page 1 of 1

INSTRUCTIONS FOR SCHEDULE 1F, FUND RAISER



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 77822
2. Committee Name Committee to Elect VAH Wilbur Sugars

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1 Name <u>Graphic Signs</u> Address <u>10931 Summerfield Rd.</u> <u>Temperance</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Political Signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/1/12</u>	<u>\$184.44</u>
Expenditure #2 Name <u>Bedford Naw</u> Address <u>Lambertville, 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>7/30/12</u>	<u>120.75</u>
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		
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		
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		

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

\$305.19
\$305.19

Enter this total
on line 8a of
Summary Page

Wilburn donations

August 2012 Primary

In Bedford	Amount	Outside Bedford	Amount
April Urbanski funeral home	50	Mannik and Smith engineers	100
John Bates Quimby	100	Kyle Oakley	25
Shayla Pitzen	25	Joseph Costello judge	100
Rodney Velez	150	Dale Zorn	100
Steve Herr	150	Richard Shuff	20
David Thompson	200	Virginia Harrouk gas station owner	300
John Dye	530	Frank Arnold	45
Dave Pienta automatic handling	500	Pam Rybka	30
Walt Wilburn	700	Lillian LaMarcke	90
Mary Ann McBee	100	Susan Carroll	30
Bill Decker	100	Larry Wilburn	60
Sherri Meyer treasurer of bedford	60	Jim Lorentz	60
Joyce Blanton	25	Denise Wilburn	30
Rick Szczygielski doctor	25	Juanita Wilurn	30
Barry Buschman mannik and smith	50	Debbie Revard	30
Pat Lyden	100	Lindsey Longmuir	40
Anthony Brescol	25	Laura Longmuir	30
Larry O Dell township trustee	50	Clarlie Bilyoo	60
Tom McKenzie	50	Ramy Eidi RE developer Sylvania	250
Paul Bourque	50		
Cynthia Mc Elvan	80	Total Dollar amount	1430
Florence & Tom townsend	170	total donors	18
Brian Beverly	200	Percent of total donors	31%
Pearl Albert	50		
Norb Abel	140		
Christine Csurgo	100		
rolland Brown rawlings heating	200	Board Members who contributed	
Chris Renius assessor	40	Sherri Meyer	60
Kent cousino	50	Larry O Dell	50
Tim Little	100	Gail Hurley	60
Jeff Pauli	50	total	170
Heath Velliquette deputy	100	Percent of total donors	5%
Tammy Lamb	100		
Donald Bayse	200		
Mike Heller	100		
William Persal	200		
Margaret Smith	60		
Gail Hurley trustee	60		
Craig Lamb	100		
Randy Taulbee Electrician	40		
total dollar amont	5180		
total donors	40		
percent of total donors	68%		