



CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 10/20/2008 To: 11/24/2008
Mo Day Year Mo Day Year

<p>1. Committee I.D. Number 150428-0</p> <p>2. Committee Name THE COMMITTEE TO KEEP KURT ASBURY PROSECUTOR</p>	<p>4. Candidate Last Name First Name M.I. ASBURY KURT</p> <p>4a. Office Sought Including District # or Community Served (If applicable) To Be Determined BAY COUNTY</p> <p>4b. County of Residence Driver License # (Optional) BAY</p>
<p>5. Committee's Mailing Address P O BOX 775 BAY CITY MI 48707 Area Code and Phone <u>(989) 922-6447</u></p> <p><small>If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.</small></p>	<p>6. Treasurer's Name & Residential Address STEWART REID 2196 OLD HICKORY DR BAY CITY MI 48706 Area code & Phone <u>MI 48706</u> Driver License # (Optional) _____</p>
<p>7. Treasurer's Business Address</p> <p>Area Code and Phone _____</p>	<p>8. Designated Recordkeeper's Name and Mailing Address (If the committee has a Designated Recordkeeper)</p> <p>Area Code and Phone _____ Driver License # (Optional) _____</p>

<p>9. TYPE OF STATEMENT</p> <p>9a. <input type="checkbox"/> Pre-Election OR 9b. <input checked="" type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> School <input type="checkbox"/> Special <input type="checkbox"/> Caucus</p> <p>Date of Election, Convention or Caucus <u>11/04/2008</u> Month Day Year</p>	<p>9c. <input type="checkbox"/> Annual Statement (____ Coverage Year)</p> <p>9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)</p> <p>9e. <input type="checkbox"/> Dissolution of Candidate Committee Effective Date of Dissolution _____ Mon Day Year</p> <p><small>By checking this item, I certify that the committee has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.</small></p>
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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 can not be waived.**

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

Current Treasurer or Designated Recordkeeper	<u>STEWART REID</u> Type or Print Name	<u>Stewart Reid</u> Signature	Date <u>12/04/2008</u> Mo Day Year
Candidate	<u>KURT ASBURY</u> Type or Print Name	<u>Kurt Asbury</u> Signature	Date <u>12/04/2008</u> Mo Day Year

Authority granted under P.A. 388 of 1976



**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>2365.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>0.00</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>2365.00</u>	(18.) \$ <u>41085.62</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0.00</u>	(19.) \$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>2365.00</u>	(20.) \$ <u>41085.62</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>988.56</u>	(21.) \$ <u>2590.09</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0.00</u>	(22.) \$ <u>0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>448.83</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>448.83</u>	(23.) \$ <u>37716.50</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>0.00</u>	(24.) \$ <u>0.00</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>7000.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0.00</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>1394.12</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + <u>2365.00</u>	
	(15.) = <u>3759.12</u>	
15. SUBTOTAL Add Lines 13 and 14		
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - <u>448.83</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>3310.29</u> *	

NOTE: Direct contributions, in-kind contributions, loans, expenditures and outstanding debts count against the \$1,000.00 Reporting Waiver threshold.
All required schedules must be included with this statement. *If your ending balance is negative, please recheck your math.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150428-0

2. Committee Name THE COMMITTEE TO KEEP KURT ASBURY PROSECUTOR

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 # <u>1</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>RAY ARMSTRONG</u> Address: <u>2155 6TH STREET</u> <u>BAY CITY MI 48708</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 checked="" type="checkbox"/> Fund Raiser	50.00	100.00
3. Contribution # <u>2</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>THOMAS BOCK</u> Address: <u>701 FIFTH</u> <u>BAY CITY MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF - BOCK</u> Business Address <u>701 5TH ST</u> <u>BAY CITY MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	300.00
3. Contribution # <u>3</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>LORI BOLLMAN</u> Address: <u>500 S LINCOLN</u> <u>BAY CITY MI 48708</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 checked="" type="checkbox"/> Fund Raiser	25.00	50.00
3. Contribution # <u>4</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>JANICE BOON</u> Address: <u>2112 6TH</u> <u>BAY CITY MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>HOMEMAKER</u> Employer <u>NONE</u> Business Address <u>N/A</u> <u>N/A MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	175.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	150.00	

Enter this total on
line 3a of
Summary Page



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2. Committee Name THE COMMITTEE TO KEEP KURT ASBURY PROSECUTOR

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3. Contribution # <u>5</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>NANCY BORUSHKO</u> Address: <u>5383 TITTABWASEE</u> <u>STERLING MI 48659</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ASST PROSECUTOR</u> Employer <u>BAY COUNTY</u> Business <u>1230 WASHINGTON</u> Address <u>BAY CITY MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	75.00	225.00
3. Contribution # <u>6</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>J DEE BROOKS</u> Address: <u>5305 FLAXMOOR ST</u> <u>MIDLAND MI 48640</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ASST PROSECUTOR</u> Employer <u>BAY COUNTY</u> Business <u>1230 WASHINGTON</u> Address <u>BAY CITY MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	450.00
3. Contribution # <u>7</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>MICHAEL CECCHINI</u> Address: <u>2175 FOURTH</u> <u>BAY CITY MI 48708</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 checked="" type="checkbox"/> Fund Raiser	25.00	70.00
3. Contribution # <u>8</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>ANGELA CHILDS</u> Address: <u>5429 TEFT</u> <u>ST CHARLES MI 48665</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 checked="" type="checkbox"/> Fund Raiser	50.00	75.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	200.00	

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150428-0

2. Committee Name THE COMMITTEE TO KEEP KURT ASBURY PROSECUTOR

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 # <u>9</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>JEFFREY DAY</u> Address: <u>830 AVONDALE</u> <u>BAY CITY MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>GORTE & DAY</u> Business Address <u>918 N WATER</u> <u>BAY CITY MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100.00	325.00
3. Contribution # <u>10</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>JANICE DONER</u> Address: <u>1568 WEDGEWOOD PL</u> <u>ESSEXVILLE MI 48732</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>MAGISTRATE</u> Employer <u>BAY COUNTY</u> Business Address <u>1230 WASHINGTON</u> <u>BAY CITY MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	125.00
3. Contribution # <u>11</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>MARTHA FITZHUGH</u> Address: <u>3077 PAKWOOD CT</u> <u>BAY CITY MI 48706</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 checked="" type="checkbox"/> Fund Raiser	50.00	75.00
3. Contribution # <u>12</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>WILLIAM FOURNIER</u> Address: <u>1053 BRISSETTE BEACH</u> <u>KAWKAWLIN MI 48631</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 checked="" type="checkbox"/> Fund Raiser	25.00	25.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	200.00	

Enter this total on line 3a of Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150428-0
2. Committee Name THE COMMITTEE TO KEEP KURT ASBURY PROSECUTOR

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 # <u>13</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>SUSAN GLAZA</u> Address: <u>1314 SCHEURMANN</u> <u>ESSEXVILLE MI 48732</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>SECRETARY</u> Employer <u>GORTE & DAY</u> Business <u>918 N WATER</u> Address <u>BAY CITY MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	175.00
3. Contribution # <u>14</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>DON GOOD</u> Address: <u>714 WEBB</u> <u>BAY CITY MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>RETIRED</u> Business <u>N/A</u> Address <u>N/A MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	250.00
3. Contribution # <u>15</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>SCOTT GORDON</u> Address: <u>800 ELM ST</u> <u>ESSEXVILLE MI 48732</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ASSISTANT PROSECUTOR</u> Employer <u>BAY COUNTY</u> Business <u>1230 WASHINGTON</u> Address <u>BAY CITY MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	75.00	325.00
3. Contribution # <u>16</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>BARBARA HAYWARD</u> Address: <u>2107 S JONES</u> <u>MUNGER MI 48747</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ASST PROSECUTOR</u> Employer <u>BAY COUNTY</u> Business <u>1230 WASHINGTON</u> Address <u>BAY CITY MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	75.00	440.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	250.00	

Enter this total on
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Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150428-0

2. Committee Name THE COMMITTEE TO KEEP KURT ASBURY PROS
UTOR

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 # <u>17</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>CYNTHIA HOWELL</u> Address: <u>1601 S WARNER</u> <u>BAY CITY MI 48706</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 checked="" type="checkbox"/> Fund Raiser	50.00	75.00
3. Contribution # <u>18</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>YVETTE HURD</u> Address: <u>4661 W NEBOBISH</u> <u>ESSEXVILLE MI 48732</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 checked="" type="checkbox"/> Fund Raiser	25.00	50.00
3. Contribution # <u>19</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>TIMOTHY KELLY</u> Address: <u>2152 SIXTH</u> <u>BAY CITY MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>JUDGE</u> Employer <u>BAY COUNTY</u> Business Address <u>1230 WASHINGTON</u> <u>BAY CITY MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	250.00
3. Contribution # <u>20</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>JOHN KEUVELAAR</u> Address: <u>1701 BORTON</u> <u>ESSEXVILLE MI 48732</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 checked="" type="checkbox"/> Fund Raiser	25.00	75.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	150.00	

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150428-0

2. Committee Name THE COMMITTEE TO KEEP KURT ASBURY PROSECUTOR

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 # <u>21</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>JILL KROL</u> Address: <u>202 S DEAN</u> <u>BAY CITY MI 48706</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 checked="" type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>22</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>MARGARET LEAMING</u> Address: <u>4404 ALTADENA</u> <u>BAY CITY MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ASST PROSECUTOR</u> Employer <u>BAY COUNTY</u> Business Address <u>1230 WASHINGTON BAY CITY MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100.00	400.00
3. Contribution # <u>23</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>PATRICE LUDWIG</u> Address: <u>3913 INLAND DR</u> <u>BAY CITY MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>RETIRED</u> Business Address <u>N/A N/A MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	150.00
3. Contribution # <u>24</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>PAMELA LYNCH</u> Address: <u>793 W NEBOBISH</u> <u>ESSEXVILLE MI 48732</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 checked="" type="checkbox"/> Fund Raiser	25.00	75.00
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3. Contribution # <u>25</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>KENNETH MALKIN</u> Address: <u>4718 WILLOW DR.</u> <u>BAY CITY MI 48706</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 checked="" type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>26</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>DAVID MAYOTTE</u> Address: <u>1201 W RIDGE</u> <u>ESSEXVILLE MI 48732</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>POLICE OFFICER</u> Employer <u>ESSEXVILLE PUBLIC SAFETY DEPT</u> Business Address <u>1107 N WOODSIDE</u> <u>ESSEXVILLE MI 48732</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	375.00
3. Contribution # <u>27</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>GEORGE MULLISON</u> Address: <u>610 PARK</u> <u>BAY CITY MI 48706</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 checked="" type="checkbox"/> Fund Raiser	50.00	50.00
3. Contribution # <u>28</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>RUTH NOBLE</u> Address: <u>315 N POWELL</u> <u>ESSEXVILLE MI 48732</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 checked="" type="checkbox"/> Fund Raiser	25.00	100.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	150.00	

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2. Committee Name THE COMMITTEE TO KEEP KURT ASBURY PROSECUTOR

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 # 29 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: LEONARD NORMAN Address: 3395 NORTHWAY BAY CITY MI 48706 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 checked="" type="checkbox"/> Fund Raiser	50.00	50.00
3. Contribution # 30 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: ROBIN OEMING Address: 2138 SIXTH ST BAY CITY MI 48708 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 checked="" type="checkbox"/> Fund Raiser	25.00	100.00
3. Contribution # 31 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: JOHN PARKER Address: 2780 DUNMORE SAGINAW MI 48603 5. If over \$100.00 cumulative, please provide: Occupation <u>POLICE OFFICER</u> Employer <u>BAYANET</u> Business Address <u>P O BOX 676</u> <u>FREELAND MI 48623</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100.00	200.00
3. Contribution # 32 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: GARY PHILLIPS Address: 1003 FIFTH BAY CTIY MI 48708 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 checked="" type="checkbox"/> Fund Raiser	50.00	70.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	225.00	

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150428-0
2. Committee Name THE COMMITTEE TO KEEP KURT ASBURY PROSECUTOR

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 # <u>33</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>CONNIE PIERSON</u> Address: <u>5649 N M-13</u> <u>PINCONNING MI 48650</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 checked="" type="checkbox"/> Fund Raiser	50.00	75.00
3. Contribution # <u>34</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>JANICE PIERSON</u> Address: <u>5823 M-13</u> <u>PINCONNING MI 48650</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 checked="" type="checkbox"/> Fund Raiser	25.00	50.00
3. Contribution # <u>35</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>FRANK QUINN</u> Address: <u>4110 CRFEEKWOOD</u> <u>BAY CITY MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SELF - QUINN</u> Business Address <u>4110 CREEKWOOD</u> <u>BAY CITY MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	125.00
3. Contribution # <u>36</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>RONALD REMINGTON</u> Address: <u>2117 SIXTH</u> <u>BAY CITY MI 48708</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 checked="" type="checkbox"/> Fund Raiser	25.00	25.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	125.00	

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150428-0
2. Committee Name THE COMMITTEE TO KEEP KURT ASBURY PROS
UTOR

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 # <u>37</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>PAUL ROUSSEAU</u> Address: <u>3358 BRENTWAY</u> <u>BAY CITY MI 48706</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 checked="" type="checkbox"/> Fund Raiser	50.00	100.00
3. Contribution # <u>38</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>JANET SANTOS</u> Address: <u>123 CENTER</u> <u>BAY CITY MI 48706</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 checked="" type="checkbox"/> Fund Raiser	50.00	50.62
3. Contribution # <u>39</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>LEWIS SEWARD</u> Address: <u>1009 WASHINGTON</u> <u>BAY CITY MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>SEWARD TALLY & PIGGOT</u> Business Address <u>1009 WASHINGTON</u> <u>BAY CITY MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	75.00	300.00
3. Contribution # <u>40</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>JOSEPH SHEERAN</u> Address: <u>1206 WILDERNESS CT</u> <u>ESSEXVILLE MI 48732</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>JUDGE</u> Employer <u>BAY COUNTY</u> Business Address <u>1230 WASHINGTON</u> <u>BAY CITY MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	225.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	225.00	

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150428-0

2. Committee Name THE COMMITTEE TO KEEP KURT ASBURY PROSECUTOR

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 # <u>41</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>EDWIN SHIMABUKURO</u> Address: <u>4538 GREENFIELD</u> <u>BAY CITY MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer <u>RETIRED</u> Business <u>N/A</u> Address <u>N/A MI 48706</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	200.00
3. Contribution # <u>42</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/2008</u> Name: <u>JEROME SOMALSKI</u> Address: <u>1147 N PINE</u> <u>ESSEXVILLE MI 48732</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>VICE PRESIDENT</u> Employer <u>BAY LANDSCAPING</u> Business <u>1630 SOUTHEAST BOUTELL</u> Address <u>ESSEXVILLE MI 48732</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	110.00
3. Contribution # <u>43</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/17/2008</u> Name: <u>DONALD GOULET</u> Address: <u>69 YORK</u> <u>BAY CITY MI 48708</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 checked="" type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>44</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/17/2008</u> Name: <u>KEITH MARKSTROM</u> Address: <u>1383 N JONES</u> <u>ESSEXVILLE MI 48732</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 checked="" type="checkbox"/> Fund Raiser	25.00	25.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	150.00	

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150428-0
2. Committee Name THE COMMITTEE TO KEEP KURT ASBURY PROSECUTOR

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 # <u>45</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/17/2008</u> Name: <u>GARY MATHEWS</u> Address: <u>5646 CORTLAND CIRCLE</u> <u>BAY CITY MI 48706</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 checked="" type="checkbox"/> Fund Raiser	50.00	50.00
3. Contribution # <u>46</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/17/2008</u> Name: <u>RICHARD MILSTER</u> Address: <u>210 PEPPELBERRY</u> <u>BAY CITY MI 48706</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 checked="" type="checkbox"/> Fund Raiser	50.00	50.00
3. Contribution # <u>47</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/17/2008</u> Name: <u>THOMAS PAIGE</u> Address: <u>4838 11 MILE RD</u> <u>AUBURN MI 48611</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 checked="" type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>48</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/17/2008</u> Name: <u>EDWARD RIVET</u> Address: <u>3072 W BIRCH</u> <u>BAY CITY MI 48706</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 checked="" type="checkbox"/> Fund Raiser	25.00	25.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	150.00	

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150428-0

2. Committee Name THE COMMITTEE TO KEEP KURT ASBURY PROSECUTOR

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 # 49 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/17/2008</u> Name: DAVID ROGERS Address: 4659 DALE CT BAY CITY MI 48706 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 checked="" type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # 50 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/17/2008</u> Name: DIANE SMITH Address: 111 SHARPE ESSEXVILLE MI 48732 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 checked="" type="checkbox"/> Fund Raiser	50.00	50.00
3. Contribution # 51 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/17/2008</u> Name: JANE SMITH Address: 265 E HAMPTON ESSEXVILLE MI 48732 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 checked="" type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # 52 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/17/2008</u> Name: KAY SPEGEL Address: 1718 N KNOGHT ESSEXVILLE MI 48732 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 checked="" type="checkbox"/> Fund Raiser	15.00	15.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	115.00	

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150428-0
2. Committee Name THE COMMITTEE TO KEEP KURT ASBURY PROSECUTOR

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 # <u>53</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/17/2008</u> Name: <u>DAVID VENTRONE</u> Address: <u>1783 MAROBA LINWOOD MI 48634</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 checked="" type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>54</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/17/2008</u> Name: <u>CHERYL WORKMAN</u> Address: <u>323 SIXTH ST BAY CITY MI 48708</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 checked="" type="checkbox"/> Fund Raiser	50.00	50.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	75.00 2365.00	

Enter this total on line 3a of Summary Page



**ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK
CANDIDATE COMMITTEE**

1. Committee I. D. Number 150428-0
2. Committee Name THE COMMITTEE TO KEEP KURT ASBURY PROSECUTOR

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # <u>1</u> PAC Receipt? <input type="checkbox"/> Yes Name: <u>KURT ASBURY</u> Address: <u>2125 SIXTH ST</u> <u>BAY CITY MI 48708</u> If over \$100.00 cumulative, please provide: Occupation: <u>PROSECUTOR</u> Employer: <u>BAY COUNTY</u> Business Address: <u>1230 WASHINGTON</u> <u>BAY CITY MI 48708</u> <input checked="" type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>FOOD DRINK FOR RECEPTION</u> 5. Date OF RECEIPT: <u>10/23/2008</u> 6. VENDOR NAME & ADDRESS: <u>STEINHAUS</u> <u>1020 N WATER ST</u> <u>BAY CITY MI 48708</u>	988.56	8977.09

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

988.56
988.56

Enter this total
on line 6 of
Summary
Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150428-0

2. Committee Name THE COMMITTEE TO KEEP KURT ASBURY PROSECUTOR

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
<p>Expenditure # 1</p> <p>Name: KURT ASBURY</p> <p>Address: 2125 SIXTH ST</p> <p>BAY CITY MI 48708</p> <p><input checked="" type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>REIMBURSE CAMPAIGN EXPENSES</u></p> <p>Expenditure Code <u>MA</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p>11/17/2008</p> <p>Memo - itemization below</p>	<p>248.83</p>
<p>Expenditure # 2</p> <p>Name: FEDEX KINKOS</p> <p>Address: 4074 WILDER RD</p> <p>BAY CITY MI 48706</p> <p><input checked="" type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>HAND STAPLING</u></p> <p>Expenditure Code <u>MA</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p>11/17/2008</p> <p>Memo - itemization</p>	<p>(55.63)</p>
<p>Expenditure # 3</p> <p>Name: KROGER</p> <p>Address: 2910 CENTER</p> <p>BAY CITY MI 48706</p> <p><input checked="" type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>STAMPS</u></p> <p>Expenditure Code <u>MA</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p>11/17/2008</p> <p>Memo - itemization</p>	<p>(193.70)</p>
<p>Expenditure # 4</p> <p>Name: MANATEEZ GRAPHIC DESIGN</p> <p>Address: 840 S CLARK</p> <p>DANSVILLE MI 48819</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>GRAPHIC DESIGN</u></p> <p>Expenditure Code <u>PA</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p>11/17/2008</p>	<p>200.00</p>

Subtotal this page

448.83

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

448.83

Enter this total
on line 8a of
Summary Page



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

1. Committee I.D. Number 150428-0

2. Committee Name THE COMMITTEE TO KEEP KURT ASBURY PROSECUTOR

This Schedule itemizes:
a. Debts and obligations owed by or forgiven the committee **OR** b. Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (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: KURT ASBURY 2125 SIXTH ST BAY CITY MI 48708	4. Type: <u>LOAN</u> Code _____ 5. <u>Date Debt Was Incurred:</u> <u>09/12/2006</u> 6. <u>Original Amount of Debt:</u> \$ <u>500.00</u>	\$ _____ \$ _____ \$ _____ \$ _____	0.00	500.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt # 2 Corp? <input type="checkbox"/> Yes Owed to or by: KURT ASBURY 2125 SIXTH ST BAY CITY MI 48708	4. Type: <u>LOAN</u> Code _____ 5. <u>Date Debt Was Incurred:</u> <u>09/26/2006</u> 6. <u>Original Amount of Debt:</u> \$ <u>2000.00</u>	\$ _____ \$ _____ \$ _____ \$ _____	0.00	2000.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt # 3 Corp? <input type="checkbox"/> Yes Owed to or by: KURT ASBURY 2125 SIXTH ST BAY CITY MI 48708	4. Type: <u>LOAN</u> Code _____ 5. <u>Date Debt Was Incurred:</u> <u>07/25/2008</u> 6. <u>Original Amount of Debt:</u> \$ <u>4500.00</u>	\$ _____ \$ _____ \$ _____ \$ _____	0.00	4500.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt)

7000.00

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

7000.00

PLEASE REFER TO INSTRUCTIONS FOR LIST OF EXPENDITURE CODES

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.

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



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150428-0
2. Committee Name THE COMMITTEE TO KEEP KURT ASBURY PROSECUTOR

- USE A SEPARATE SHEET FOR EACH EVENT-

3. Date Event Was Held <u>10/23/2008</u> Month Day Year	4. Number of Individuals Attending or Participating (whichever is greater) <p style="text-align: center;">0</p>	5. Type of Fund Raising Activity <p style="text-align: center;">RECEPTION STEIN HAUS</p>	6. Address and Name (If any) of the place where the activity was held 1108 N WATER ST BAY CITY MI 48708 <input type="checkbox"/> Private Residence
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7. Total Contributions of \$20.00 or less	<u>15.00</u>
8. Total Contributions of \$20.01 or more	<u>3175.00</u>
9. SUBTOTAL (Add lines 7 and 8)	<u>3190.00</u>
10. Other Receipts	<u>0.00</u>
11. Gross Receipts (Add lines 9 and 10)	<u>3190.00</u>
12. Total Cost of Event*	<u>2459.57</u>

*Includes In-Kind Contributions and All Expenditures Made For the Event

13. 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.