



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE  
COVER PAGE

FILED OR. OLENK  
18TH JUDICIAL  
CIRCUIT COURT

OCT 26 10 10 AM OFFICIAL USE ONLY

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

<p>1. Committee I.D. Number 150027</p> <p>2. Committee Name John E. Miller for Sheriff</p>	<p>3. This Statement covers From: <u>10</u> <u>26</u> <u>12</u> to <u>10</u> <u>21</u> <u>12</u> Mo Day Year Mo Day Year</p> <p>4. Candidate Last Name <u>Miller</u> BY <u>John</u> First Name M.I. <u>E.</u></p> <p>4a. Office Sought Including District # or Community Served (If applicable) <u>Bay County Sheriff</u></p> <p>4b. County of Residence <u>Bay</u></p>
<p>5. Committee's Mailing Address <u>3064 Beaver Rd</u> <u>Bay City MI 48706</u> Area Code and Phone <u>989-450-7242</u></p> <p>If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.</p>	<p>6. Treasurer's Name &amp; Residential Address <u>Jodie Scott</u> <u>3064 Beaver Rd, Bay City</u> Area Code &amp; Phone <u>(989) 450-7242</u></p>
<p>7. Treasurer's Business Address <u>same</u> Area Code and Phone ( )</p>	<p>8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) Area Code and Phone ( )</p>

9. TYPE OF STATEMENT

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

Pre-Election or Post-Election Statement relates to:

Primary  General

Convention  School

Special  Caucus

Date of Election, Convention or Caucus  
11 6 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. 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 Jodie Scott  
Type or Print Name Jodie Scott  
Signature Jodie Scott Date 10 25 12  
Mo Day Year

Candidate John E Miller  
Type or Print Name John E Miller  
Signature John E Miller Date 10 25 12  
Mo Day Year



MICHIGAN DEPARTMENT OF STATE  
Bureau of Elections

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

	Column I This Period	Column II Cumulative this election cycle
<b>RECEIPTS</b>		
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>8,375.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>8,375.00</u>	(18.) \$ _____
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>200.00</u>	(19.) \$ _____
5. <b>TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$ <u>8,575.00</u>	(20.) \$ _____
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>-</u>	(21.) \$ _____
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>-</u>	(22.) \$ _____
<b>EXPENDITURES</b>		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>17,030.24</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>-</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>-</u>	
9. <b>TOTAL EXPENDITURES</b> (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>17,030.24</u>	(23.) \$ _____
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>-</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>-</u>	
11. <b>TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$ <u>-</u>	(24.) \$ _____
<b>DEBTS AND OBLIGATIONS</b>		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>-</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>-</u>	
<b>BALANCE STATEMENT</b>		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>9,760.28</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>8,575.00</u>	
15. <b>SUBTOTAL</b> Add lines 13 and 14	(15.) = \$ <u>18,335.28</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>17,030.24</u>	
17. <b>ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ <u>1,305.04</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.  
Authority granted under P.A. 388 of 1976



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Meller for Sheriff

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>9/20/12</u>	
Name: <u>Jeff Sargeson</u> Address: <u>3367 Grande Ct., Bay City</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		10.00	
3. Contribution # 2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/20/12</u>	
Name: <u>Mark Suchy</u> Address: <u>2183 W- Union, Bay City</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		10.00	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/20/12</u>	
Name: <u>Ron Tribula</u> Address: <u>UAW 699 Pres., Wilder Rd, Bay City</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		10.00	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/20/12</u>	
Name: <u>Dane Gregorczyk</u> Address: <u>4367 Wheeler Rd, Bay City</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		10.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		40.00	

Enter this total on  
line 3a of  
Summary Page



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u>	Name: <u>Nina Szachy</u> Address: <u>2183 N. Union, Bay City 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	10.00	
3. Contribution # 2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/20/12</u>	Name: <u>Ryan Carmona</u> Address: <u>4580 Monitor Rd, Bay City</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	10.00	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/20/12</u>	Name: <u>Char Pressler</u> Address: <u>7161 3 Mile Rd, Bay City</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	10.00	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/20/12</u>	Name: <u>Bill Sargeson</u> Address: <u>3374 E. Fisher Rd, Bay City</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	10.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)				40.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Carl Pressler</u> Address: <u>7468 3 mile Rd, Bay City</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		10.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Danielle Grzegorzczk</u> Address: <u>4867 wheeler Rd, Bay City</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		10.00	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Fred, Mary Kay, Fred Jr + Matthew Walraven</u> Address: <u>1212 Arms Rd, Essexville</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>9/20/12</u> Name: <u>Lester Cousineau</u> Address: <u>1764 W. White St, Bay City</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	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		100.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Meller for Sheriff

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>9/20/12</u> Name: <u>Dale + Holly Gatza</u> Address: <u>1702 30th St, Bay City</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	20.00		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Shannon Clifford</u> Address: <u>2904 Clayburn Rd, Saginaw</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	10.00		
3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Barry Gatza</u> Address: <u>1481 Calmac Ct, Bay City</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	10.00		
3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Jeff + April Kerkleski</u> Address: <u>99 Tierney Rd, Bay City</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		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		80.00	

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**ITEMIZED CONTRIBUTIONS  
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CANDIDATE COMMITTEE**

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2. Committee Name John E. Miller for Sheriff

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3. Contribution #1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u>  Name: <u>Ken Hite, II</u> Address: <u>1866 Nine Mile, Kawkawlin</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	10.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u>  Name: <u>Joseph Larava</u> Address: <u>1073 w. Hampton Rd, Essexville</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	10.00	
3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u>  Name: <u>Tim + Pam Kelly</u> Address: <u>2152 Sixth, Bay City</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>9/20/12</u>  Name: <u>Ryan Christie + Karrie Lincoln</u> Address: <u>4072 Ridgewood Dr, Bay City</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 type="checkbox"/> Fund Raiser	30.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	90.00	

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**ITEMIZED CONTRIBUTIONS  
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CANDIDATE COMMITTEE**

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2. Committee Name John E. Miller for Sheriff

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3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Stephanie + Gerrienne Lincoln</u> Address: <u>1368 W. Kitchen Rd, Linwood</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>9/20/12</u> Name: <u>Tom Herek</u> Address: <u>1606 30th, Bay City</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	20.00	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Doug Wieland</u> Address: <u>1788 Lauria Rd, Kawkawlin</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 #4	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Terry + John McPeak</u> Address: <u>2806 Seminde Ct. Bay City</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	20.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		100.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Deb Zamaria</u> Address: <u>4037 Dover, Bay City</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		10.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Charles Brunner</u> Address: <u>208 Murphy, Bay City</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		20.00	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Seung + Linda Lee</u> Address: <u>214 W Elm St, Auburn</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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Sang Lee</u> Address: <u>3200 Dale Rd #67, Saginaw</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		15.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		75.00	

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**ITEMIZED CONTRIBUTIONS  
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CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
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3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u>  Name: <u>Joe Lee</u> Address: <u>2390 Webber St, Saginaw</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	15.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u>  Name: <u>Mark + Kate Hardy</u> Address: <u>2913 Pepperberry Dr, Bay City</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>9/20/12</u>  Name: <u>Jin Lee</u> Address: <u>6181 Fox Glen Dr. #244, Saginaw</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	15.00	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u>  Name: <u>Dana Smithers</u> Address: <u>E. Hotoh KISS Rd, Bay City</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 type="checkbox"/> Fund Raiser	10.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	70.00	

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**ITEMIZED CONTRIBUTIONS  
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CANDIDATE COMMITTEE**

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3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/20/12</u>	Name: <u>Ashley Deming</u> Address: <u>503 Third, Bay City</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	10.00	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/20/12</u>	Name: <u>Troy Cunningham + April Yax</u> Address: <u>5209 Prairie Creek Ct, Bay City</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>9/20/12</u>	Name: <u>Bob + Susan Taylor</u> Address: <u>4265 Regan Rd, Bay City</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	20.00	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/20/12</u>	Name: <u>Keith Amgotte</u> Address: <u>503 Third, Bay City</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	10.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)				70.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Kevin + Sara Smith</u> Address: <u>Hanely Dr, Bay City</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		20.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Rod + Juli Reynolds</u> Address: <u>370 Revilo Rd, Bay City</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		20.00	
3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____ Name: <u>D. Russell</u> Address: <u>1574 St. Marys, Essexville</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		10.00	
3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____ Name: <u>Rick Pabalis</u> Address: <u>5431 Christina Rd, Bay City</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		10.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		60.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u>	Name: <u>Gary Janiskee</u> Address: <u>3077 Hawthorne Dr, Bay City</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	10.00	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/20/12</u>	Name: <u>Ben + Darlene Frost</u> Address: <u>4353 Wheeler Rd, Bay City</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	20.00	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/20/12</u>	Name: <u>Mike Janiskee, Sandra Lauria + Liz Getty</u> Address: <u>5647 Firethorne Dr, Bay City</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 # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/20/12</u>	Name: <u>Laura Hill</u> Address: <u>906 Germania Ave, Bay City</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	10.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)				70.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John G. Miller for Sheriff

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>9/20/12</u> Name: <u>Sarah Mueller</u> Address: <u>304 Polk, Bay City</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	10.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>JoAnn Mendoza</u> Address: <u>4653 Morningside Dr, Bay City</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	10.00	
3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Diann Coffin</u> Address: <u>638 N. Jones Rd, Essexville</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	10.00	
3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Justin Scott</u> Address: <u>127 W. Nelson St, Midland</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	10.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	40.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller For Sheriff

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>9/20/12</u> Name: <u>Craig Duczarek</u> Address: <u>3270 Hidden Rd, Bay City</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	10.00	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>P. Lalonde</u> Address: <u>906 Germania, Bay City</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	50.00	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Gary Martin</u> Address: <u>3096 Wheeler Rd, Bay City</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>9/20/12</u> Name: <u>Tony and Michelle Judd</u> Address: <u>209 Plummer, Essexville</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	20.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	280.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Dean Woods</u> Address: <u>1397 N. Wagner, Essexville</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	20.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Bill Fournier</u> Address: <u>1053 Brissette Bch, Keweenaw</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	20.00	
3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Sandy Roese + Jen Riffelmacher</u> Address: <u>203 Murphy St, Bay City</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	20.00	
3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____ Name: <u>James + Amanda Charbonneau</u> Address: <u>524 N. Sherman St, Bay City</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	20.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	80.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John G. Miller for Sheriff

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>9/20/12</u> Name: <u>Dan Bush</u> Address: <u>317 Garfield Ave, Bay City</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	10.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Marc Panzner</u> Address: <u>3690 S. Huron Rd, Bay City</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	20.00	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Frank Rivette</u> Address: <u>2153 River Rd, Kawkawlin</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	10.00	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Karen Burleson</u> Address: <u>2424 State Rd, Pinconning 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	15.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	55.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Rick and Phyllis Meeth</u> Address: <u>2211 McKinley, Bay City 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	20.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Jim Pumpen</u> Address: <u>2305 26th St, Bay City</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	10.00	
3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Jeff and Michelle Katt</u> Address: <u>206 Spengler, Bay City 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	40.00	
3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Wilson Hall</u> Address: <u>708 S. Euclid, Bay City</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	20.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	90.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027

2. Committee Name John G. Miller for Sheriff

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>9/20/12</u> Name: <u>Jill Raynak</u> Address: <u>1004 S. Hampton St. Bay City</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	10.00		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Holly Kukla + Leo Kukla</u> Address: <u>237 W. Hampton, Essexville</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>9/20/12</u> Name: <u>Tom Trelewski</u> Address: <u>117 Fillmore, Bay City</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	10.00		
3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Kurt + Ann Asbury</u> Address: <u>2125 Sixth St, Bay City</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	20.00		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		70.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John G. Miller for Sheriff

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>9/20/12</u> Name: <u>Ema Kleinert</u> Address: <u>1892 Briggs Rd, Munger</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	10.00	
3. Contribution # 2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Art Kleinert</u> Address: <u>9953 Parrent Rd, Reese</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	10.00	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Wayne and Karen Bellow</u> Address: <u>308 Southlawn Dr, Auburn</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	20.00	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Joella Krantz</u> Address: <u>80 Birchview, Sandford</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	10.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	50.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John G. Miller for Sheriff

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>9/20/12</u> Name: <u>Matt and Ken Charbonneau</u> Address: <u>408 Grant, Auburn</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	20.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>H.R. Kleinert</u> Address: <u>1243 Tuscola, Bay City</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	10.00	
3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Ashley Keenan</u> Address: <u>994 Pine Rd, Bay City</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	10.00	
3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Dave and Mary Shore</u> Address: <u>3309 State St. Rd, Bay City</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	20.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	60.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John G. Miller for Sheriff

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>9/20/12</u> Name: <u>Keith and Diana Shore</u> Address: <u>66 Old Kawkawlin Rd, Bay City</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	20.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Daniel Panzner</u> Address: <u>1040 Wilder Rd, Bay City</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	10.00	
3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Rick Hanover</u> Address: <u>3390 Brentway Dr, Bay City</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	10.00	
3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Mike and Nicole Shore</u> Address: <u>3345 State St., Bay City</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	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	80.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Todd Umphrey</u> Address: <u>870 E. Anderson Rd., Linwood</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	20.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Julia Zurnalev</u> Address: <u>7 Edgewood Dr., Essexville</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	10.00	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Ralph and Mary Smith</u> Address: <u>3631 Two Mile Rd. Bay City</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	20.00	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Thomas Starkweather</u> Address: <u>113 McKinley St., Bay City</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	50.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	100.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Troy and Kim Stewart</u> Address: <u>216 Nebobish, Essexville</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	50.00	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>G. Hast</u> Address: <u>5571 4 Mile Rd, Bay City</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	10.00	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Al Stren</u> Address: <u>5721 4 Mile Rd, Bay City</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	50.00	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Don Tilley</u> Address: <u>617 Green Ave, Bay City</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	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	135.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Randy Mier</u> Address: <u>2247 Fraser, Kawkawlin</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	10.00		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Andrea Studders</u> Address: <u>215 Ames St, Bay City</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	50.00		
3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Clete and Betty Van Snepson</u> Address: <u>2806 Paradise Ct., Bay City</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>9/20/12</u> Name: <u>Tom Wehr</u> Address: <u>2408 Cody Estey, Pinconning</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	50.00		
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 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u>	Name: <u>John Whalen</u> Address: <u>927 Midland Rd, Bay City</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	20.00	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/20/12</u>	Name: <u>Carl and Nancy Wieland</u> Address: <u>3086 W. Riverview Dr, Bay City</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 # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/20/12</u>	Name: <u>Douglas Wirt</u> Address: <u>226 Athlone Beh, Bay City</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	4. Date of Receipt <u>9/21/12</u>	Name: <u>Walt Wozniak</u> Address: <u>204 Pine St., Essexville</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	15.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)				175.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John G. Muller for Sheriff

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>9/20/12</u> Name: <u>Jerry and Vicki Roupe</u> Address: <u>3115 Kirkwood, Bay City</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	20.00	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Pedro Santos</u> Address: <u>4646 Morningside, Bay City</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	15.00	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>LS Sayen</u> Address: <u>209 S. Warner St, Bay City</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 type="checkbox"/> Fund Raiser	10.00	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Danean Wright</u> Address: <u>4635 Foxcroft Dr, Bay City</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	10.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	55.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John G. Miller for Sheriff

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>9/20/12</u> Name: <u>Matt Pett</u> Address: <u>4115 7 Mile Rd, Bay City</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	50.00	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Paul + Barb Pett</u> Address: <u>151 S. Tuscola, Bay City</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	50.00	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Holly Masters</u> Address: <u>807 Sidney St., Bay City</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	10.00	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Joe Pawloski</u> Address: <u>806 Sidney St., Bay City</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	10.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	140.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Pat McGiver</u> Address: <u>5437 Lisa Dr., Bay City</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	10.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Kim Coonan</u> Address: <u>706 Sidney, Bay City</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	20.00	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Jim Horen</u> Address: <u>401 Kelton, Bay City</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	10.00	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Dan Platzke</u> Address: <u>1067 Shady Shore Dr, Bay City</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	10.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	50.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Robert and Julie Hamilton</u> Address: <u>274 Lagoon Beach Dr, Bay City</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	20.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Jim Washabaugh</u> Address: <u>5914 4 Mile Rd, Bay City</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	10.00	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Ben Washabaugh</u> Address: <u>45 Salzburg Rd, Bay City</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	10.00	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Chris Washabaugh</u> Address: <u>2806 Evergreen Dr, Bay City</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	10.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	50.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Bill and Paula Washburn</u> Address: <u>401 Kelton, Bay City</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	20.00	
3. Contribution # 2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Peggy Pletzke</u> Address: <u>401 Kelton St, Bay City</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	10.00	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Dan and Gayle Jones</u> Address: <u>608 S. Euclid, Bay City</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	20.00	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>David Hollander</u> Address: <u>1002 S. Arbor St, Bay City</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	10.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	60.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John G. Muller for Sheriff

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>9/20/12</u> Name: <u>Eugene Smith</u> Address: <u>3917 Ferris Dr, Bay City</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	10.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Jeff and Becky Ray</u> Address: <u>3199 N. Union, Bay City 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	20.00	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Gary Maday</u> Address: <u>211 Burns, Essexville</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	10.00	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Dave and LouAnn Cimbalik</u> Address: <u>2417 Terry St, Midland</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	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	80.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Joe Rivet</u> Address: <u>2600 Center Ave, Bay City</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 #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Larry Lozo</u> Address: <u>1882 E. Beaver, Kewauwau</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	10.00	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Don Smreck</u> Address: <u>1717 S. Tuscola, Munger</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	10.00	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Maureen Carolan</u> Address: <u>5429 Lisa, Bay City</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	20.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	65.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Chris and Sara Mausolf</u> Address: <u>501 Third, Bay City</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	20.00	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>J Dee Brooks</u> Address: <u>1280 Washington Ave, Bay City</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	10.00	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Chip Bush</u> Address: <u>237 N. Farragut, Bay City</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	16.00	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Greg Blair</u> Address: <u>4780 Birnbaum, Bay City</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	20.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	60.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John G. Miller for Sheriff

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>9/20/12</u> Name: <u>Liz Lemay</u> Address: <u>2242 Fraser Rd, Keweenaw</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	10.00	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Fran Sauve</u> Address: <u>2163 5th St, Bay City</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	10.00	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>John Howard</u> Address: <u>614 McCordle, Tawas City</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	10.00	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Jack Tobias</u> Address: <u>105 Bowcek, Munger</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	20.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	50.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027

2. Committee Name John B. Miller for Sheriff

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>9/20/12</u>	Name: <u>Linda Lipp</u> Address: <u>30477 Cr 388, Gobles, 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	10.00	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/20/12</u>	Name: <u>allen Hodder</u> Address: <u>3235 Beaver Rd, Bay City</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	10.00	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/20/12</u>	Name: <u>Dick Stasik</u> Address: <u>21 Bayshore, Bay City</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	10.00	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/20/12</u>	Name: <u>Dee Lambert</u> Address: <u>PO Box 542, Bay City</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	20.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)				50.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/30/12</u> Name: <u>Bob Reinhold</u> Address: <u>507 Harvard, Bay City</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	10.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/30/12</u> Name: <u>Larry Burleson</u> Address: <u>2460 State Rd, Pinconning</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	15.00	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/30/12</u> Name: <u>Jack Baldwin</u> Address: <u>1405 S. Warner, Bay City</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	10.00	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/30/12</u> Name: <u>Mark and Bonnie Sebanhals</u> Address: <u>820 S. Powell Rd., Essexville</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	15.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	50.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Ken and Jacque Nickel</u> Address: <u>5953 Red Feather, Bay City</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	20.00	
3. Contribution # 2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Kevin and Shelly Nickel</u> Address: <u>6022 Maple Ridge, Bay City</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>9/20/12</u> Name: <u>Leonard and Meg Norman</u> Address: <u>3395 Northway Dr, Bay City</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	50.00	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Geo and Patricia Oliver</u> Address: <u>1644 N. Knight Rd, Essexville</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	20.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	120.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>James and Jean Ouellette</u> Address: <u>1500 N. Trumbull, Bay City</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	20.00	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Tom Paige</u> Address: <u>4838 11 Mile Rd, Auburn</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	20.00	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/24/12</u> Name: <u>Gloria M. Kowalski</u> Address: <u>PO Box 394, Linwood 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	10.00	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Mel and Kay McNally</u> Address: <u>2081 Fraser Rd, Kalamazoo</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	20.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	70.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027

2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Joyce Lijewski and Dave Larnay</u> Address: <u>308 Sunrise, Bay City</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	20.00	
3. Contribution # 2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Jim Lambert</u> Address: <u>251 S. Garfield Rd, Linwood</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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Al Laskowski</u> Address: <u>4145 Dover, Bay City</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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Jeanette Karchak</u> Address: <u>107 Transit, Bay City</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	15.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	105.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/30/12</u> Name: <u>Ron Lijewski</u> Address: <u>3187 Monitor Rd, Kawkawlin</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	15.00	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/30/12</u> Name: <u>Colleen Maillette</u> Address: <u>3123 Kirkwood Ct, Bay City</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 4. Date of Receipt <u>9/30/12</u> Name: <u>Julie Reynolds</u> Address: <u>376 Revilo, Bay City</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	20.00	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/30/12</u> Name: <u>Gary Moore</u> Address: <u>193 Hendrie, Bay City</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	20.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	80.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u>	20.00	
Name: <u>Jack and Diane Rahn</u> Address: <u>5580 3 Mile, Bay City</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				
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/20/12</u>	40.00	
Name: <u>Bill and Marcia Reder</u> Address: <u>77 E. Midland, Auburn</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				
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/20/12</u>	30.00	
Name: <u>Ed and Nancy Rivet</u> Address: <u>3072 W. Birch, Bay City</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				
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/20/12</u>	40.00	
Name: <u>Tom Bock and Judge Karen Tighe</u> Address: <u>2123 Center Ave, Bay City</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 type="checkbox"/> Fund Raiser				
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)			130.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Tim Heitzig</u> Address: <u>3243 Beaver Rd, Bay City</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>9/20/12</u> Name: <u>Lloyd</u> Address: <u>2949 Imperial, Bay City</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	20.00	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Pedro Zarazua</u> Address: <u>4037 DOVER Lane, Bay City</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	10.00	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Ethel Baldwin</u> Address: <u>1405 S. Warner, Bay City</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	10.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		80.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Jenea Balderama</u> Address: <u>2882 Colling Wood, Bay City</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	10.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Joe Balderama</u> Address: <u>301 Price St, Auburn</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	10.00	
3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>George and Sandy Augustyniak</u> Address: <u>2840 Kaiser, Pinconning</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	35.00	
3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Jim and Ardythre Arnold</u> Address: <u>4674 Rose Ct, Bay City</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	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	95.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Dick Arnold</u> Address: <u>1110 N. Dewitt, Bay City</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>9/20/12</u> Name: <u>Jim and LeAnn Andrzejewski</u> Address: <u>6012 Old Hickory, Bay City</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	20.00	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>John Andrus</u> Address: <u>1702 S. Sheridan, Bay City</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	20.00	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Bill and Jeanne Allsopp</u> Address: <u>1956 Carter Ridge Ct, Auburn</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)	110.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>B.G. Richard D. Demara</u> Address: <u>4020 Allen Ct, Bay City</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	20.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Mike Halstead</u> Address: <u>2322 Bay Woods Ct, Bay City</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	15.00	
3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Jack Kellerman</u> Address: <u>3061 Hawthorne Dr, Bay City</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	20.00	
3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Michael Kegley</u> Address: <u>3372 E. Woodland Dr, Bay City</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	20.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	75.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>James and Madeline Hurley</u> Address: <u>58 W. S. Saginaw Rd, Bay City</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>9/20/12</u> Name: <u>Chris Izworski</u> Address: <u>3125 Oakbrush Way, Bay City</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	20.00	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Don and Pam Horneber</u> Address: <u>2945 Strieter Dr, Bay City</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 4. Date of Receipt <u>9/20/12</u> Name: <u>Kate Hodge</u> Address: <u>602 W. Indiana, Bay City</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	20.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	170.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Dave and Sandy Dabrowski</u> Address: <u>2164 Bangor Rd, Bay City</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>9/20/12</u> Name: <u>Michael Bouckaert</u> Address: <u>4799 Stephen Ct, Auburn</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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Larry and Peggy Gies</u> Address: <u>2074 Kenneth Dr, Bay City</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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Harry Gill</u> Address: <u>3030 W. Riverview Dr., Bay City</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	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	210.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Donald Good</u> Address: <u>714 Webb Dr, Bay City</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	20.00	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Hubert Gorney</u> Address: <u>496 Hale Dr, Bay City</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 type="checkbox"/> Fund Raiser	15.00	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Don Goulet</u> Address: <u>69 York St, Bay City</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	10.00	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/20/12</u> Name: <u>Tim Boutell</u> Address: <u>855 S. Linwood Beh., Linwood</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	250.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	295.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Nowell Box</u> Address: <u>3734 Old Kawkawlin Rd, Bay City</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	50.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Mike Buda</u> Address: <u>526 Handy Dr., Bay City</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	10.00	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>John DeJohn</u> Address: <u>300 Park Ave, Bay City</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	50.00	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>James Davison</u> Address: <u>2341 E. Beaver Rd, Bay City</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	20.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	130.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Greg Christie</u> Address: <u>347 Richards Rd, Bay City</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	15.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Mark Christie and Brian Christie</u> Address: <u>221 Kirby St, Bay City</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	20.00	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Ross Chambers</u> Address: <u>4202 Sherry Ct, Bay City</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	20.00	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Boyd and Dr. Mary Boettger</u> Address: <u>505 Harold St, Bay City</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)	85.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Don Duchene</u> Address: <u>356 Agnes, Bay City</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	20.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Terry Doyle</u> Address: <u>503 3rd, Bay City</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	10.00	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Tom Holtschlag</u> Address: <u>1721 W. N. Union, Auburn</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	10.00	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Art Dore</u> Address: <u>Po Box 146, Bay City</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	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	140.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Fred Dore</u> Address: <u>1101 Beaver Rd, Kewauwau</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>9/20/12</u> Name: <u>Frank and Sharon Yurgaites</u> Address: <u>4797 Bonnie Dr, Bay City</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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Susan Elder</u> Address: <u>915 5th St, Bay City</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	20.00	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Don and Pat Felske</u> Address: <u>1838 9th, Bay City</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	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	125.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>Jel and Kathy Lueth Johann</u> Address: <u>308 Sharpe St, Essexville</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	20.00	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Tracy DesJarlais</u> Address: <u>1308 Mercer St, Essexville</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	20.00	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Lori Redmond</u> Address: <u>201 N. Mountain, Bay City</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      4. Date of Receipt <u>9/20/12</u> Name: <u>Michael Stoner</u> Address: <u>1486 E. Mt. Forest Rd, Pinconning</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	20.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	100.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>John Konkle</u> Address: <u>1112 32nd St, Bay City</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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Chad Cunningham</u> Address: <u>290 Killarney Beh, Bay City</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 # 3      PAC Receipt? <input checked="" type="checkbox"/> YES      4. Date of Receipt <u>9/20/12</u> Name: <u>Mi. Boilermakers Local 169</u> Address: <u>1755 Fairlane Dr, Allen Park 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>9/20/12</u> Name: <u>James Putt</u> Address: <u>5890 S. Garfield Rd, Auburn</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	15.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	280.00	

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MICHIGAN DEPARTMENT OF STATE  
Bureau of Elections

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/20/12</u> Name: <u>John Pflueger, Jr.</u> Address: <u>5389 Harvest Ct., Bay City</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>9/20/12</u> Name: <u>Louis Meyette</u> Address: <u>4115 Shannon Pl., Bay City</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	15.00	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/11/12</u> Name: <u>Karen Jacobs</u> Address: <u>148 Little Killarney Beach, Bay City</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      4. Date of Receipt <u>9/11/12</u> Name: <u>Mary Murray</u> Address: <u>1251 N. Main St, Adrian</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	500.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	655.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>9/25/12</u> Name: <u>Dawn Klida</u> Address: <u>3092 E. Wilder Rd, Bay City</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>9/27/12</u> Name: <u>Diane Roth</u> Address: <u>516 Edwin St, Linwood</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	10.00	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/29/12</u> Name: <u>Richard Brzezinski</u> Address: <u>2413 25th St, Bay City</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	50.00	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9/26/12</u> Name: <u>Joseph Sheeran</u> Address: <u>1206 Wilderness Ct, Essexville</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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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>10/1/12</u> Name: <u>Plumbers and Steamfitters 85 PAC</u> Address: <u>PO Box 6547, Saginaw 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 #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/10/12</u> Name: <u>MP Fitzhugh</u> Address: <u>3077 Oakwood Ct, Bay City</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	10.00	
3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/13/12</u> Name: <u>Kurt Legner</u> Address: <u>308 S. Hampton St, Bay City</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	50.00	
3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/17/12</u> Name: <u>Sheet Metal Workers Local 7 PAC</u> Address: <u>4931 Contee Dr, Lansing</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 type="checkbox"/> Fund Raiser	2000.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	2260.00  8375.00	

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line 3a of  
Summary Page



MICHIGAN DEPARTMENT OF STATE  
Bureau of Elections

**ITEMIZED OTHER RECEIPTS  
SCHEDULE 1A-1  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027

2. Committee Name John E. Miller for Sheriff

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name: <u>UAW Local 362</u> Address: <u>4427 E. Wilder Rd.</u> <u>Bay City MI 48706</u>	Date of Receipt <u>10/4/12</u>	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input checked="" type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Fund Raiser	<u>200.00</u>
Receipt #2 Name: _____ Address: _____	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Fund Raiser	
Receipt #3 Name: _____ Address: _____	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Fund Raiser	
Receipt #4 Name: _____ Address: _____	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Fund Raiser	
Receipt #5 Name: _____ Address: _____	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Fund Raiser	
Receipt #6 Name: _____ Address: _____	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Fund Raiser	
Receipt #7 Name: _____ Address: _____	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Fund Raiser	

Page Subtotal 200.00  
 Grand Total of All Schedules 1A -1  
 (Complete on last page of Schedule) 200.00

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line 4 of Summary  
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MICHIGAN DEPARTMENT OF STATE  
Bureau of Elections

ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE

1. Committee I. D. Number 150027  
2. Committee Name John E. Miller for Sheriff

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>Hiro Kropp Ins.</u> Address <u>501 E. Midland St,</u> <u>Bay City MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Bond</u> Expenditure Code <u>IN</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/4/12</u>	<u>50.00</u>
Expenditure #2 Name <u>State of Michigan</u> Address <u>PO Box 30140</u> <u>Lansing MI 48909</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>taxes/License</u> Expenditure Code <u>TX</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/4/12</u>  <u>9/28/12</u>	<u>25.00</u>  <u>124.73</u>
Expenditure #3 Name <u>B.C. Dem. Press</u> Address <u>309 Ninth St.</u> <u>Bay City MI 48707-0278</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>printing</u> Expenditure Code <u>PA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/5/12</u>	<u>164.30</u>
Expenditure #4 Name <u>Jody Scott</u> Address <u>3600 N. Enclave</u> <u>Bay City MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>adv. Reimbursement</u> Expenditure Code <u>PA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/5/12</u> <u>9/17/12</u> <u>9/17/12</u>	<u>68.88</u> <u>297.40</u> <u>100.00</u>
Expenditure #5 Name <u>Postmaster</u> Address <u>KawKawlin Post Office</u> <u>KawKawlin MI 48631-2511</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>postage</u> Expenditure Code <u>MM</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/6/12</u> <u>10/9/12</u> <u>10/17/12</u>	<u>225.00</u> <u>1462.06</u> <u>5367.21</u>

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

7884.18  
17030.24

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Summary Page

PLEASE REFER TO INSTRUCTIONS FOR LIST OF EXPENDITURE CODES



MICHIGAN DEPARTMENT OF STATE  
Bureau of Elections

ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE

1. Committee I. D. Number 150027  
2. Committee Name John G. Miller for Sheriff

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>Local 362 UAW</u> Address <u>4427 E. Wilder Rd</u> <u>Bay City MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser</u> Expenditure Code <u>FE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/13/12</u>	<u>375.00</u>
Expenditure #2 Name <u>John Miller</u> Address <u>309 N. Barclay</u> <u>Bay City MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>signs</u> Expenditure Code <u>PA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/13/12</u>	<u>2726.42</u>
Expenditure #3 Name <u>GFS</u> Address <u>3730 Wilder Rd,</u> <u>Bay City MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser</u> Expenditure Code <u>FE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/17/12</u> <u>9/17/12</u> <u>9/20/12</u> <u>9/20/12</u>	<u>89.01</u> <u>150.55</u> <u>4.27</u> <u>11.86</u>
Expenditure #4 Name <u>Diane Selich</u> Address <u>802 W. Huron Ave.</u> <u>Vassar, MI 48768</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraising exp.</u> Expenditure Code <u>FE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/19/12</u> <u>9/21/12</u>	<u>353.47</u> <u>11.91</u>
Expenditure #5 Name <u>Krzyziaks</u> Address <u>1605 Michigan Ave</u> <u>Bay City MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser</u> Expenditure Code <u>FE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/26/12</u>	<u>75.00</u>

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

3797.49

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Summary Page

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MICHIGAN DEPARTMENT OF STATE  
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ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE

1. Committee I. D. Number 150027  
2. Committee Name John G. Miller for Sheriff

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>Tim Kelly</u> Address <u>2152 Sixth St.</u> <u>Bay City MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>ticket purchase</u> Expenditure Code <u>TC</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/26/12</u>	<u>25.00</u>
Expenditure #2 Name <u>Pat Beson</u> Address <u>1408 S. Huron Rd.</u> <u>Kalamazoo MI 48631</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser</u> Expenditure Code <u>FE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/28/12</u>	<u>438.71</u>
Expenditure #3 Name <u>Placemats 4 You</u> Address <u>PO Box 34</u> <u>4910 S. Gera Rd</u> <u>Frankenmuth MI 48734</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertising</u> Expenditure Code <u>PA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/9/12</u>	<u>650.00</u>
Expenditure #4 Name <u>Dornbos</u> Address <u>1131 E. Genesee Ave.</u> <u>Saginaw MI 48607</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> Expenditure Code <u>PA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/9/12</u> <u>10/17/12</u>	<u>3121.70</u> <u>1043.20</u>
Expenditure #5 Name <u>Staples</u> Address <u>4621 N. Euclid Ave.</u> <u>Bay City MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Supplies</u> Expenditure Code <u>OE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/7/12</u>	<u>69.96</u>

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

5348.57

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Summary Page

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MICHIGAN DEPARTMENT OF STATE  
Bureau of Elections

**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150027  
2. Committee Name John E. Milley for Sheriff

**- USE A SEPARATE SHEET FOR EACH EVENT -**

3. Date Event Was Held  <u>9</u> <u>20</u> <u>12</u> Month      Day      Year	4. Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity  <u>Brats + Bev. BBQ</u>	6. Address and Name (If any) of the place where the activity was held  <u>UAW Local 362 Hall</u>  Private Residence
--	--	---	---

7. Total Contributions of \$20.00 or less 3334.00  
 8. Total Contributions of \$20.01 or more -  
 9. SUBTOTAL (Add lines 7 and 8) 3334.00  
 10. Other Receipts -  
 11. Gross Receipts (Add lines 9 and 10) 3334.00  
 12. Total Cost of Event\* and All Made For the Event 1130.51

\*Includes In-Kind Contributions Expenditures

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 (1-1K), 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.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

[www.Michigan.gov/sos](http://www.Michigan.gov/sos)

**LATE CONTRIBUTION REPORT**

1. Your Committee ID#: 150027
2. Your Committee Name: John E. Miller for Sheriff
3. Date Late Contribution(s) Received: 10/25/12 (Only one Date per Sheet)

- Late Contribution Reports are required when a
  - Candidate committee receives a single contribution or a cumulative contribution from the same contributor of \$500.00 or more after the closing date of the last campaign statement required and the 3<sup>rd</sup> day before an election where the candidate is participating. See Appendix G of the Campaign Finance Manual.
  - A committee other than a candidate committee (PAC, Ballot Question or Political Party) receives a single contribution or a cumulative contribution from the same contributor of \$2,500.00 or more after the closing date of the last campaign statement required and the 3<sup>rd</sup> day before an election. See Appendix G of the Campaign Finance Manual.
- Contributions are anything of monetary value including contributions of money, in-kind and loans to the committee.
- Late Contribution Reports are not waived by the Reporting Waiver.
- Late Contribution Reports that are filed late result in the committee receiving a late filing fee. The maximum fee is \$2,000.00 per report.
- Paper filers may file the report by any written means (including fax) within 48 hour of receipt of the contribution with your Filing Official.
- Electronic Filers on the state level must file all Late Contribution Report electronically.
- The Late Contribution must also be reported on the next Campaign Statement owed by the committee.

4. Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial and if the contributor is an individual, the Occupation, Employer and Business address of the contributor.	5. Amount
Contributor Name and Address: <u>IBEW</u> <u>900 7th St, Washington DC 20001</u> (If Individual, also provide:) Occupation <u>labor union</u> Employer / Business Address <u>900 7th St, Washington DC</u>	500.00
Contributor Name and Address:  (If Individual, also provide:) Occupation _____ Employer / Business Address _____	
Contributor Name and Address:  (If Individual, also provide:) Occupation _____ Employer / Business Address _____	<div style="text-align: center;"> <p>FILED 10TH JUDICIAL CIRCUIT COURT</p> <p>BY _____</p> <p>OCT 29 1 25 PM '12</p> </div>
Contributor Name and Address:  (If Individual, also provide:) Occupation _____ Employer / Business Address _____	