



**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: Oct 18, 2010 to 11/22/2010

1. Committee I.D. Number
150510

4. Candidate Last Name Rivard First Name Michael M.I. G.

2. Committee Name
The Committee to Elect Mike Rivard for Roads

4a. Office Sought Including District # or Community Served (If applicable)
Bay County Road Commission

5. Committee's Mailing Address
840 N. Garfield Rd
Linwood, MI 48634
Area Code and Phone 989-879-5685
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.

6. Treasurer's Name & Residential Address
Mike Rivard
840 N. Garfield Rd
Linwood, MI 48634
Area Code & Phone 989-879-5685

7. Treasurer's Business Address
840 N. Garfield Rd
Linwood, MI 48634
Area Code and Phone 989-879-5685

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

Area Code and Phone _____

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
November 2, 2010

9c. Annual Statement (_____ Coverage Year)
9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)
9e. Dissolution of Candidate Committee
Effective Date of Dissolution _____
By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.
Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.

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

Current Treasurer or Designated Record Keeper Michael G. Rivard Michael Rivard Date 11-29-10
Candidate Michael G. Rivard Michael Rivard Date 11-29-10





1. Committee I.D. Number 150510
 2. Committee Name The Committee to Elect Mike Rivard for Roads

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>2,751.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>2,751.00</u>	(18.) \$ _____
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0</u>	(19.) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>2,751.00</u>	(20.) \$ _____
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>0</u>	(21.) \$ _____
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0</u>	(22.) \$ _____
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>1,679.95</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>1,679.95</u>	(23.) \$ _____
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>0</u>	(24.) \$ _____
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ _____	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>4800.00</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>91.79</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>2,751.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>2,842.79</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>1,679.95</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>1,162.84</u> *	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150510
2. Committee Name The Committee to Elect Mike Rivard for Roads

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/26/10</u>	
Name & Address: <u>Vaughn Begick</u> <u>5355 Lorraine Ct.</u> <u>Bay City, MI 48706</u>		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
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>10/31/10</u>	
Name & Address: <u>Robert Vennix</u> <u>Mackinaw Rd</u> <u>Linwood, MI 48634</u>		\$ <u>19.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Mike & Tamatha Bouckaert</u> <u>4799 Stephen Ct</u> <u>Auburn, MI 48611</u>		\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Mike Green for Senate</u> <u>1500 E. Blackmore Rd</u> <u>Mayville, MI 48744-9588</u>		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal \$ 269.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150510
2. Committee Name The Committee to Elect Mike Rivard for Roads

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Dave Niemann</u> <u>181 River Trail</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/31/10</u>	\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>Terry Kelly</u> <u>164 Bay Shore Dr</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/31/10</u>	\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>Tom Niemann</u> <u>4058 Allen Ct</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/31/10</u>	\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>Eric Johnson</u> <u>2228 Kara Dr.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/31/10</u>	\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$250.00

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

Enter this total on
line 3a of Summary
Page.

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150510
2. Committee Name The Committee to Elect Mike Rivard for Roads

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Robert + Sue Bloenk</u> <u>1111 N. Water St.</u> <u>Bay City, MI 48706</u>		<u>\$25.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Dennis Poirier</u> <u>1265 Orchard</u> <u>Essexville, MI 48732</u>		<u>\$25.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Jeffrey Shorkey</u> <u>53 Wheeler Rd</u> <u>Bay City, MI 48706</u>		<u>\$25.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Vaughn Begick</u> <u>5353 Lorraine Ct</u> <u>Bay City MI 48706</u>		<u>\$25.00</u>	<u>\$125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>County Commissioner</u> Employer <u>Bay County</u>		Click Here for Memo Itemization	
Business Address <u>515 Center Ave, Bay City MI 48708</u>			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal \$100.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150510
2. Committee Name The Committee Elect Mike Rivard for Roads

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Patricia Schmidt</u> <u>Ted Meteria</u> <u>1007 N. McHellan</u> <u>Bay City, MI 48708</u>		<u>\$20.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Stanley MacDonald</u> <u>1408 N. Trumbull</u> <u>Bay City, MI 48708</u>		<u>\$30.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Kellie Snyder</u> <u>1204 Elm St.</u> <u>Bay City, MI 48706</u>		<u>\$50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Matt Lance</u> <u>306 S. Johnson</u> <u>Bay City, MI 48708</u>		<u>\$20.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal \$120.00
Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150510
2. Committee Name The Committee to Elect Mike Rivard for Roads

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Earl Bovia</u> <u>4649 Cedar Lane</u> <u>Bay City, MI 48706</u>		\$ <u>30.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Sally Preston</u> <u>4491 E Park Dr.</u> <u>Bay City, MI 48706</u>		\$ <u>25.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Chris Rupp</u> <u>175 S. Lincoln Rd</u> <u>Bay City, MI 48708</u>		\$ <u>21.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Aaron Bayliss</u> <u>1332 Finn Rd</u> <u>Munger, MI 48747</u>		\$ <u>7.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal \$83.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150510
2. Committee Name The Committee to Elect Mike Rivaud for Roads

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/31/10

Name & Address:
Mark Janer
1701 Mosher
Bay City, MI 48706

6. Amount \$14.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 2 PAC Receipt? YES 4. Date of Receipt 10/31/10

Name & Address:
Robert Cnudde
1135 Heavenridge
Essexville, MI 48732

6. Amount \$40.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/31/10

Name & Address:
Joc Davis
909 N. Wenona St.
Bay City, MI 48706

6. Amount \$14.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/31/10

Name & Address:
Joe + Sue Maxwell
2715 Pasadena Dr.
Bay City, MI 48706

6. Amount \$20.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ _____

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

Page Subtotal \$88.00

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



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150510
2. Committee Name The Committee to Elect Mike Rivard for Roads

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Larry + Patty Wiley</u> <u>2232 S. Wakely</u> St <u>Bridge Rd</u> <u>Grayling, MI 4</u>		\$ <u>20.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Eric + Bex Zimostad</u> <u>1105 Maple</u> <u>Essexville, MI 48732</u>		\$ <u>20.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Mike Erwin</u> <u>1312 Nebobish</u> <u>Essexville, MI 48732</u>		\$ <u>14.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Robert Bloenk</u> <u>1111 Water St.</u> <u>Bay City, MI 48708</u>		\$ <u>7.00</u>	\$ <u>32.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal \$61.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150510
2. Committee Name The Committee to Elect Mike Rivard for Roads

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Mary Ida Doan</u> <u>600 DeWitt St</u> <u>Bay City, MI 48706</u>		\$ <u>7.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Jeff Wilson</u> <u>54 River Trail</u> <u>Bay City, MI 48706</u>		\$ <u>35.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Kyle Bostwick</u> <u>Judy Brunner</u> <u>5923 Michigan Ave</u> <u>Saginaw, MI 48638</u>		\$ <u>14.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Louis Pomaville</u> <u>2585 N. Euclid Ave</u> <u>Bay City, MI 48706</u>		\$ <u>14.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal \$ 70.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150510
2. Committee Name The Committee to Elect Mike Rivar
for Roads

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Mike MacDonald</u> <u>4312 Hushen Dr.</u> <u>Bay City, MI 48706</u>		\$ <u>14.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Nick Vought</u> <u>5406 Meadowbrook</u> <u>Bay City, MI 48706</u>		\$ <u>14.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Herb + Mary Martin</u> <u>408 N. Alp St</u> <u>Bay City, MI 48706</u>		\$ <u>14.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Betty Hintz</u> <u>823 Farragut</u> <u>Bay City, MI 48706</u>		\$ <u>14.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal \$56.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150510
2. Committee Name The Committee to Elect Mike Rivard for Roads

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Joel Johnson</u> <u>9990 Bass Lake</u> <u>Clare, MI 48617</u>		\$ <u>14.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Jerry & Joyce Rivard</u> <u>752 N. Carter Rd</u> <u>Linwood, MI 48634</u>		\$ <u>20.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Guy + Nancy Greve</u> <u>2300 Nurmi Dr</u> <u>Bay City, MI 48708</u>		\$ <u>21.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Jack Loehr</u> <u>3025 Crestwood</u> <u>Bay City, MI 48706</u>		\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal \$105.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150510
2. Committee Name the Committee to elect MIKE RIVARD for ROADS

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>AL HERMAN</u> <u>3221 BEAVER RD</u> <u>BAY CITY, MI 48706</u>		\$ <u>10.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>MIKE SIMSTAD</u> <u>3318 BROADMORE</u> <u>BAY CITY MI 48706</u>		\$ <u>14.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>LISA STRONG</u> <u>1407 S. ERIE</u> <u>BAY CITY MI 48706</u>		\$ <u>14.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>TAMMY STRONG</u> <u>2209 CARROLL RD</u> <u>BAY CITY MI 48708</u>		\$ <u>14.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal \$ 52.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150 510
2. Committee Name the Committee to Elect MIKE RIVARD for Road 3

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>MICHAEL REZLER</u> <u>1010 BANGOR ST</u> <u>BAY CITY MI 48706</u>		\$ <u>14.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>DAVID KOSTUS</u> <u>1060 Pine Rd</u> <u>BAY CITY MI 48706</u>		\$ <u>14.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>NELSON NIEDERER</u> <u>5402 ELMVIEW DR</u> <u>BAY CITY MI</u>		\$ <u>10.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>BECKY VANSUMEREN</u> <u>889 SHADY SHIRE</u> <u>BAY CITY MI 48706</u>		\$ <u>7.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 45.00
Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150510
2. Committee Name the Committee to Elect Mike Zurb
for Roads

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Joanne Krakowski</u> <u>2648 22nd St</u> <u>Bay City, MI 48708</u>		\$ <u>10.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Ron Knierim</u> <u>PO Box 422</u> <u>Merrill, MI</u>		\$ <u>14.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Linda Gerren</u> <u>306 Birney</u> <u>Essexville, MI 48732</u>		\$ <u>7.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Ellen Graham</u> <u>2798 Westwood Dr.</u> <u>Bay City, MI 48706</u>		\$ <u>7.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal \$38.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150510
2. Committee Name The Committee to Elect Mike Rivard for Roads

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Evan Rupp</u> <u>175 S. Lincoln Rd</u> <u>Bay City, MI 48708</u>		\$ <u>7.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Rich & Lois Niemann</u> <u>4081 Richlyn Ct</u> <u>Bay City, MI 48706</u>		\$ <u>20.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Gloria Byington</u> <u>2509 25th St</u> <u>Bay City, MI 48708</u>		\$ <u>10.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/31/10</u>	
Name & Address: <u>Nancy Cummings</u> <u>100 Cherry Lane</u> <u>Bay City, MI 48706</u>		\$ <u>7.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal \$44.00
Grand Total of All Schedules 1A \$381.00
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150510
2. Committee Name The Committee to Elect Mike Rivard for Roads

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>Walt Duranczyk</u> <u>760 W North Union Rd</u> <u>Auburn, MI 48611</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/26/10</u>	\$ <u>20.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>Herb + Mary Martin</u> <u>408 N. Alp St</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/28/10</u>	\$ <u>100.00</u>	\$ <u>114.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>Melody + Marvin Wood</u> <u>2030 E. Salzburg Rd</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/28/10</u>	\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>Tim + Beth Boutell</u> <u>855 S. Linwood Beach Rd</u> <u>Linwood, MI 48634</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/29/10</u>	\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$220.00
Grand Total of All Schedules 1A \$1557.00
(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150510
2. Committee Name The Committee to Elect Mike Rivard for Roads

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/29/10</u>	
Name & Address: <u>Daniel Pletzke</u> <u>1067 Shady Shore Dr.</u> <u>Bay City, MI 48706</u>		\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
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>10/26/10</u>	
Name & Address: <u>Michael G. Rivard</u> <u>840 N. Garfield Rd</u> <u>Linwood, MI 48634</u>		\$ <u>1,100.00</u>	\$ <u>4,800.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Self employed</u> Employer <u>Rivard Bros. Inc.</u>		Click Here for Memo Itemization	
Business Address <u>944 Saganing Rd Bentley, MI 48613</u>			
Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	
Name & Address: _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	
Name & Address: _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal \$50.00 1150.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule) \$2,751.00

Enter this total on
line 3a of Summary
Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 150510
 2. Committee Name The Committee to Elect Mike Rivard for Roads

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>UAW Local 362</u> Address <u>447 Wilder Rd</u> <u>Bay City, MI 48706</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Hall Rental</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/18/10</u> Date	<u>\$150.00</u>
Expenditure #2 Name <u>Staples</u> Address <u>4021 N. Euclid Ave</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Office Supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/12/10</u> Date	<u>\$84.26</u>
Expenditure #3 Name <u>Staples</u> Address <u>4021 N. Euclid Ave</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Office Supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/17/10</u> Date	<u>\$25.22</u>
Expenditure #4 Name <u>Walmart</u> Address <u>3921 Wilder Rd</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Office Supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/20/10</u> Date	<u>\$00.98</u>
Expenditure #5 Name <u>Office Max</u> Address <u>3272 Tittabawassee</u> <u>Saginaw, MI 48604</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Office Supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/21/10</u> Date	<u>\$62.91</u>

Subtotal this page 423.33

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 150510
2. Committee Name The Committee to Elect Mike Rivard for Roads

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Meijer</u> Address <u>E. Wilder Rd</u> <u>Bay City, MI 48706</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/22/10</u> Date	<u>\$ 175.00</u>
Expenditure #2 Name <u>Staples</u> Address <u>4021 Wilder Rd</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Office Supplies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/22/10</u> Date	<u>\$ 99.61</u>
Expenditure #3 Name <u>Target</u> Address <u>E. Wilder Rd</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Print Cartridges</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/24/10</u> Date	<u>\$ 154.08</u>
Expenditure #4 Name <u>Committee to Elect Cynthia Kuczak</u> Address <u>808 Frost Drive</u> <u>Bay City, MI 48706</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/27/10</u> Date	<u>\$ 20.00</u>
Expenditure #5 Name <u>Gordon Food Service</u> Address <u>3730 Wilder Rd</u> <u>Bay City, MI 48706</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/29/10</u> Date	<u>439.14</u> 297.70

Subtotal this page 887.83

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 150510
2. Committee Name The Committee to Elect Mike Ruard for Roads

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name: <u>Bay Area Rental</u> Address: <u>3595 S. Huron Rd</u> <u>Bay City, MI 48706</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser</u> <u>(Cookers)</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/30/10</u> Date	<u>\$63.60</u>
Expenditure #2 Name: <u>Grand Rental Station</u> Address: <u>1109 Salzburg</u> <u>Bay City, MI 48706</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser</u> <u>(Propane Gas)</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/30/10</u> Date	<u>\$ 18.50</u>
Expenditure #3 Name: <u>Aldi Foods</u> Address: <u>4101 N. Euclid Ave</u> <u>Bay City, MI 48706</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser</u> <u>(food)</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/30/10</u> Date	<u>\$ 50.29</u>
Expenditure #4 Name: <u>Shell Oil</u> Address: <u>Pinconning MI 48650</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Gas</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/23/10</u> Date	<u>\$ 42.00</u>
Expenditure #5 Name: <u>Krogers</u> Address: <u>N. Euclid Ave</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Gas</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/26/10</u> Date	<u>\$ 38.25</u>

Subtotal this page 212.64

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 150510
2. Committee Name The Committee to Elect Mike Rivard for Roads

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Speedway</u> Address <u>N. Euclid Ave</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Gas</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/2/10</u> Date	<u>\$ 39.40</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>Admiral</u> Address <u>N. Euclid Ave</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Gas</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/3/10</u> Date	<u>\$ 75.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>Speedway</u> Address <u>N. Euclid Ave</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Gas</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/2/10</u> Date	<u>\$ 41.75</u> Click Here for Memo Itemization Type
Expenditure #4 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____ Click Here for Memo Itemization Type
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____ Click Here for Memo Itemization Type

Subtotal this page 156.15
Grand Total of all Schedules 1B (Complete on last page of Schedule) 1679.95

Enter this total on line 8a of Summary Page



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

1. Committee I.D. Number 150510
2. Committee Name The Committee to Elect Mike Rivard for Roads

This Schedule itemizes:

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

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Michael G. Rivard 840 N. Garfield Rd Linwood, MI 48634	4. Type: <u>Loan to Committee</u> 5. <u>Date Debt Was Incurred:</u> <u>5-13-08</u> 6. <u>Original Amount of Debt:</u> <u>\$3,000.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0</u>	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Michael G. Rivard 840 N. Garfield Rd Linwood, MI 48634	4. Type: <u>Loan to Committee</u> 5. <u>Date Debt Was Incurred:</u> <u>7-7-10</u> 6. <u>Original Amount of Debt:</u> <u>\$700.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0</u>	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Michael G. Rivard 840 N. Garfield Rd Linwood, MI 48634	4. Type: <u>Loan to Committee</u> 5. <u>Date Debt Was Incurred:</u> <u>10-26-10</u> 6. <u>Original Amount of Debt:</u> <u>\$1100.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0</u>	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) \$4,800.00

Grand Total of all Schedules 1E \$4,800.00
(Complete on last page of Schedule showing amounts owed by or to the committee)

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

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150510
 2. Committee Name The Committee to Elect Mike Rivard for Roads

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>October 31, 2010</u>	4. Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity <u>Breakfast</u>	6. Address and Name (If any) of the place where the activity was held. <u>UAW Local 362 4427 Wilder Rd Bay City, MI 48706</u> <input type="checkbox"/> Private Residence
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7. Total Contributions \$1,381.00
 8. Other Receipts 0
 9. Gross Receipts (Add lines 7 and 8) \$1,381.00
 10. Total Cost of Event \$959.44
 (Total Cost includes in-Kind Contributions and All Expenditures Made For the Event)

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

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

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