



**CANDIDATE COMMITTEE  
COVER PAGE**

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 10/19/15 to 11/23/15

1. Committee I.D. Number  
**150258**

2. Committee Name  
**Friends of Chris Girard**

4. Candidate Last Name **Girard** First Name **Christopher** M.I. **R**

4a. Office Sought Including District # or Community Served (If applicable)  
**Mayor of the City of Bay City, MI**

4b. County of Residence **BAY**

5. Committee's Mailing Address  
**100 Braddock St.  
Bay City, MI 48708**

Area Code and Phone (989) 450-7827  
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  
**Estee Bowman  
906 McCormick St.  
Bay City, MI 48708**

Area Code & Phone (989) 450-5359

7. Treasurer's Business Address

Area Code and Phone \_\_\_\_\_

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

Area Code and Phone \_\_\_\_\_

FILED  
18TH JUDICIAL  
CIRCUIT COURT  
2015 DEC - 3 A 8:05  
BAY COUNTY CLERK  
CYNTHIA A. LUCZAK

9. TYPE OF STATEMENT

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

Pre-Election or Post-Election Statement relates to:

Primary

General

Convention

Special

School

Caucus

Date of Election, Convention or Caucus  
11/03/15

Required ONLY if candidate is not on the ballot for the current year:

July Quarterly

October Quarterly

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

By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt.

Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Effective date of dissolution  
\_\_\_\_\_

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

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 Estee M. Bowman Type or Print Name  
Estee Bowman Signature Date 12-3-15

Candidate Christopher R. Girard Type or Print Name  
Christopher R Girard Signature Date 12-3-15



1. Committee I.D. Number 150258

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name Friends of Chris Girard

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>230.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$230.00</u>	(18.) \$ <u>\$7,790.00</u>
<b>4. Other Receipts (Schedule 1A -1, Column 6)</b>	(4.) \$ <u>\$0.00</u>	(19.) \$ <u>\$0.00</u>
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$ <u>\$230.00</u>	(20.) \$ <u>\$7,790.00</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
<b>6. In-Kind Contributions (Schedule 1-IK, Column 7)</b>	(6.) \$ <u>\$0.00</u>	(21.) \$ <u>\$1,627.60</u>
<b>7. In-Kind Expenditures (Schedule 1B-IK, Column 6)</b>	(7.) \$ <u>\$0.00</u>	(22.) \$ <u>\$0.00</u>
<b>EXPENDITURES</b>		
<b>8. Expenditures</b>		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$1,230.87</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>\$0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>\$0.00</u>	
<b>9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)</b>	(9.) \$ <u>\$1,230.87</u>	(23.) \$ <u>\$7,790.00</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)		
<b>10. Disbursements</b>		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>\$0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>\$0.00</u>	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$ <u>\$0.00</u>	(24.) \$ <u>\$0.00</u>
<b>DEBTS AND OBLIGATIONS</b>		
<b>12. Debts and Obligations</b>		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>\$0.00</u>	
<b>BALANCE STATEMENT</b>		
<b>13. Ending Balance of last report filed</b> (Enter zero if no previous reports have been filed.)	(13.) \$ <u>\$1,000.87</u>	
<b>14. Amount received during reporting period</b> (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$230.00</u>	
<b>15. SUBTOTAL Add lines 13 and 14</b>	(15.) = \$ <u>\$1,230.87</u>	
<b>16. Amount expended during reporting period</b> (Add lines 9 and 11)	(16.) - \$ <u>\$1,230.87</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ <u>\$0.00</u>	*



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150258  
2. Committee Name Friends of Chris Girard

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>10/31/15</u> Name & Address: <b>James Stoddard</b> 2316 Nurmi Dr. Bay City, MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>11/02/15</u> Name & Address: <b>Michelle Martin</b> 614 Nurmi Court Bay City, MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>11/02/15</u> Name & Address: <b>Bill Hewitt</b> 701 Center Ave., Apt. 2 Bay City, MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>30.00</u>	\$ <u>30.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____ Name & Address: _____ _____ _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ _____	\$ _____  <a href="#">Click Here for Memo Itemization</a>

Page Subtotal	\$230.00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$230.00

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 150258  
2. Committee Name Friends of Chris Girard

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>City of Bay City Treasurer</u> Address <u>301 Washington Ave.</u> <u>Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>voter list</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/19/15</u> Date	<u>\$ 234.64</u>
Expenditure #2 Name <u>Chris Girard</u> Address <u>100 Braddock St.</u> <u>Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>loan repayment</u> Click Here for Memo Itemization Type <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/23/15</u> Date	<u>\$ 996.23</u>
Expenditure #3 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #4 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page	<b>\$1,230.87</b>
Grand Total of all Schedules 1B (Complete on last page of Schedule)	<b>\$1,230.87</b>

Enter this total  
on line 8a of  
Summary Page



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

1. Committee I.D. Number 150258  
2. Committee Name Friends of Chris Girard

This Schedule itemizes:

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

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (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: <b>Chris Girard</b> 100 Braddock St. Bay City, MI 48708  If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____	4. Type: <u>Loan from Candidate</u> 5. <u>Date Debt Was Incurred:</u> <u>03/18/15</u> 6. <u>Original Amount of Debt:</u> <u>\$ 100.00</u>	<u>11/23/15 \$ 100.00</u> _____ \$ _____ _____ \$ _____ _____ \$ _____ _____ \$ _____	\$ <u>100.00</u>	<u>\$ 0.00</u>  <input type="checkbox"/> FORGIVEN
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <b>Chris Girard</b> 100 Braddock St. Bay City, MI 48708  If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____	4. Type: <u>Loan from Candidate</u> 5. <u>Date Debt Was Incurred:</u> <u>5/6/15</u> 6. <u>Original Amount of Debt:</u> <u>\$ 400.00</u>	<u>11/23/15 \$ 400.00</u> _____ \$ _____ _____ \$ _____ _____ \$ _____ _____ \$ _____	\$ <u>400.00</u>	<u>\$ 0.00</u>  <input type="checkbox"/> FORGIVEN
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: <b>Chris Girard</b> 100 Braddock St. Bay City, MI 48708  If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____	4. Type: <u>Loan from Candidate</u> 5. <u>Date Debt Was Incurred:</u> <u>7/29/15</u> 6. <u>Original Amount of Debt:</u> <u>\$ 3,000.00</u>	<u>11/23/15 \$ 496.23</u> _____ \$ _____ _____ \$ _____ _____ \$ _____ _____ \$ _____	\$ <u>496.23</u>	<u>\$ 2,503.77</u>  <input checked="" type="checkbox"/> FORGIVEN

Page Subtotal (Outstanding debt) **\$0.00**  
Grand Total of all Schedules 1E **\$0.00**  
(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.