



**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 8/27/14 to 10/19/14

<p>1. Committee I.D. Number <u>150642</u></p> <p>2. Committee Name <u>Committee to elect Tom Herek</u></p>	<p>4. Candidate Last Name <u>Herek</u> First Name <u>Thomas</u> M.I. <u>m</u></p> <p>4a. Office Sought Including District # or Community Served (if applicable) <u>5th District County Commissioner</u></p> <p>4b. County of Residence <u>BAY</u></p>
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<p>5. Committee's Mailing Address <u>1606 30th ST Bay City, MI 48708</u></p> <p>Area Code and Phone <u>(989) 892-6924</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 & Residential Address <u>Christine Herek</u></p> <p>Area Code & Phone <u>(989) 892-6924</u></p>
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<p>7. Treasurer's Business Address <u>1606 30th Bay City, MI 48708</u></p> <p>Area Code and Phone _____</p>	<p>8. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper)</p> <p>Area Code and Phone _____</p>
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<p>9. TYPE OF STATEMENT</p> <p>9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input type="checkbox"/> Primary</p> <p><input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Convention</p> <p><input type="checkbox"/> Special</p> <p><input type="checkbox"/> School</p> <p><input type="checkbox"/> Caucus</p> <p>Date of Election, Convention or Caucus _____</p>	<p>Required ONLY if candidate is not on the ballot for the current year:</p> <p><input type="checkbox"/> July Quarterly</p> <p><input type="checkbox"/> October Quarterly</p> <p>9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year</p> <p>9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)</p>	<p>9e. Dissolution of Candidate Committee</p> <p><input type="checkbox"/> 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.</p> <p>Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.</p> <p>Effective date of dissolution _____</p> <p>Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.</p>
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Paid 10-24-14

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

Current Treasurer or Designated Record Keeper	<u>Christine C Herek</u>	<u>Christina C Herek</u>	Date <u>10/23/14</u>
	Type or Print Name	Signature	
Candidate	<u>Thomas M. Herek</u>	<u>Thomas M Herek</u>	Date <u>10/23/14</u>
	Type or Print Name	Signature	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 150642

2. Committee Name committee to elect Tom Herek

**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>1760.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>1760.00</u>	(18.) \$ <u>2560 34</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _____	(19.) \$ _____
6. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>1760.00</u>	(20.) \$ <u>2560 34</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>0.00</u>	(21.) \$ <u>0.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0.00</u>	(22.) \$ <u>0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>859 53</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ _____	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ _____	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>859 53</u>	(23.) \$ <u>1850.34</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ _____	(24.) \$ <u>0.00</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>3300.34</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>3300.34</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>111.20</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>1760.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>1871.20</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>859.53</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>1011.67</u>	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150642
2. Committee Name committee to elect Tom Heret

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>Mel McNally</u> <u>2081 Fraser Rd.</u> <u>Kawkawlin, MI 48631</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/11/14</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
Type of Contribution: Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> <u>Fund Raiser</u> <input checked="" type="checkbox"/>			
3. Contribution #2 Name & Address: <u>Amy COONAN</u> <u>1605 30th</u> <u>Bay City, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/11/14</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
Type of Contribution: Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> <u>Fund Raiser</u> <input checked="" type="checkbox"/>			
3. Contribution # 3 Name & Address: <u>Boyd Boettger</u> <u>505 Harold</u> <u>Bay City, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/11/14</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
Type of Contribution: Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> <u>Fund Raiser</u> <input checked="" type="checkbox"/>			
3. Contribution # 4 Name & Address: <u>Joe Heret</u> <u>1615 Green</u> <u>Bay City, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/11/14</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
Type of Contribution: Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> <u>Fund Raiser</u> <input checked="" type="checkbox"/>			

Page Subtotal 80⁰⁰

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 150642
2. Committee Name Committee to elect Tom Harek

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?	YES	4. Date of Receipt		
Name & Address: <u>Chais Hennessy</u> <u>1015 Center Ave</u> <u>Bay City, MI 48708</u>				\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>					
3. Contribution #2	PAC Receipt?	YES	4. Date of Receipt		
Name & Address: <u>Mike Halstead</u> <u>2329 Bay Woods Ct.</u> <u>Bay City, MI 48706</u>				\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>					
3. Contribution #3	PAC Receipt?	YES	4. Date of Receipt		
Name & Address: <u>Mark Zanotti</u> <u>1504 S. Sheridan</u> <u>Bay City, MI 48708</u>				\$ <u>70⁰⁰</u>	\$ <u>70⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>					
3. Contribution #4	PAC Receipt?	YES	4. Date of Receipt		
Name & Address: <u>Robert Russell</u> <u>1011 Hebride Hills Dr Apt A</u> <u>Akron, Ohio</u>				\$ <u>40⁰⁰</u>	\$ <u>40⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>					

Page Subtotal 150⁰⁰
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 150642
2. Committee Name Committee to elect Tom Hervek

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? YES	4. Date of Receipt	<u>9/11/14</u>		
Name & Address: <u>LAURA OGAR</u> <u>601 N. HAMPTON</u> <u>BAY CITY, MI 48708</u>				\$ <u>30⁰⁰</u>	\$ <u>30⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>					
3. Contribution # 2	PAC Receipt? YES	4. Date of Receipt	<u>9/11/14</u>		
Name & Address: <u>Tom Seidel</u> <u>119 Jay</u> <u>Saginaw, MI 48602</u>				\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>					
3. Contribution # 3	PAC Receipt? YES	4. Date of Receipt	<u>9/11/14</u>		
Name & Address: <u>George Zanotti</u> <u>906 W. INDIANA</u> <u>BAY CITY, MI 48706</u>				\$ <u>30⁰⁰</u>	\$ <u>30⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>					
3. Contribution # 4	PAC Receipt? YES	4. Date of Receipt	<u>9/11/14</u>		
Name & Address: <u>SARA SPENCER</u> <u>206 Reppuhn</u> <u>Bay City, MI 48706</u>				\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>					

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**ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE**

1. Committee I.D. Number 150642
2. Committee Name committee to elect Tom Herek

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? YES	4. Date of Receipt	<u>9/11/14</u>		
Name & Address: <u>Judy Cox</u> <u>403 N. Linn</u> <u>Bay City, MI 48706</u>				\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>					
3. Contribution # 2	PAC Receipt? YES	4. Date of Receipt	<u>9/11/14</u>		
Name & Address: <u>ANN GRAY</u> <u>1860 W. BEAVER RD</u> <u>Auburn, MI 48611</u>				\$ <u>75⁰⁰</u>	\$ <u>75⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>					
3. Contribution # 3	PAC Receipt? YES	4. Date of Receipt	<u>9/11/14</u>		
Name & Address: <u>Jim Conger</u> <u>1716 6th</u> <u>Bay City, MI 48708</u>				\$ <u>30⁰⁰</u>	\$ <u>30⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>					
3. Contribution # 4	PAC Receipt? YES	4. Date of Receipt	<u>9/11/14</u>		
Name & Address: <u>Joe Sheeran</u> <u>1206 Wildonness Ct</u> <u>Bay City, MI 48708</u>				\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>					

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 150642

2. Committee Name committee to elect Tom Hoveek

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?	YES	4. Date of Receipt		
Name & Address:					
<u>John. Miller</u>					
<u>309. W. Barclay</u>					
<u>Bay City, MI 48706</u>				\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide:					
Occupation _____		Employer _____			
Business Address _____					
Type of Contribution:	Direct	Loan from a person	<u>Fund Raiser</u>		
3. Contribution #2	PAC Receipt?	YES	4. Date of Receipt		
Name & Address:					
<u>Deb Russell</u>					
<u>1574 St. Mary's Ct</u>					
<u>Essexville, MI 48732</u>				\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide:					
Occupation _____		Employer _____			
Business Address _____					
Type of Contribution:	Direct	Loan from a person	<u>Fund Raiser</u>		
3. Contribution #3	PAC Receipt?	YES	4. Date of Receipt		
Name & Address:					
<u>Tim LeVasseur</u>					
<u>6310 Heather Ridge</u>					
<u>Bay City, MI 48706</u>				\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide:					
Occupation _____		Employer _____			
Business Address _____					
Type of Contribution:	Direct	Loan from a person	<u>Fund Raiser</u>		
3. Contribution #4	PAC Receipt?	YES	4. Date of Receipt		
Name & Address:					
<u>Dennne Bergen</u>					
<u>2335 Carroll Rd.</u>					
<u>Bay City, MI 48708</u>				\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide:					
Occupation _____		Employer _____			
Business Address _____					
Type of Contribution:	Direct	Loan from a person	<u>Fund Raiser</u>		

Page Subtotal

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CANDIDATE COMMITTEE**

1. Committee I.D. Number 150642
2. Committee Name Committee to elect Tom Hevelle

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? YES	4. Date of Receipt	<u>9/11/14</u>		
Name & Address: <u>Brian Redmond</u> <u>11 Bay Shore Dr</u> <u>Bay City, MI 48706</u>				\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>					
3. Contribution # 2	PAC Receipt? YES	4. Date of Receipt	<u>9/11/14</u>		
Name & Address: <u>Many Maskal</u> <u>5215 Prairie Cr</u> <u>Bay City, MI 48706</u>				\$ <u>25⁰⁰</u>	\$ <u>25⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>					
3. Contribution # 3	PAC Receipt? YES	4. Date of Receipt	<u>9/11/14</u>		
Name & Address: <u>Phyllis Wetters</u> <u>1419 Cottage Grove</u> <u>Linwood, MI 48634</u>				\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>					
3. Contribution # 4	PAC Receipt? YES	4. Date of Receipt	<u>9/11/14</u>		
Name & Address: <u>Paul Grocholski</u> <u>1305 S. Grant</u> <u>Bay City, MI 48708</u>				\$ <u>30⁰⁰</u>	\$ <u>30⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>					

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**ITEMIZED CONTRIBUTIONS
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2. Committee Name committee to elect Tom Heneak

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3. Contribution #1	PAC Receipt?	YES	4. Date of Receipt		
Name & Address: <u>Jeff Mayes</u> <u>4297 Zanden</u> <u>Bay City, MI 48708</u>				\$ <u>40⁰⁰</u>	\$ <u>40⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>					
3. Contribution #2	PAC Receipt?	YES	4. Date of Receipt		
Name & Address: <u>Bob Traxler</u> <u>2732 Oakmont</u> <u>Bay City, MI 48706</u>				\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>					
3. Contribution #3	PAC Receipt?	YES	4. Date of Receipt		
Name & Address: <u>Ernie Krygiew</u> <u>785 Appine Beach</u> <u>Bay City MI 48706</u>				\$ <u>30⁰⁰</u>	\$ <u>30⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: <u>Direct</u> Loan from a person <u>Fund Raiser</u>					
3. Contribution #4	PAC Receipt?	YES	4. Date of Receipt		
Name & Address: <u>Harry Gill</u> <u>3030 W. Riverview Dr.</u> <u>Bay City, MI 48706</u>				\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____					
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>					

Page Subtotal 170⁰⁰
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150642
2. Committee Name Committee to elect Tom Heck

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? YES	4. Date of Receipt	<u>9/11/14</u>		
Name & Address: <u>Kurt Asbury</u> <u>2125 6th</u> <u>Bay City, MI 48708</u>				\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 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? YES	4. Date of Receipt	<u>9/11/14</u>		
Name & Address: <u>John Kellerman</u> <u>3061 Hawthorne</u> <u>Bay City, MI 48706</u>				\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 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? YES	4. Date of Receipt	<u>9/11/14</u>		
Name & Address: <u>Frank Quinn</u> <u>4110 Creekwood</u> <u>Bay City, MI 48708</u>				\$ <u>30⁰⁰</u>	\$ <u>30⁰⁰</u>
5. If over \$100.00 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? YES	4. Date of Receipt	<u>9/11/14</u>		
Name & Address: <u>Joe Rivet</u> <u>2600 Center</u> <u>Bay City, MI 48708</u>				\$ <u>25⁰⁰</u>	\$ <u>25⁰⁰</u>
5. If over \$100.00 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					

Page Subtotal 95⁰⁰

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 150642
2. Committee Name Committee to elect Tom Herck

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? YES	4. Date of Receipt <u>9/11/14</u>		
Name & Address: <u>Don Tilley</u> <u>617 Green</u> <u>Bay City, MI 48708</u>			\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>				
3. Contribution #2	PAC Receipt? YES	4. Date of Receipt <u>9/11/14</u>		
Name & Address: <u>Kurt Hegner</u> <u>308 S. Hampton</u> <u>Bay City, MI 48708</u>			\$ <u>25⁰⁰</u>	\$ <u>25⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>				
3. Contribution #3	PAC Receipt? YES	4. Date of Receipt <u>9/11/14</u>		
Name & Address: <u>Walt Wozniak</u> <u>204 Pine</u> <u>Bay City, MI 48708</u>			\$ <u>30⁰⁰</u>	\$ <u>30⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>				
3. Contribution #4	PAC Receipt? YES	4. Date of Receipt <u>9/11/14</u>		
Name & Address: <u>Troy Cunningham</u> <u>5209 Prairie Creek Ct.</u> <u>Bay City, MI 48706</u>			\$ <u>30⁰⁰</u>	\$ <u>30⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>				

Page Subtotal 105⁰⁰
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 150642
2. Committee Name Committee to elect Tom Herek

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? YES	4. Date of Receipt <u>9/11/14</u>		
Name & Address: <u>Thomas Ryder</u> <u>601 N. Hampton</u> <u>Bay City, MI 48708</u>			\$ <u>60⁰⁰</u>	\$ <u>60⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>				
3. Contribution #2	PAC Receipt? YES	4. Date of Receipt <u>9/11/14</u>		
Name & Address: <u>Robert Redmond</u> <u>201 N. Mountain</u> <u>Bay City, MI 48708</u>			\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>				
3. Contribution #3	PAC Receipt? YES	4. Date of Receipt <u>9/11/14</u>		
Name & Address: <u>Richard Brezinski</u> <u>2413 25th</u> <u>Bay City, MI 48708</u>			\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>				
3. Contribution #4	PAC Receipt? YES	4. Date of Receipt <u>9/11/14</u>		
Name & Address: <u>Robert Pawlak</u> <u>260 N. Pine</u> <u>Bay City, MI 48708</u>			\$ <u>30⁰⁰</u>	\$ <u>30⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>				

Page Subtotal 160⁰⁰

Grand Total of All Schedules 1A
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Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150642
2. Committee Name Committee to elect Tom Herek

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? YES	4. Date of Receipt <u>9/11/14</u>		
Name & Address: <u>Keith Carolan</u> <u>2306 Gysin Ct.</u> <u>Bay City, MI 48708</u>			\$ <u>50⁰⁰</u>	\$ <u>50⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>				
3. Contribution #2	PAC Receipt? YES	4. Date of Receipt <u>9/11/14</u>		
Name & Address: <u>Rich Rytlewski</u> <u>1300 W. Thomas</u> <u>Bay City, MI 48706</u>			\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>				
3. Contribution # 3	PAC Receipt? YES	4. Date of Receipt <u>9/11/14</u>		
Name & Address: <u>Ed River</u> <u>3072 W. Birch Dr.</u> <u>Bay City, MI 48706</u>			\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>				
3. Contribution # 4	PAC Receipt? YES	4. Date of Receipt <u>9/11/14</u>		
Name & Address: <u>Beth Weber</u> <u>310 S. Johnson</u> <u>Bay City, MI 48708</u>			\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>				

Page Subtotal 110⁰⁰

Grand Total of All Schedules 1A
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Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150642
2. Committee Name Committee to elect Tom Hersek

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? YES	4. Date of Receipt <u>9/11/14</u>	
Name & Address: <u>Ron Mindykowski</u> <u>504 Arbor</u> <u>Bay City, MI 48706</u>		\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____			
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>			
3. Contribution # 2	PAC Receipt? YES	4. Date of Receipt <u>9/11/14</u>	
Name & Address: <u>Bob Jones</u> <u>2891 HENEDWAY LN</u> <u>KAWKAWLIN, MI 48631</u>		\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____			
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>			
3. Contribution # 3	PAC Receipt? YES	4. Date of Receipt <u>9/11/14</u>	
Name & Address: <u>Jim Hersek</u> <u>802 S. MADISON</u> <u>Bay City, MI 48708</u>		\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____			
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>			
3. Contribution # 4	PAC Receipt? YES	4. Date of Receipt <u>9/11/14</u>	
Name & Address: <u>Julie Reynolds</u> <u>370 Revilo</u> <u>Bay City, MI 48706</u>		\$ <u>40⁰⁰</u>	\$ <u>40⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____			
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>			

Page Subtotal 100⁰⁰
Grand Total of All Schedules 1A
(Complete on last page of Schedule)

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150642
2. Committee Name Committee to elect Tom Henek

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? YES	4. Date of Receipt <u>9/11/14</u>		
Name & Address: <u>Cheryl Wozniak</u> <u>816 Natures Ridge</u> <u>Bay City, MI 48708</u>			\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>				
3. Contribution #2	PAC Receipt? YES	4. Date of Receipt <u>9/11/14</u>		
Name & Address: <u>William Powell</u> <u>5277 Crestway</u> <u>Bay City, MI 48706</u>			\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>				
3. Contribution #3	PAC Receipt? YES	4. Date of Receipt <u>9/11/14</u>		
Name & Address: <u>Mike Buda</u> <u>526 Handy Dr</u> <u>Bay City, MI 48706</u>			\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>				
3. Contribution #4	PAC Receipt? YES	4. Date of Receipt <u>9/11/14</u>		
Name & Address: <u>Sue Wetters</u> <u>164 Green</u> <u>Bay City, MI 48708</u>			\$ <u>20⁰⁰</u>	\$ <u>20⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____				
Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>				

Page Subtotal 80⁰⁰

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

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line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150642
2. Committee Name committee to elect Tom Herek

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? YES	4. Date of Receipt <u>9/11/14</u>			
Name & Address: <u>Michigan Laborers 1118 Centennial Way Lansing, MI 48917</u>				\$ <u>200⁰⁰</u>	\$ <u>200⁰⁰</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Union</u> Employer <u>Union</u> Business Address <u>1118 Centennial Way, Lansing, MI 48917</u> Type of Contribution: Direct Loan from a person <u>Fund Raiser</u>					
3. Contribution # 2	PAC Receipt? YES	4. Date of Receipt _____			
Name & Address _____				\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: Direct Loan from a person Fund Raiser					
3. Contribution # 3	PAC Receipt? YES	4. Date of Receipt _____			
Name & Address _____				\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: Direct Loan from a person Fund Raiser					
3. Contribution # 4	PAC Receipt? YES	4. Date of Receipt _____			
Name & Address _____				\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: Direct Loan from a person Fund Raiser					

Page Subtotal

200⁰⁰

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

1760⁰⁰

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Page.



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 150642
2. Committee Name committee to elect Tom Hareck

3. Name and address of person or vendor to whom paid	4. Purpose (Required information)	5. Date	6. Amount
Expenditure #1 Name <u>Ideal Party Store</u> Address <u>401 Salzburg Bay City, MI 48708</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>beverages</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/11/14</u> Date	<u>\$108³⁸</u>
Expenditure #2 Name <u>GFS market place</u> Address <u>3730 wilder Rd Bay City, MI 48708</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Food</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/11/14</u> Date	<u>\$11⁹⁸</u>
Expenditure #3 Name <u>Southside Market</u> Address <u>1700 Cass Bay City, MI 48708</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>beverages</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/11/14</u> Date	<u>\$21⁰¹</u>
Expenditure #4 Name <u>Home Depot</u> Address <u>3860 State St Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>hardware for signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/17/14</u> Date	<u>\$3⁷²</u>
Expenditure #5 Name <u>Home Depot</u> Address <u>3860 State St Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>POSTS for signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/3/14</u> Date	<u>\$5⁷⁶</u>

Subtotal this page 150⁸⁵

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 150642

2. Committee Name committee to elect Tom Hereck

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Barneys Bakery</u> Address <u>421 S. Van Buren</u> <u>Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Food for workers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/4/14</u> Date	<u>\$ 7⁵⁰</u>
Expenditure #2 Name <u>Barneys Bakery</u> Address <u>421 S. Van Buren</u> <u>Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Food for workers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10-18-14</u> Date	<u>\$ 7⁵⁰</u>
Expenditure #3 Name <u>Democrat Press</u> Address <u>309 9th St</u> <u>Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>ADVERTISING</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/10/14</u> Date	<u>\$ 62⁵⁴</u>
Expenditure #4 Name <u>Barneys Bakery</u> Address <u>421 S. Van Buren</u> <u>Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Food for workers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/11/14</u> Date	<u>\$ 7⁵⁰</u>
Expenditure #5 Name <u>D.S. Post Office</u> Address <u>Bay City, MI</u> <u>48708</u> <input 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>9/27/14</u> Date	<u>\$ 98⁰⁰</u>

Subtotal this page 183⁰⁴

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 150642
2. Committee Name committee to elect Tom Harek

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Sams Club</u> Address <u>5656 Bay Rd. Saginaw, MI 48604</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Food</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/7/14</u> Date	<u>\$ 104.73</u>
Expenditure #2 Name <u>GFS market place</u> Address <u>3730 Wilden Rd Bay city, MI 48706</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>paper</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/7/14</u> Date	<u>\$ 6.88</u>
Expenditure #3 Name <u>Krogen</u> Address <u>2910 Center Ave Bay City, MI 48708</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Food</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/7/14</u> Date	<u>\$ 14.48</u>
Expenditure #4 Name <u>Jacks</u> Address <u>1511 Center Ave Erreville, MI</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Food</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/7/14</u> Date	<u>\$ 24.38</u>
Expenditure #5 Name <u>Mejers</u> Address <u>595 N. Pine Bay City, MI 48708</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>paper</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/7/14</u> Date	<u>\$ 4.22</u>

Subtotal this page 155.09
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 150642
2. Committee Name committee to elect Tom Hareck

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Sam's Club</u> Address <u>5656 Bay Rd</u> <u>Saginaw, MI 48604</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Bread</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>9/10/14</u> Date	<u>\$ 39.78</u>
Expenditure #2 Name <u>GFS market place</u> Address <u>3800 Bay Rd</u> <u>Saginaw, MI 48605</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>paper product</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>9/8/14</u> Date	<u>\$ 10.58</u>
Expenditure #3 Name <u>Jacks</u> Address <u>1000 Salzburg</u> <u>Bay City, MI 48706</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Food</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>9/9/14</u> Date	<u>\$ 39.16</u>
Expenditure #4 Name <u>Meijer</u> Address <u>595 Pine</u> <u>Bay City, MI 48708</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Food</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>9/9/14</u> Date	<u>\$ 5.34</u>
Expenditure #5 Name <u>Jacks</u> Address <u>1000 Salzburg</u> <u>Bay City, MI 48708</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Food</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>9/9/14</u> Date	<u>\$ 4.57</u>

Subtotal this page

99.43

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

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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 150642
2. Committee Name committee to elect Tom Herek

3. Name and address of person or vendor to whom paid	4. Purpose (Required information)	5. Date	6. Amount
Expenditure #1 Name <u>Gil-Roys</u> Address <u>515 Lafayette Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>cable ties</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/22/14</u> Date	<u>\$ 11⁶⁵</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>Democrat Press</u> Address <u>309 Ninth Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Flyers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/5/14</u> Date	<u>\$ 6³⁶</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>Democrat Press</u> Address <u>309 NINTH Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Flyers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/8/14</u> Date	<u>\$ 6³⁶</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>Democrat Press</u> Address <u>309 NINTH Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Plyers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/12/14</u> Date	<u>\$ 6³⁶</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>Democrat Press</u> Address <u>309 NINTH Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Flyers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/22/14</u> Date	<u>\$ 12⁷²</u> Click Here for Memo Itemization Type

Subtotal this page 37⁰⁹
 Grand Total of all Schedules 1B
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 150642
2. Committee Name committee to elect Tom Heek

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Democrat Press</u> Address <u>309 Ninth Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Flyers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/26/14</u> Date	<u>\$ 19⁰⁹</u>
Expenditure #2 Name <u>Democrat Press</u> Address <u>309 Ninth Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Flyers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/25/14</u> Date	<u>\$ 6³⁶</u>
Expenditure #3 Name <u>Democrat Press</u> Address <u>309 Ninth Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Flyer</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/3/14</u> Date	<u>\$ 62⁵⁴</u>
Expenditure #4 Name <u>Democrat Press</u> Address <u>309 Ninth Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Flyer</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/10/14</u> Date	<u>\$ 62⁵⁴</u>
Expenditure #5 Name <u>Banney's Bakery</u> Address <u>421 S. VAN BUREN Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>food for workers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/27/14</u> Date	<u>\$ 7⁵⁰</u>

Subtotal this page 159.83

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 150642
2. Committee Name committee to elect Tom Herele

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Lincoln Reno Hall</u> Address <u>79 S. Lincoln Rd Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Rental For fundraiser</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/12/14</u> Date	<u>\$ 75⁰⁰</u>
Expenditure #2 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	\$ _____
Expenditure #3 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
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	\$ _____
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	\$ _____

Subtotal this page 75⁰⁰

Grand Total of all Schedules 1B
(Complete on last page of Schedule) 859⁵³

Enter this total on line 8a of Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 150642

2. Committee Name committee to elect Tom Herek

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 Owed to or by Corp? <input type="checkbox"/> Yes Christine Herek 1606 30th Bay City, MI 48708	4. Type: <u>loan</u> 5. Date Debt Was Incurred: <u>5/15/12</u> 6. Original Amount of Debt: <u>\$ 1500⁰⁰</u>	11/16/12 \$ 800 ⁰⁰ 11/21/12 \$ 200 ⁰⁰ \$ _____ \$ _____ \$ _____	\$ 1000 ⁰⁰	\$ 500 ⁰⁰ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Owed to or by Corp? <input type="checkbox"/> Yes Christine Herek 1606 30th Bay City, MI 48708	4. Type: <u>loan</u> 5. Date Debt Was Incurred: <u>9/1/12</u> 6. Original Amount of Debt: <u>\$ 1500⁰⁰</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ -0-	\$ 1500 ⁰⁰ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Owed to or by Corp? <input type="checkbox"/> Yes Thomas Herek 1606 30th Bay City, MI 48708	4. Type: <u>loan</u> 5. Date Debt Was Incurred: <u>10/12/12</u> 6. Original Amount of Debt: \$ _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ 566 ⁰⁰ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) 2500⁰⁰

Grand Total of all Schedules 1E
(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.



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

1. Committee I.D. Number 150642

2. Committee Name Committee to Elect Tom Herck

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)
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Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Thomas Herck</u> <u>1606 30th Street</u> <u>Bay City, MI 48708</u>	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>7/25/2014</u> 6. Original Amount of Debt: <u>\$ 800.34</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>800.34</u> <input type="checkbox"/> FORGIVEN
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If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. Date Debt Was Incurred: _____ 6. Original Amount of Debt: _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ _____ <input type="checkbox"/> FORGIVEN
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If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. Date Debt Was Incurred: _____ 6. Original Amount of Debt: _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ _____ <input type="checkbox"/> FORGIVEN
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If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Page Subtotal (Outstanding debt): 800.34
Grand Total of all Schedules 1E: 3300.34
(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 150642
2. Committee Name Committee to elect Tom Herek

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>09/11/14</u>	4. Number of Individuals Attending or Participating (whichever is greater) <p style="text-align: center;">65</p>	5. Type of Fund Raising Activity <p style="text-align: center;">Dinner</p>	6. Address and Name (If any) of the place where the activity was held. <p style="text-align: center;">Lincoln Road Hall 79. S. Lincoln Rd BAY CITY, MI</p> <input type="checkbox"/> Private Residence
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7. Total Contributions \$1,760.00

8. Other Receipts \$0.00

9. Gross Receipts (Add lines 7 and 8) \$1,760.00

10. Total Cost of Event \$470.89
(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.