



**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 7-20-2015 to 8-24-2015

1. Committee I.D. Number  
150 590

2. Committee Name  
Friends of Chad Sibley

4. Candidate Last Name Sibley First Name Chad M.I. A.

4a. Office Sought Including District # or Community Served (If applicable)  
8th Ward Bay City Commissioner

4b. County of Residence Bay County

5. Committee's Mailing Address  
804 Litchfield  
Bay City, MI 48706

Area Code and Phone 989-450-4538

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  
Chad A. Sibley  
804 Litchfield  
Bay City, MI 48706

Area Code & Phone 989-450-4538

7. Treasurer's Business Address  
804 Litchfield  
Bay City, MI 48706

Area Code and Phone 989-450-4538

8. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper)  
Chad Sibley  
804 Litchfield  
Bay City, MI 48706

Area Code and Phone 989-450-4538

FILED  
 80 CLERK  
 18TH JUDICIAL  
 CIRCUIT COURT  
 2015 OCT 22 P 12:03  
 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  
August 4th, 2015

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.

Designated Treasurer or Designated Record Keeper Chad A. Sibley, Signature Chad Sibley Date 8-24-2015

Candidate Chad A. Sibley, Signature Chad Sibley Date 8-24-2015



1. Committee I.D. Number 150590

2. Committee Name Friends of Chad Sibley

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>1,814<sup>49</sup></u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>1,814<sup>49</sup></u>	(18.) \$ <u>3,273<sup>21</sup></u>
<b>4. Other Receipts (Schedule 1A -1, Column 6)</b>	(4.) \$ <u>0</u>	(19.) \$ <u>0</u>
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$ <u>1,814<sup>49</sup></u>	(20.) \$ <u>3,273<sup>21</sup></u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
<b>6. In-Kind Contributions (Schedule 1-IK, Column 7)</b>	(6.) \$ <u>355<sup>27</sup></u>	(21.) \$ <u>890<sup>27</sup></u>
<b>7. In-Kind Expenditures (Schedule 1B-IK, Column 6)</b>	(7.) \$ <u>0</u>	(22.) \$ <u>0</u>
<b>EXPENDITURES</b>		
<b>8. Expenditures</b>		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>344<sup>49</sup></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>	
<b>9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)</b>	(9.) \$ <u>344<sup>49</sup></u>	(23.) \$ <u>1,066<sup>30</sup></u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)		
<b>10. Disbursements</b>		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0</u>	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$ <u>0</u>	(24.) \$ <u>0</u>
<b>DEBTS AND OBLIGATIONS</b>		
<b>12. Debts and Obligations</b>		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>344<sup>49</sup></u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0</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>736<sup>21</sup></u>	
<b>14. Amount received during reporting period</b> (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>1,814<sup>49</sup></u>	
<b>15. SUBTOTAL Add lines 13 and 14</b>	(15.) = \$ <u>2,551<sup>40</sup></u>	
<b>16. Amount expended during reporting period</b> (Add lines 9 and 11)	(16.) - \$ <u>244<sup>49</sup></u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ <u>2,206<sup>91</sup></u>	



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150590  
2. Committee Name Friends of Chad Sibley

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 7-28-2015

Name & Address:  
Guy Krakowski  
1845 S.E. Boutell  
Essexville, MI 48732

6. Amount \$ 25<sup>00</sup> \$ 25<sup>00</sup>

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser Ticket #0093

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 7-28-2015

Name & Address:  
Situ Compton  
1752 W. German Rd.  
Bay City, MI 48708-9631

6. Amount \$ 25<sup>00</sup> \$ 25<sup>00</sup>

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser Ticket # 0094

3. Contribution #3 PAC Receipt?  YES 4. Date of Receipt 7-28-2015

Name & Address:  
Nancy Smith  
891 N. Jones Rd.  
Essexville, MI 48732

6. Amount \$ 25<sup>00</sup> \$ 25<sup>00</sup>

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser Ticket # 0088

3. Contribution #4 PAC Receipt?  YES 4. Date of Receipt 7-28-2015

Name & Address:  
Charlie Smith  
891 N. Jones Rd.  
Essexville, MI 48732

6. Amount \$ 25<sup>00</sup> \$ 25<sup>00</sup>

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser Ticket # 0089

Page Subtotal

100<sup>00</sup>

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

~~174<sup>00</sup>~~

1814<sup>49</sup>

Enter this total on  
line 3a of Summary



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150 590  
2. Committee Name Friends of Chad Sibley

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>8-24-2015</u>	
Name & Address: <u>Stella Echarta</u> <u>989-415-0111</u>		\$ <u>25<sup>00</sup></u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<u>Ticket# 0156</u>	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8-24-2015</u>	
Name & Address: <u>Cuz Biskupske</u> <u>289-894-9876</u>		\$ <u>25<sup>00</sup></u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<u>Ticket 0157</u>	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8-24-2015</u>	
Name & Address: <u>Rosa Santellarm</u> <u>989-893-9999</u>		\$ <u>25<sup>00</sup></u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<u>Ticket 0155</u>	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8-24-2015</u>	
Name & Address: <u>Mariya Franek</u> <u>894-9876</u>		\$ <u>25<sup>00</sup></u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<u>Ticket 0154</u>	

Page Subtotal

100<sup>00</sup>

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

1,814<sup>49</sup>

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150590  
2. Committee Name Friends of Chud Sibley

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 8-20-2015

Name & Address:  
Collin Sibley  
524 N.S.E Beutell Rd.  
Bay City, MI 48708-9202

6. Amount \$ 50<sup>00</sup>

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ \_\_\_\_\_

5. If over \$100.00 cumulative, please provide: \_\_\_\_\_

Click Here for Memo Itemization

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser Tickets 0085, 0086

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 8-20-2015

Name & Address:  
Danelle Archangelis  
411 S. Barclay Street.  
Bay City, MI 48706

6. Amount \$ 25<sup>00</sup>

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ \_\_\_\_\_

5. If over \$100.00 cumulative, please provide: \_\_\_\_\_

Click Here for Memo Itemization

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser Ticket 0104

3. Contribution #3 PAC Receipt?  YES 4. Date of Receipt 8-20-2015

Name & Address:  
Adam Wallaker  
918 N. Dewitt  
Bay City, MI 48706

6. Amount \$ 25<sup>00</sup>

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ \_\_\_\_\_

5. If over \$100.00 cumulative, please provide: \_\_\_\_\_

Click Here for Memo Itemization

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser Ticket 0106

3. Contribution #4 PAC Receipt?  YES 4. Date of Receipt 8-20-2015

Name & Address:  
Jill Bradreau-Wallaker  
918 N. Dewitt  
Bay City, MI 48706

6. Amount \$ 25<sup>00</sup>

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ \_\_\_\_\_

5. If over \$100.00 cumulative, please provide: \_\_\_\_\_

Click Here for Memo Itemization

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser Ticket 0105

Page Subtotal 125<sup>00</sup>  
Grand Total of All Schedules 1A (Complete on last page of Schedule) 1,814<sup>99</sup>

Enter this total on line 3a of Summary Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150590  
2. Committee Name Friends of Chad Sibley

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>8-20-2015</u>	
Name & Address: <u>Lori Bergivin</u> <u>402 Blend St.</u> <u>Bay City, MI 48706</u>		\$ <u>25<sup>00</sup></u>	
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Ticket # <u>0117</u>	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8-20-2015</u>	
Name & Address: <u>Dennis Johnston</u> <u>1415 Midland Rd.</u> <u>Bay City, MI 48706</u>		\$ <u>50<sup>00</sup></u>	
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Ticket # <u>0111, 0112</u>	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8-20-2015</u>	
Name & Address: <u>Paul Klosowski</u> <u>920 N. Dewitt</u> <u>Bay City, MI 48706</u>		\$ <u>25<sup>00</sup></u>	
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Ticket <u>0164</u>	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8-20-2015</u>	
Name & Address: <u>Judy Klosowski</u> <u>920 N. Dewitt</u> <u>Bay City, MI 48706</u>		\$ <u>25<sup>00</sup></u>	
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Ticket <u>0165</u>	

Page Subtotal 125<sup>00</sup>  
Grand Total of All Schedules 1A 1,814<sup>99</sup>  
(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 150590  
2. Committee Name Friends of Chad Sibley

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 8-4-2015

Name & Address:  
Barb Engelhardt  
315 Center Ave. Ste. 402  
Bay City, MI 48708

6. Amount \$ 100<sup>00</sup> 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ \_\_\_\_\_

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 8-17-2015

Name & Address:  
Magen M. Samyn  
1267 Jod: Lynn Lane  
Essexville, MI 48732

6. Amount \$ 50<sup>00</sup> 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ \_\_\_\_\_

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser Tickets: 0007 & 0006

3. Contribution #3 PAC Receipt?  YES 4. Date of Receipt 8-19-2015

Name & Address:  
Meade A. Gougen  
100 Patterson Ave.  
Bay City, MI 48706

6. Amount \$ 500<sup>00</sup> 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ \_\_\_\_\_

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser

3. Contribution #4 PAC Receipt?  YES 4. Date of Receipt 8-20-2015

Name & Address:  
John Bergivin  
402 Blend St.  
Bay City, MI 48706

6. Amount \$ 25<sup>00</sup> 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ \_\_\_\_\_

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Type of Contribution:  Direct  Loan from a person  Fund Raiser Ticket # 0126

Page Subtotal 675<sup>00</sup>  
Grand Total of All Schedules 1A 1,814<sup>49</sup>  
(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 150590  
2. Committee Name Friends of Chad Sibley

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>Frank York</u> <u>132 Little Killarney</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8-23-2015</u>	\$ <u>25<sup>00</sup></u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<u>Ticket 0172</u>	
3. Contribution #2 Name & Address: <u>Beth Dore</u> <u>2009 Center Ave.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8-23-2015</u>	\$ <u>25<sup>00</sup></u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<u>Ticket 0121</u>	
3. Contribution #3 Name & Address: <u>Tom Carter</u> <u>315 Center Ave.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8-4-2015</u>	\$ <u>100<sup>00</sup></u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #4 Name & Address: <u>Fred Nowak</u> <u>881 N. Jones</u> <u>Essexville, MI 48732</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8-24-2015</u>	\$ <u>25<sup>00</sup></u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<u>Ticket 0091</u>	

Page Subtotal

~~175<sup>00</sup>~~

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

1,814<sup>99</sup>

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150590  
2. Committee Name Friends of Chad Sibley

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>Chad Sibley</u> <u>804 Citchfield</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-28-2015</u>	\$ <u>185<sup>27</sup></u>
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 checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2 Name & Address: <u>Chad Sibley</u> <u>804 Citchfield</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-28-2015</u>	\$ <u><del>27</del><sup>99</sup></u>
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 checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 3 Name & Address: <u>Chad Sibley</u> <u>804 Citchfield</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8-20-2015</u>	\$ <u>131.<sup>23</sup></u>
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 checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 Name & Address: <u>Chad Sibley</u> <u>804 Citchfield</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>7-28-2015</u>	\$ <u>170.<sup>00</sup></u>
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 checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal

~~300~~ 514<sup>49</sup>

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

1814<sup>49</sup>

Enter this total on  
line 3a of Summary  
Page.



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

1. Committee I. D. Number 150590

2. Committee Name Friends of Chad Sibley

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
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<p>Contribution # 1      PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name &amp; Address: <u>Will Mall</u> <u>614 E. Midland Street</u> <u>Bay City, MI 48706</u></p> <p>If over \$100.00 cumulative, please provide: Occupation:</p> <p>Employer Name &amp; Business Address:</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned    <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description <u>Gift Certificate</u></p> <p>5. Date Of Receipt: <u>8-2-2015</u></p> <p>6. Vendor Name &amp; Address: <u>RiteRock</u> <u>Midland Street</u> <u>Bay City, MI 48706</u></p>	<p>\$ <u>20<sup>00</sup></u>      \$ _____</p>	<p>Click Here for Memo Itemization</p>
<p><input checked="" type="checkbox"/> Fund Raiser Contribution</p>			

<p>Contribution # 2      PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name &amp; Address: <u>Peggy Wilderman</u> <u>N. Dean St.</u> <u>Bay City, MI 48706</u></p> <p>If over \$100.00 cumulative, please provide: Occupation:</p> <p>Employer Name &amp; Address:</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned    <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description <u>Gift Certificates</u></p> <p>5. Date Of Receipt: <u>8-4-2015</u></p> <p>6. Vendor Name &amp; Address: <u>Beutles &amp; Beans</u> <u>Saginaw St.</u> <u>Bay City, MI 48706</u></p>	<p>\$ <u>10<sup>00</sup></u>      \$ _____</p>	<p>Click Here for Memo Itemization</p>
<p><input checked="" type="checkbox"/> Fund Raiser Contribution</p>			

<p>Contribution # 3      PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name &amp; Address: <u>Ben Gougeon</u> <u>1706 7th Street</u> <u>Bay City, MI 48706</u></p> <p>If over \$100.00 cumulative, please provide: Occupation:</p> <p>Employer Name &amp; Address:</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned    <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description <u>Epoxy</u></p> <p>5. Date Of Receipt: <u>8-20-2015</u></p> <p>6. Vendor Name &amp; Address:</p>	<p>\$ <u>325<sup>27</sup></u>      \$ _____</p>	<p>Click Here for Memo Itemization</p>
<p><input checked="" type="checkbox"/> Fund Raiser Contribution</p>			

Page Subtotal 355<sup>27</sup>

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

355<sup>27</sup>

Enter this total  
on line 6 of Summary  
Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 150590  
2. Committee Name Friends of Chud Sibley

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Staples</u> Address <u>4021 N. Euclid Avenue</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>7-28</u> Date	\$ <u>27<sup>99</sup></u>
Expenditure #2 Name <u>Vista Print</u> Address <u>Online purchase</u> <u>www.vistaprint.com</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Banners</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-28</u> Date	\$ <u>185<sup>27</sup></u>
Expenditure #3 Name <del>XXXXXXXXXX</del> <u>Vista Print</u> Address <del>XXXXXXXXXX</del> <u>Online Purchase</u> <u>www.vistaprint.com</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Post Flyers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8-20-2015</u> Date	\$ <u>131<sup>23</sup></u>
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 XXXXXXXXXX 349<sup>49</sup>  
 Grand Total of all Schedules 1B (Complete on last page of Schedule) XXXXXXXXXX 349<sup>49</sup>  
 Enter this total



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

1. Committee I.D. Number 150590  
2. Committee Name Friends of Chad Sibley

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: Chad Sibley 804 Litchfield Bay City, MI 48706	4. Type: <u>Print Materials</u> 5. <u>Date Debt Was Incurred:</u> <u>7-28-2015</u> 6. <u>Original Amount of Debt:</u> \$ <u>185<sup>27</sup></u>	\$ \$ \$ \$ \$	\$	\$ <u>185<sup>27</sup></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: Chad Sibley 804 Litchfield Bay City, MI 48706	4. Type: <u>Print Materials</u> 5. <u>Date Debt Was Incurred:</u> <u>7-28-2015</u> 6. <u>Original Amount of Debt:</u> \$ <u>27<sup>99</sup></u>	\$ \$ \$ \$ \$	\$	\$ <u>27<sup>99</sup></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: Chad Sibley 804 Litchfield Bay City, MI 48706	4. Type: <u>Print Materials</u> 5. <u>Date Debt Was Incurred:</u> <u>8-20-2015</u> 6. <u>Original Amount of Debt:</u> \$ <u>131<sup>23</sup></u>	\$ \$ \$ \$ \$	\$	\$ <u>131<sup>23</sup></u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) 344<sup>41</sup>

Grand Total of all Schedules 1E 514<sup>49</sup>  
(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 150 590  
2. Committee Name Friends of Chad Sibley

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: <u>Chad Sibley</u> <u>804 Litchfield</u> <u>Bay City, MI 48706</u>	4. Type: <u>Cash</u> 5. <u>Date Debt Was Incurred:</u> <u>7-28-2015</u> 6. <u>Original Amount of Debt:</u> <u>\$ 170<sup>00</sup></u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	<u>\$ 170<sup>00</sup></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:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</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:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	<input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt) 170<sup>00</sup>  
 Grand Total of all Schedules 1E 514<sup>49</sup>

(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.