



**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.

<p>1. Committee I.D. Number <b>150258</b></p> <p>2. Committee Name <b>Friends of Chris Girard</b></p>		<p>3. This Statement covers From: <u>03/12/15</u> to <del>03/01/15</del> <u>10-18-15</u></p> <p>4. Candidate Last Name <b>Girard</b> First Name <b>Christopher</b> M.I. <b>R</b></p> <p>4a. Office Sought Including District # or Community Served (if applicable) <b>Mayor of the City of Bay City, MI</b></p> <p>4b. County of Residence <b>BAY</b></p>	
<p>5. Committee's Mailing Address <b>100 Braddock St. Bay City, MI 48708</b></p> <p>Area Code and Phone <u>(989) 450-7827</u> If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.</p>		<p>6. Treasurer's Name &amp; Residential Address <b>Estee Bowman 906 McCormick St. Bay City, MI 48708</b></p> <p>Area Code &amp; Phone <u>(989) 450-5359</u></p>	
<p>7. Treasurer's Business Address</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>	
<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 <u>11/03/15</u></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>	
<p>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.</p>			
<p>Current Treasurer or Designated Record keeper <b>Estee M. Bowman</b></p> <p>Type or Print Name</p>		<p><i>Estee M. Bowman</i> Signature Date <u>10-23-15</u></p>	
<p>Candidate <b>Christopher R. Girard</b></p> <p>Type or Print Name</p>		<p><i>Christopher R. Girard</i> Signature Date <u>10-23-15</u></p>	

FILED CO. CLERK  
 18TH JUDICIAL  
 CIRCUIT COURT  
 2015 OCT 23 PM 1:11  
 BAY COUNTY CLERK  
 CYNTHIA A. LEZAK



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>7,560.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>7,560.00</u>	(18.) \$ <u>7,560.00</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>7,560.00</u>	(20.) \$ <u>7,560.00</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
<b>6. In-Kind Contributions (Schedule 1-IK, Column 7)</b>	(6.) \$ <u>1,627.60</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>6,559.13</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>6,559.13</u>	(23.) \$ <u>6,559.13</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>3,500.00</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>\$0.00</u>	
<b>14. Amount received during reporting period</b> (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>7,560.00</u>	
<b>15. SUBTOTAL Add lines 13 and 14</b>	(15.) = \$ <u>7,560.00</u>	
<b>16. Amount expended during reporting period</b> (Add lines 9 and 11)	(16.) - \$ <u>6,559.13</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ <u>1,000.87</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>05/24/15</u>	
Name & Address: Ruth Jaffe 102 Boehringer Ct. Bay City, MI 48708		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>05/21/15</u>	
Name & Address: Douglas Leitch 5430 Bay Arenac Line Rd. Pinconning, MI 48650		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>sales</u> Employer <u>Kimball Midwest</u> Business Address <u>Columbus, OH</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>05/21/15</u>	
Name & Address: Andrea Leitch 5430 Bay Arenac Line Rd. Pinconning, MI 48650		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>sheep farmer</u> Employer <u>self-employed</u> Business Address <u>Pinconning, MI</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>05/28/15</u>	
Name & Address: Cheryl Burzynski 3237 Boy Scout Rd. Bay City, MI 48706		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$275.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150238

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>06/01/15</u> Name & Address: <b>Brett Lewless</b> 3027 W. Riverview Dr. Bay City, MI 48706		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/01/15</u> Name & Address: <b>Mark Jaffe</b> 1111 N. Water St. Bay City, MI 48708		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/09/15</u> Name & Address: <b>Andrea Hales</b> 2100 Kindig Rd. Alger, MI 48610		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/06/15</u> Name & Address: <b>Jeffrey Mayes</b> 4297 Zander Dr. Bay City, MI 48706		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$150.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 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>06/08/15</u> Name & Address: <b>Catherine Washabaugh</b> <b>232 Athlone Beach</b> <b>Bay City, MI 48706</b>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>05/28/15</u> Name & Address: <b>D. Keith Birchler</b> <b>900 Center Ave.</b> <b>Bay City, MI 48708</b>		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/11/15</u> Name & Address: <b>Molly Girard</b> <b>100 Braddock St.</b> <b>Bay City, MI 48708</b>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/11/15</u> Name & Address: <b>Tonya Montny</b> <b>1988 E. Salzburg</b> <b>Bay City, MI 48706</b>		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

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

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 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>06/11/15</u> Name & Address: <b>David Montny</b> 1988 E. Salzburg Bay City, MI 48706		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/11/15</u> Name & Address: <b>Colleen Maillette</b> 3123 Kirkwood Bay City, MI 48708		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/11/15</u> Name & Address: <b>Jason Gower</b> 514 E. Midland St. Bay City, MI 48706		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/11/15</u> Name & Address: <b>Adam Reddick</b> 4012 Eleven Mile Auburn, MI 48611		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$250.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 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>06/11/15</u> Name & Address: <b>Terrance Kelly</b> 154 Bay Shore Drive Bay City, MI 48706		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/11/15</u> Name & Address: <b>Joel Gougeon</b> 241 Donahue Beach Bay City, MI 48706		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/11/15</u> Name & Address: <b>Tom Herek</b> 1606 30th Street Bay City, MI 48708		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/11/15</u> Name & Address: <b>Marcus Garske</b> 410 S. Mountain St. Bay City, MI 48706		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$175.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 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>06/11/15</u> Name & Address: <b>Peter Schuster</b> 211 Grove St. Kawkawlin, MI 48631  5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/11/15</u> Name & Address: <b>David Davis</b> 994 S. River Rd. 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>25.00</u>	\$ <u>25.00</u>
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/11/15</u> Name & Address: <b>Richard Davis</b> 994 S. River Rd. 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/11/15</u> Name & Address: <b>Lois Davis</b> 994 S. River Rd. 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u>
<a href="#">Click Here for Memo Itemization</a>		

Page Subtotal **\$175.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 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>06/11/15</u> Name & Address: <b>Frank Kowalski</b> 2002 S. Grant Bay City, MI 48708	\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: <span style="float: right;"><a href="#">Click Here for Memo Itemization</a></span> Occupation _____ Employer _____ Business Address _____		
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/11/15</u> Name & Address: <b>Terry Watson</b> 93 River Trail Bay City, MI 48706	\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: <span style="float: right;"><a href="#">Click Here for Memo Itemization</a></span> Occupation _____ Employer _____ Business Address _____		
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/11/15</u> Name & Address: <b>Peggy Watson</b> 93 River Trail Bay City, MI 48706	\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: <span style="float: right;"><a href="#">Click Here for Memo Itemization</a></span> Occupation _____ Employer _____ Business Address _____		
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/11/15</u> Name & Address: <b>Susan Fassbender</b> 244 Jennison Place Bay City, MI 48708	\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: <span style="float: right;"><a href="#">Click Here for Memo Itemization</a></span> Occupation _____ Employer _____ Business Address _____		
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		

Page Subtotal **\$95.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 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>06/11/15</u>	
Name & Address: <i>SUSAN FASSBENDER</i> 200 Center Ave. Bay City, MI 48708		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/11/15</u>	
Name & Address: Ashley Girard 719 Litchfield Bay City, MI 48706		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/11/15</u>	
Name & Address: John Keuvelaar 1701 Borton Essexville, MI 48732		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/11/15</u>	
Name & Address: Sara Spencer 2060 Reppuhn Dr. Bay City, MI 48706		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$100.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 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>06/11/15</u> Name & Address: <b>Terry Spencer</b> 2060 Reppuhn Dr. Bay City, MI 48706		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/11/15</u> Name & Address: <b>Kerice Basmadjian</b> 315 S. Kiesel Bay City, MI 48706		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/11/15</u> Name & Address: <b>Zach Choffin</b> 2000 19th St. Bay City, MI 48708		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/11/15</u> Name & Address: <b>Jessica Rose Rieffel</b> 2000 19th St. Bay City, MI 48708		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$115.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 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>06/11/15</u> Name & Address: Florence Hewitt 1483 Lesperance Ct. Essexville, MI 48732	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: <span style="float: right;"><a href="#">Click Here for Memo Itemization</a></span> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/11/15</u> Name & Address: Michael Hewitt 5533 Wagner Dr. Orlando, FL 32821	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: <span style="float: right;"><a href="#">Click Here for Memo Itemization</a></span> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution #3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/18/15</u> Name & Address: Andreas Teich 2275 Carrol Rd. Bay City, MI 48708	\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: <span style="float: right;"><a href="#">Click Here for Memo Itemization</a></span> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution #4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/18/15</u> Name & Address: Tracy Teich 2275 Carrol Rd. Bay City, MI 48708	\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: <span style="float: right;"><a href="#">Click Here for Memo Itemization</a></span> 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 **\$300.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 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>06/18/15</u> Name & Address: <b>John Hempton</b> <b>8163 Hadley Rd.</b> <b>Cass City, MI 48726</b> 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>50.00</u>	\$ <u>50.00</u>
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution # 2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/18/15</u> Name & Address: <b>Christin Hempton</b> <b>8163 Hadley Rd.</b> <b>Cass City, MI 48726</b> 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>50.00</u>	\$ <u>50.00</u>
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/09/15</u> Name & Address: <b>Scott Carmona</b> <b>5757 Two Mile Rd.</b> <b>Bay City, MI 48706</b> 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>25.00</u>	\$ <u>25.00</u>
<a href="#">Click Here for Memo Itemization</a>		
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>06/17/15</u> Name & Address: <b>John Johnson</b> <b>3561 Kawkawlin River Dr.</b> <b>Bay City, MI 48706</b> 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>50.00</u>	\$ <u>50.00</u>
<a href="#">Click Here for Memo Itemization</a>		

Page Subtotal **\$175.00**

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 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 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>03/18/15</u> Name & Address: <b>Chris Girard</b> 100 Braddock St. Bay City, MI 48708		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>Do-All, Inc.</u> Business Address <u>1400 S. Lincoln Ave., Bay City, MI 48708</u> Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>05/06/15</u> Name & Address: <b>Chris Girard</b> 100 Braddock St. Bay City, MI 48708		\$ <u>400.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>Do-All, Inc.</u> Business Address <u>1400 S. Lincoln Ave., Bay City, MI 48708</u> Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>05/18/15</u> Name & Address: <b>Chris Girard</b> 100 Braddock St. Bay City, MI 48708		\$ <u>10.00</u>	\$ <u>538.60</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>Do-All, Inc.</u> Business Address <u>1400 S. Lincoln Ave., Bay City, MI 48708</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/29/15</u> Name & Address: <b>Chris Girard</b> 100 Braddock St. Bay City, MI 48708		\$ <u>3,000.00</u>	\$ <u>3,538.60</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>Do-All, Inc.</u> Business Address <u>1400 S. Lincoln Ave., Bay City, MI 48708</u> Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$3,510.00**

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 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>08/26/15</u> Name & Address: Bob Girard 1627 Highland St. Fernandina Beach, FL 32034		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>self employed</u> Business Address <u>Fernandina Beach, FL</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/26/15</u> Name & Address: Sue Girard 1627 Highland St. Fernandina Beach, FL 32034		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>self employed</u> Business Address <u>Fernandina Beach, FL</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/31/15</u> Name & Address: Doug Leitch 5430 Bay-Arenac Pinconning, MI 48650		\$ <u>150.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>sales</u> Employer <u>Kimball Midwest</u> Business Address <u>Columbus, OH</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/31/15</u> Name & Address: Andrea Leitch 5430 Bay-Arenac Pinconning, MI 48650		\$ <u>150.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>sheep farmer</u> Employer <u>self employed</u> Business Address <u>Pinconning, MI</u> Type of Contribution: <input checked="" 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 **\$800.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 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 all contributions regardless of amount.

3. Contribution # 1      PAC Receipt?  YES      4. Date of Receipt 09/10/15

Name & Address:  
**Bay City Police & Fire Retirees**

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

\$ 100.00      \$ 100.00

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 09/10/15

Name & Address:  
**Jerry Barret  
7300 Fligel  
Bentley, MI 48613**

\$ 20.00      \$ 20.00

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 # 3      PAC Receipt?  YES      4. Date of Receipt 09/10/15

Name & Address:  
**Helen Bishop  
2261 Canterbury Dr.  
Bay City, MI 48708**

\$ 20.00      \$ 20.00

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 09/10/15

Name & Address:  
**Ed Clements  
515 Webb Dr.  
Bay City, MI 48708**

\$ 25.00      \$ 25.00

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

Page Subtotal **\$165.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 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)
<p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/15</u> Name &amp; Address: <b>Mark Duncan</b> 2898 Evergreen Dr. Bay City, MI 48706</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct    <input type="checkbox"/> Loan from a person    <input checked="" type="checkbox"/> Fund Raiser</p>	\$ <u>100.00</u>	\$ <u>100.00</u>
<a href="#">Click Here for Memo Itemization</a>		
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/15</u> Name &amp; Address: <b>Judy Fletcher</b> 4857 Two Mile Road Bay City, MI 48706</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct    <input type="checkbox"/> Loan from a person    <input checked="" type="checkbox"/> Fund Raiser</p>	\$ <u>20.00</u>	\$ <u>20.00</u>
<a href="#">Click Here for Memo Itemization</a>		
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/15</u> Name &amp; Address: <b>Molly Girard</b> 100 Braddock St. Bay City, MI 48708</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct    <input type="checkbox"/> Loan from a person    <input checked="" type="checkbox"/> Fund Raiser</p>	\$ <u>30.00</u>	\$ <u>130.00</u>
<a href="#">Click Here for Memo Itemization</a>		
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/15</u> Name &amp; Address: <b>Bob Girard</b> 1627 Highland St. Fernandina Beach, FL 32034</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>self employed</u> Business Address <u>Fernandina Beach, FL</u> Type of Contribution: <input checked="" type="checkbox"/> Direct    <input type="checkbox"/> Loan from a person    <input checked="" type="checkbox"/> Fund Raiser</p>	\$ <u>50.00</u>	\$ <u>300.00</u>
<a href="#">Click Here for Memo Itemization</a>		

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 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 all contributions regardless of amount.

3. Contribution # 1 PAC Receipt?  YES 4. Date of Receipt 09/10/15  
Name & Address:  
Sue Girard  
1627 Highland St.  
Fernandina Beach, FL 32034

6. Amount \$ 50.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 300.00

5. If over \$100.00 cumulative, please provide:  
Occupation \_\_\_\_\_ Employer self employed  
Business Address Fernandina Beach, FL  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #2 PAC Receipt?  YES 4. Date of Receipt 09/10/15  
Name & Address:  
James Hollerback  
5231 Parkway Drive  
Bay City, MI 48706

6. Amount \$ 25.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 25.00

5. If over \$100.00 cumulative, please provide:  
Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
Business Address \_\_\_\_\_  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 3 PAC Receipt?  YES 4. Date of Receipt 09/10/15  
Name & Address:  
Andrea Leitch  
5430 Bay-Arenac  
Pinconning, MI 48650

6. Amount \$ 50.00 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 300.00

5. If over \$100.00 cumulative, please provide:  
Occupation sheep farmer Employer self employed  
Business Address Pinconning, MI  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 4 PAC Receipt?  YES 4. Date of Receipt 09/10/15  
Name & Address:  
Leon Leszczyks  
3724 Margaret Lane  
Bay City, MI 48706

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

5. If over \$100.00 cumulative, please provide:  
Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
Business Address \_\_\_\_\_  
Type of Contribution:  Direct  Loan from a person  Fund Raiser

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Page Subtotal \$145.00  
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 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>09/10/15</u> Name & Address: <b>Colleen Maillette</b> 3123 Kirkwood Bay City, MI 48706		\$ <u>25.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/15</u> Name & Address: <b>Bill Powell</b> 5277 Crestway Bay City, MI 48706		\$ <u>20.00</u>	\$ <u>20.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/15</u> Name & Address: <b>Cathleen Schell</b> 2 Nelson Lane Bay City, MI 48708		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/15</u> Name & Address: <b>David Terrasi</b> 317 Green Ave. Bay City, MI 48708		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$170.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 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>09/10/15</u> Name & Address: <b>Sandy Wahr</b> <b>400 E. FISHER</b> <b>BAY CITY, MI 48706</b> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>60.00</u>	\$ <u>60.00</u>  <a href="#">Click Here for Memo Itemization</a>
3. Contribution # 2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/15</u> Name & Address: <b>Jean Wolicki-Nichols</b> <b>309 Green Ave.</b> <b>Bay City, MI 48708</b> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <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>09/19/15</u> Name & Address: <b>Tim Teeples</b> <b>43 STATE PARK DRIVE</b> <b>BAY CITY, MI 48706</b> 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 # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/06/15</u> Name & Address: <b>Kathleen Czerwinski</b> <b>211 Birney St.</b> <b>Essexville, MI 48732</b> 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>

Page Subtotal **\$360.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 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)
<p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/06/15</u></p> <p>Name &amp; Address: <b>Robert Rogers</b> 3 Sovereign Dr. Bay City, MI 48708</p> <p>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</p>	<p>\$ <u>100.00</u></p>	<p>\$ <u>100.00</u></p> <p style="text-align: center;"><a href="#">Click Here for Memo Itemization</a></p>
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>10/08/15</u></p> <p>Name &amp; Address: <b>Toni Hilbery</b> <i>117 SPRUCE STREET</i> <i>BAY CITY, MI 48706</i></p> <p>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</p>	<p>\$ <u>100.00</u></p>	<p>\$ <u>100.00</u></p> <p style="text-align: center;"><a href="#">Click Here for Memo Itemization</a></p>
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____</p> <p>Name &amp; Address: _____ _____</p> <p>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</p>	<p>\$ _____</p>	<p>\$ _____</p> <p style="text-align: center;"><a href="#">Click Here for Memo Itemization</a></p>
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____</p> <p>Name &amp; Address: _____ _____</p> <p>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</p>	<p>\$ _____</p>	<p>\$ _____</p> <p style="text-align: center;"><a href="#">Click Here for Memo Itemization</a></p>

Page Subtotal **\$200.00**

Grand Total of All Schedules 1A  
(Complete on last page of Schedule) **\$7,560.00**

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED IN-KIND CONTRIBUTIONS**

**SCHEDULE 1-IK**

1. Committee I. D. Number 150258

**CANDIDATE COMMITTEE**

2. Committee Name Friends of Chris Girard

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 <u>all</u> 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)
Contribution # 1      PAC Receipt? <input type="checkbox"/> Yes Name & Address: Cosens Web Consulting 1218 N. Johnson St. #3 Bay City, MI 48708  If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input checked="" 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 Description <u>website design</u>  5. Date Of Receipt: <u>07/20/15</u> 6. Vendor Name & Address:	\$ <u>1,000.00</u>	\$ <u>1,000.00</u>       Click Here for Memo Itemization
<input type="checkbox"/> Fund Raiser Contribution  Contribution # 2      PAC Receipt? <input type="checkbox"/> Yes Name & Address: Chris Girard 100 Braddock Bay City, MI 48708  If over \$100.00 cumulative, please provide: Occupation: <u>CEO</u> Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>supplies</u>  5. Date Of Receipt: <u>05/16/15</u> 6. Vendor Name & Address:	\$ <u>28.60</u>	\$ <u>528.60</u>       Click Here for Memo Itemization
<input type="checkbox"/> Fund Raiser Contribution  Contribution #3      PAC Receipt? <input type="checkbox"/> Yes Name & Address: Chris Girard 100 Braddock Bay City, MI 48708  If over \$100.00 cumulative, please provide: Occupation: <u>CEO</u> Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>advertising</u>  5. Date Of Receipt: <u>08/01/15</u> 6. Vendor Name & Address:	\$ <u>100.00</u>	\$ <u>3,638.60</u>       Click for Memo Itemization Type

Page Subtotal **\$1,627.60**

Grand Total of all Schedules 1-IK  
(Complete on last page of Schedule) **\$1,627.60**

Enter this total  
on line 6 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 <b>Sears Credit Card</b>  Address <b>P.O. Box 688957 Des Moines, IA 50368-8957</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>credit card payment</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/11/15</u> Date	<u>\$ 50.00</u>  Memo Itemization Below
Expenditure #2 Name <b>Go Daddy.com</b>  Address <b>web purchase</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>website</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/11/15</u> Date	<u>\$ 12.90</u>  (Memo Itemization)
Expenditure #3 Name <b>Trail Blazer</b>  Address <b>620 Mendelssohn Ave N #186, Minneapolis, MN 55427</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>campaign software</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/30/15</u> Date	<u>\$ 700.00</u>  (Memo Itemization)
Expenditure #4 Name <b>Vanco Payment Solutions</b>  Address <b>400 Northridge Rd., Suite 1200 Atlanta, GA 30350</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>electronic payment processing</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/15/15</u> Date	<u>\$ 95.95</u>  Click Here for Memo Itemization Type
Expenditure #5 Name <b>Bay City Democrat</b>  Address <b>309 Ninth St. Bay City, MI 48708</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>printing</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/19/15</u> Date	<u>\$ 154.76</u>  Click Here for Memo Itemization Type

Subtotal this page **\$300.71**

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 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 <b>Alexandra Satkowiak</b>  Address  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>fundraiser musicians</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/11/15</u> Date	<u>\$ 100.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #2 Name <b>Diamond Banquet &amp; Ballroom</b>  Address <b>609 E. Midland St. Bay City, MI 48706</b>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>fundraiser venue</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/11/15</u> Date	<u>\$ 415.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #3 Name <b>Sears Credit Card</b>  Address <b>P.O. Box 688957 Des Moines, IA 50368</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>credit card payment</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/09/15</u> Date	<u>\$ 25.00</u>  <a href="#">Memo Itemization Below</a>
Expenditure #4 Name <b>Sears Credit Card</b>  Address <b>P.O. Box 688957 Des Moines, IA 50368</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>interest</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/14/15</u> Date	<u>\$ 14.36</u>  <a href="#">(Memo Itemization)</a>
Expenditure #5 Name <b>Sears Credit Card</b>  Address <b>P.O. Box 688957 Des Moines, IA 50368</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>credit card payment</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/07/15</u> Date	<u>\$ 100.00</u>  <a href="#">Memo Itemization Below</a>

Subtotal this page **\$640.00**

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 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 <b>USPS</b>  Address 1000 Washington Ave. Bay City, MI 48708  <input type="checkbox"/> Fund Raiser	Purpose: <u>stamps</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/18/15</u> Date	<u>\$ 98.00</u>
Expenditure #2 Name <b>Trail Blazer</b>  Address 620 Mendelssohn Ave N #186, Minneapolis, MN 55427  <input type="checkbox"/> Fund Raiser	Purpose: <u>campaign software</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/10/15</u> Date	<u>\$ 355.00</u>
Expenditure #3 Name <b>Sears Credit Cards</b>  Address P.O. Box 688957 Des Moines, IA 50368  <input type="checkbox"/> Fund Raiser	Purpose: <u>interest</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/12/15</u> Date	<u>\$ 16.14</u>
Expenditure #4 Name <b>Sears Credit Cards</b>  Address P.O. Box 688957 Des Moines, IA 50368  <input type="checkbox"/> Fund Raiser	Purpose: <u>credit card payment</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/07/15</u> Date	<u>\$ 1,402.33</u>
Expenditure #5 Name <b>Trail Blazer</b>  Address 620 Mendelssohn Ave N #186, Minneapolis, MN 55427  <input type="checkbox"/> Fund Raiser	Purpose: <u>campaign software</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/09/15</u> Date	<u>\$ 355.00</u>

Subtotal this page **\$1,402.33**

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

Enter this total  
on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 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 <b>Sears Credit Cards</b>  Address P.O. Box 688957 Des Moines, IA 50368  <input type="checkbox"/> Fund Raiser	Purpose: <u>interest</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/14/15</u> Date	<u>\$ 25.93</u>  (Memo Itemization)
Expenditure #2 Name <b>Sears Credit Cards</b>  Address P.O. Box 688957 Des Moines, IA 50368  <input type="checkbox"/> Fund Raiser	Purpose: <u>credit card payment</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/09/15</u> Date	<u>\$ 1479.12</u>  Memo Itemization Below
Expenditure #3 Name <b>Sawicki &amp; Son</b>  Address 1521 W Lafayette Blvd, Detroit, MI 48216  <input type="checkbox"/> Fund Raiser	Purpose: <u>signs</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/21/15</u> Date	<u>\$ 768.50</u>  (Memo Itemization)
Expenditure #4 Name <b>Sandlot Sports</b>  Address 1221 Salzburg Ave, Bay City, MI 48706  <input type="checkbox"/> Fund Raiser	Purpose: <u>t-shirts/banners</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/23/15</u> Date	<u>\$ 511.45</u>  (Memo Itemization)
Expenditure #5 Name <b>Sandlot Sports</b>  Address 1221 Salzburg Ave, Bay City, MI 48706  <input type="checkbox"/> Fund Raiser	Purpose: <u>t-shirts/banners</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/13/15</u> Date	<u>\$ 177.55</u>  (Memo Itemization)

Subtotal this page **\$1,479.12**  
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 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 <b>Sears Credit Cards</b>  Address P.O. Box 688957 Des Moines, IA 50368  <input type="checkbox"/> Fund Raiser	Purpose: <u>interest</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/06/15</u> Date  (Memo Itemization)	<u>\$ 21.62</u>
Expenditure #2 Name <b>VNO</b>  Address 512 E Midland St, Bay City, MI 48706  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>fundraiser venue</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/10/15</u> Date  Click Here for Memo Itemization Type	<u>\$ 180.00</u>
Expenditure #3 Name <b>Sawicki &amp; Son</b>  Address 1521 W Lafayette Blvd, Detroit, MI 48216  <input type="checkbox"/> Fund Raiser	Purpose: <u>signs</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/25/15</u> Date  Click Here for Memo Itemization Type	<u>\$ 768.50</u>
Expenditure #4 Name <b>O.J. Advertising</b>  Address 509 Center Ave, Bay City, MI 48708  <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>09/25/15</u> Date  Click Here for Memo Itemization Type	<u>\$ 250.00</u>
Expenditure #5 Name <b>Sears Credit Cards</b>  Address P.O. Box 688957 Des Moines, IA 50368  <input type="checkbox"/> Fund Raiser	Purpose: <u>credit card payment</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/13/15</u> Date  Memo Itemization Below	<u>\$ 1538.47</u>

Subtotal this page **\$2,736.97**  
 Grand Total of all Schedules 1B  
 (Complete on last page of Schedule) **\$6,559.13**

Enter this total  
on line 8a 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 <b>Vistaprint</b>  Address <b>internet purchase</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>printing</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/20/15</u> Date	<u>\$ 345.47</u>
Expenditure #2 Name <b>Gravis Marketing</b>  Address <b>internet purchase</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>marketing - print and phone</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/26/15</u> Date	<u>\$ 1193.00</u>
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 **\$0.00**

Grand Total of all Schedules 1B  
(Complete on last page of Schedule) **\$6,559.13**

Enter this total on line 8a of Summary Page



**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

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

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

3. Date Event Was Held  <u>06/11/15</u>	4. Number of Individuals Attending or Participating (whichever is greater)  <u>40</u>	5. Type of Fund Raising Activity  <u>Networking Social</u>	6. Address and Name (If any) of the place where the activity was held. <u>Diamond Banquet and Ballroom</u> <u>609 E. Midland St.</u> <u>Bay City, MI 48708</u> <input type="checkbox"/> Private Residence
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7. Total Contributions \$1,535.00  
8. Other Receipts \$0.00  
9. Gross Receipts (Add lines 7 and 8) \$0.00  
10. Total Cost of Event \$515.00  
(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.



**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

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

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

3. Date Event Was Held  <u>09/10/15</u>	4. Number of Individuals Attending or Participating (whichever is greater)  <u>25</u>	5. Type of Fund Raising Activity  <u>Networking Social</u>	6. Address and Name (If any) of the place where the activity was held.  <u>VNO</u> <u>512 E Midland St,</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Private Residence
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7. Total Contributions \$840.00  
8. Other Receipts \$0.00  
9. Gross Receipts (Add lines 7 and 8) \$0.00  
10. Total Cost of Event \$180.00  
(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.



**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 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: Chris Girard 100 Braddock St. Bay City, MI 48708	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>100.00</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: Chris Girard 100 Braddock St. Bay City, MI 48708	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>400.00</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: Chris Girard 100 Braddock St. Bay City, MI 48708	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>3,000.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Page Subtotal (Outstanding debt)			<b>\$3,500.00</b>	
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)			<b>\$3,500.00</b>	

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.