



**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 8/25/15 to 10/18/2015

1. Committee I.D. Number 150715
2. Committee Name CTE Edward Clements for Commissioner

4. Candidate Last Name Clements First Name Edward M.I. P
4a. Office Sought Including District # or Community Served (If applicable) 8th Ward Bay City Commission
4b. County of Residence Bay

5. Committee's Mailing Address 515 Webb Dr. Bay City, MI 48706
Area Code and Phone 989-501-6063
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 Same
Area Code & Phone Same

7. Treasurer's Business Address Same
Area Code and Phone _____

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) Same
Area Code and Phone _____

FILED CO. CLERK
18TH JUDICIAL
CIRCUIT COURT
2015 OCT 21 P 2:44
BY _____
BAY COUNTY CLERK
CYNTHIA A. LISZAK

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 November 3, 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 hereby discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt.
Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.
Effective date of dissolution _____
Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.
Current Treasurer or Designated Record keeper Edward P. Clements Signature Edward P. Clements Date 10/21/15
Candidate Edward P. Clements Signature Edward P. Clements Date 10/21/15



1. Committee I.D. Number 150715

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name CTE Edward Clements for Commission

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>4505.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>4505.00</u>	(18.) \$ <u>8394.05</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0</u>	(19.) \$ <u>0</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>4505.00</u>	(20.) \$ <u>8394.05</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>0</u>	(21.) \$ <u>0</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0</u>	(22.) \$ <u>0</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>3742.46</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>3742.46</u>	(23.) \$ <u>7338.27</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>0</u>	(24.) \$ <u>0</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>0</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>293.24</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>4505.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>4798.24</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>3742.46</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>1055.78</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150715
2. Committee Name CTE Edward Clements for Commission

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 Name & Address: <u>UA Local 85 PAC</u> <u>6705 Weiss St.</u> <u>Saginaw, MI 48603</u>	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>8/27/2015</u>	\$ <u>500.00</u> \$ <u>750.00</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 # 2 Name & Address: <u>Brunner for state Rep</u> <u>208 E. Murphy St.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/26/15</u>	\$ <u>50.00</u> \$ <u>50.00</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 # 3 Name & Address: <u>Kendall Pilariski</u> <u>65 N. Fraser Rd.</u> <u>Linwood, MI 48631</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/6/15</u>	\$ <u>100.00</u> \$ <u>100.00</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>Mary IDA Dean</u> <u>600 N. Dewitt St.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/9/15</u>	\$ <u>25.00</u> \$ <u>25.00</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			

Page Subtotal 675.00

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 150715
2. Committee Name CTE Edward Clements for Commission

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>9/8/2015</u>	
Name & Address: <u>Ernest + Denise Hill</u> <u>200 N. Erie St.</u> <u>Bay City, MI 48706</u>		\$ <u>100.00</u>	\$ <u>100.00</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 #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/4/2015</u>	
Name & Address: <u>Bob Witucki</u> <u>529 Webb Dr.</u> <u>Baycity, MI 48706</u>		\$ <u>50.00</u>	\$ <u>50.00</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 # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
Name & Address: <u>Chris Girard</u> <u>100 Braddock St.</u> <u>Baycity, MI</u>		\$ <u>25.00</u>	\$ <u>25.00</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			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
Name & Address: <u>Rick Meeth</u> <u>2211 McKinley St.</u> <u>Bay City, MI 48708</u>		\$ <u>50.00</u>	\$ <u>50.00</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			

Page Subtotal 225.00
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 150715
2. Committee Name CTE Edward Clements For Commission

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 9/17/15
Name & Address: Nona Roensch
5632 W. Spring Knoll Dr.
Bay City, MI 48706

6. Amount \$ 20 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 20

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 9/17/15
Name & Address: Pat Race
1004 N. Sherman St.
Bay City, MI 48706

6. Amount \$ 20 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 20

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 9/17/15
Name & Address: Mike Kelly
392 Hotchkiss Rd.
Freeland, MI 48623

6. Amount \$ 20 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 70

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 9/17/15
Name & Address: Jesse Dubey
6756 Division St Apt. 1
Caseville, MI

6. Amount \$ 20 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) \$ 20

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 80.00
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 150715
2. Committee Name CTE Ed Clements for Commission

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>Marj Villano</u> <u>900 Frank St.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/2015</u>	\$ <u>20.00</u> \$ <u>20.00</u>
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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>Lynne & Kevin Neunmeyer</u> <u>4757 Spitler Dr.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/2015</u>	\$ <u>50.00</u> \$ <u>50.00</u>
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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>Scott Couture</u> <u>806 Patterson Ave.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/2015</u>	\$ <u>25.00</u> \$ <u>25.00</u>
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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>Eric Welsby</u> <u>4095 Cambria Apt. 1</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/2015</u>	\$ <u>25.00</u> \$ <u>25.00</u>
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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 120.00

Grand Total of All Schedules 1A
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3. Contribution # 1 Name & Address: <u>Douglas + Cynthia Luczak</u> <u>808 Frost Dr</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/17/2015</u>	\$ <u>75</u>	\$ <u>75</u>
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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>Elizabeth + James Schnettler</u> <u>9120 Port Austin Rd.</u> <u>Bay Port, MI 48720</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/17/2015</u>	\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>Retired</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Sara + Terry Spencer</u> <u>2060 Reppuhn Dr.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/17/2015</u>	\$ <u>50.00</u>	\$ <u>50.00</u>
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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Mike Haley</u> <u>5431 Four mile Rd.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/17/15</u>	\$ <u>50</u>	\$ <u>100</u>
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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 375.00

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150715
2. Committee Name CTE Edward Clements for Commission

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>James Irving</u> <u>1681 Cass Ave.</u> <u>Baycity, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>25</u>	\$ <u>25</u>
Click Here for Memo Itemization			
3. Contribution #2 Name & Address: <u>Harry Gill</u> <u>3030 W. Riverview Dr.</u> <u>Baycity, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>40</u>	\$ <u>40</u>
Click Here for Memo Itemization			
3. Contribution #3 Name & Address: <u>Kathy Dolken</u> <u>2969 Boy Scout Rd.</u> <u>Baycity, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>Retired</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>100</u>	\$ <u>100</u>
Click Here for Memo Itemization			
3. Contribution #4 Name & Address: <u>Joseph Rivet</u> <u>2600 Center Ave.</u> <u>Baycity, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>50</u>	\$ <u>50</u>
Click Here for Memo Itemization			

Page Subtotal 215.00

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**ITEMIZED CONTRIBUTIONS
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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>9/17/15</u> Name & Address: <u>Chris Hennessy</u> <u>1015 Center Ave.</u> <u>Bay City, MI 48708</u> 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>25</u>	\$ <u>25</u> Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/17/15</u> Name & Address: <u>Drew Pinter</u> <u>807 Florida Ct.</u> <u>Bay City, MI 48706</u> 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>50</u>	\$ <u>50</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/17/15</u> Name & Address: <u>Jan Miner</u> <u>304 W. Hampton Rd</u> <u>Essexville, MI 48732</u> 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 checked="" type="checkbox"/> Fund Raiser	\$ <u>25</u>	\$ <u>25</u> Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/17/15</u> Name & Address: <u>Brian Elder</u> <u>915 5th St.</u> <u>Bay City, MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>Lawyer</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100</u>	\$ <u>100</u> Click Here for Memo Itemization

Page Subtotal 200.00

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150715
2. Committee Name CTE Edward Clements For Commission

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>Pedro Santos</u> <u>4646 Morningside Dr.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>25</u>	\$ <u>25</u>
		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>Committee to Elect Kathi Newsham</u> <u>409 N. Linn St.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>50</u>	\$ <u>50</u>
		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>Bob Redmond</u> <u>201 N. Mountain St.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>Retired</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>50</u>	\$ <u>150</u>
		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>Terry Watson</u> <u>93 River Trail</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>25</u>	\$ <u>25</u>
		Click Here for Memo Itemization	

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 150715
2. Committee Name CTE Edward Clements For Commission

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>9/17/15</u>	
Name & Address: <u>Ashley Kloha</u> <u>2676 Fairfield Dr.</u> <u>Bay city, MI 48706</u>		\$ <u>50</u>	\$ <u>50</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			
3. Contribution # 2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
Name & Address: <u>Karl + Gail Klein</u> <u>418 Park Ave.</u> <u>Bay city, MI</u>		\$ <u>50</u>	\$ <u>50</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			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
Name & Address: <u>David Terrasi</u> <u>317 Green Ave.</u> <u>Bay City, MI 48708</u>		\$ <u>25</u>	\$ <u>25</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			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
Name & Address: <u>Bill Hewitt</u> <u>701 Center Ave. Apt 2</u> <u>Bay City, MI 48708</u>		\$ <u>20</u>	\$ <u>20</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			

Page Subtotal 145.00

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

Enter this total on
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Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150715
2. Committee Name CTE Edward Clements For Commission

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 Name & Address: <u>Kerice Basmadjian</u> <u>315 S. Kiesel St.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>50</u>	\$ <u>50</u>
Click Here for Memo Itemization			
3. Contribution #2 Name & Address: <u>Jane Klawon</u> <u>707 Green Ave.</u> <u>Bay City, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>50</u>	\$ <u>50</u>
Click Here for Memo Itemization			
3. Contribution # 3 Name & Address: <u>Oliver Draper</u> <u>108 East Gary St.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>25</u>	\$ <u>25</u>
Click Here for Memo Itemization			
3. Contribution # 4 Name & Address: <u>Bob Pawlak</u> <u>260 N. Pine Rd.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>25</u>	\$ <u>25</u>
Click Here for Memo Itemization			

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 150715
2. Committee Name CTE Edward Clements for Comm

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>9/17/15</u>	
Name & Address: <u>Paulette Groya</u> <u>600 E. Midland St.</u> <u>Bay City, MI 48706</u>		\$ <u>150</u>	\$ <u>150</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Rathskeller, Owner</u>		Click Here for Memo Itemization	
Business Address <u>600 E. Midland St. Bay City, MI 48706</u>			
Type of Contribution: <input 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>9/17/15</u>	
Name & Address: <u>Paul McBride</u> <u>1124 W. Borton Rd</u> <u>Essexville, MI 48732</u>		\$ <u>60</u>	\$ <u>60</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 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>9/17/15</u>	
Name & Address: <u>Andrea Studders</u> <u>215 Ames St.</u> <u>Bay City, MI 48706</u>		\$ <u>25</u>	\$ <u>25</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 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>9/17/15</u>	
Name & Address: <u>Pete Studders</u> <u>5821 Avalon Dr.</u> <u>Pinconning, MI 48650</u>		\$ <u>50</u>	\$ <u>50</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 type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 285.00

Grand Total of All Schedules 1A
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Enter this total on
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150715
2. Committee Name CTE Edward Clements For Commission

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 Name & Address: <u>Tyler Chandler</u> <u>9760 Hemlock St.</u> <u>Bay Port, MI 48720</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	6. Amount <u>\$ 20</u>	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) <u>\$ 20</u>
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 checked="" type="checkbox"/> Fund Raiser			Click Here for Memo Itemization	

3. Contribution # 2 Name & Address: <u>Joe Gilles</u> <u>846 Natures Rd.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	\$ <u>20</u>	\$ <u>20</u>
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 checked="" type="checkbox"/> Fund Raiser			Click Here for Memo Itemization	

3. Contribution # 3 Name & Address: <u>Rich Rytlewski</u> <u>1300 W. Thomas St.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	\$ <u>20</u>	\$ <u>20</u>
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 checked="" type="checkbox"/> Fund Raiser			Click Here for Memo Itemization	

3. Contribution # 4 Name & Address: <u>Maria Franek</u> <u>2107 18th St.</u> <u>Bay City, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	\$ <u>20</u>	\$ <u>20</u>
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 checked="" type="checkbox"/> Fund Raiser			Click Here for Memo Itemization	

Page Subtotal 80.00
Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150715
2. Committee Name CTE Edward Clements For Commis

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>Alex Dardas</u> <u>549 Division St.</u> <u>Auburn, MI 48611</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	\$ <u>20</u> \$ <u>20</u>
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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>Mike Buda</u> <u>526 Handy Dr.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	\$ <u>20</u> \$ <u>20</u>
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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>Rob Clements</u> <u>5550 3 mile Rd.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	\$ <u>20</u> \$ <u>20</u>
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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>Charles Brunner</u> <u>208 Murphy St.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	\$ <u>20</u> \$ <u>70</u>
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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150715
2. Committee Name CTE Edward Clements For Commission

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>Carrie Sepeda</u> <u>207 S. Kiesel St.</u> <u>Bay City, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>20</u>	\$ <u>20</u>
		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>Todd Clements</u> <u>6066 Old Hickory</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>20</u>	\$ <u>20</u>
		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>Ryan Sagady</u> <u>3623 Frankenlust Rd.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>20</u>	\$ <u>20</u>
		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>Matt Beaver</u> <u>537 River Rd.</u> <u>Bay city, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>20</u>	\$ <u>20</u>
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Page Subtotal

80.00

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

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

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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 Name & Address: <u>Keith Villano</u> <u>900 Frank St.</u> <u>Saginaw, MI 48602</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		\$ <u>20</u>	\$ <u>20</u>
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>Allen Baver</u> <u>302 N. Chilson</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>Benefits Adviser</u> Employer <u>Saginaw Bay Underwriters</u> Business Address _____		\$ <u>50</u>	\$ <u>100</u>
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>Dr. Rajesh Dandamudi</u> <u>714 S. Trumbull</u> <u>Bay City, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/18/15</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>Tuscola Physicians</u> Employer <u>Medical Doctor</u> Business Address <u>714 S. Trumbull, Bay City, MI 48708</u>		\$ <u>100</u>	\$ <u>100</u>
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>Ali Siefert</u> <u>5436 Birnbaum Dr.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/18/15</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>Teacher</u> Employer <u>Bay City Schools</u> Business Address <u>910 N. Walnut St. Bay City, MI 48706</u>		\$ <u>100</u>	\$ <u>100</u>
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 270.00

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150715
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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>Patrick Bertrand</u> <u>5458 Lisa Dr.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/28/15</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>20</u>	\$ <u>20</u>
		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>Matt Taylor</u> <u>4753 Baymax Rd</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>20</u>	\$ <u>20</u>
		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>Tony Villano</u> <u>760 Frank St.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>20</u>	\$ <u>20</u>
		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>Rosemary Pope</u> <u>513 Webb Dr.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
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 checked="" type="checkbox"/> Fund Raiser		\$ <u>20</u>	\$ <u>20</u>
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Page Subtotal 80.00

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

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

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3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/17/15</u>	
Name & Address: <u>Bill Clements</u> <u>536 Webb Dr.</u> <u>Bay City, MI 48706</u>		\$ <u>20</u>	\$ <u>20</u>
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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	
Name & Address _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	
Name & Address _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	
Name & Address _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 20.00

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150715
2. Committee Name CTE Edward Clements for Commission

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3. Contribution #1 Name & Address: <u>Tom Nedelt</u> <u>5438 Lisa Dr.</u> <u>Bay City, MI 48706</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/22</u>	\$ <u>25</u> \$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>Dinah Durussel</u> <u>2384 S. Knight Rd.</u> <u>Munger, MI 48747</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/23/15</u>	\$ <u>25</u> \$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>Sheet metal local 7</u> <u>4931 Contec Dr.</u> <u>Lansing, MI 48910</u>	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>9/23/2015</u>	\$ <u>500</u> \$ <u>1000</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: <u>Elaine Dowling</u> <u>700 N. Pine Rd Apt. 222</u> <u>Bay City, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/24/15</u>	\$ <u>50</u> \$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 600.00

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 150715
2. Committee Name CTE Edward Clements for Commissioner

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>9/30/15</u>	
Name & Address: <u>CTE Brandon Krause 1010 S. Nine Mile Rd KawKawlin, MI 48631</u>		\$ <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 type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value=""/>	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/30/15</u>	
Name & Address: <u>Jim + Michelle Richardson 1214 N. Dewitt St. Bay City, MI 48706</u>		\$ <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 type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value=""/>	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/5/15</u>	
Name & Address: <u>William Clements 536 Webb Dr. Bay City, MI 48706</u>		\$ <u>50.00</u>	\$ <u>70.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value=""/>	
3. Contribution # 4	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>10/9/15</u>	
Name & Address: <u>UAW Michigan V-Pac 8600E Jefferson Detroit, MI 48214-3963</u>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value=""/>	

Page Subtotal

625.00

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 150715
2. Committee Name CTE Edward Clements for Commissioner

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

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/9/2015
Name & Address: Ben Doan
2205 E North Union
Bay City, MI 48706

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

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 _____
Name & Address _____

6. Amount \$ _____ 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 # 3 PAC Receipt? YES 4. Date of Receipt _____
Name & Address _____

6. Amount \$ _____ 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 _____
Name & Address _____

6. Amount \$ _____ 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

Page Subtotal 50.00
Grand Total of All Schedules 1A (Complete on last page of Schedule) 4505.00

Enter this total on line 3a of Summary Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

www.Michigan.gov/sos

LATE CONTRIBUTION REPORT

1. Your Committee ID#: 150715
2. Your Committee Name: CTE Edward Clements For Commission
3. Date Late Contribution(s) Received: 10/20/2015 (Only one Date per Sheet)

- Late Contribution Reports are required when a
 - Candidate committee receives a single contribution or a cumulative contribution from the same contributor of \$500.00 or more after the closing date of the last campaign statement required and the 3rd day before an election where the candidate is participating. See Appendix G of the Campaign Finance Manual.
 - A committee other than a candidate committee (PAC, Ballot Question or Political Party) receives a single contribution or a cumulative contribution from the same contributor of \$2,500.00 or more after the closing date of the last campaign statement required and the 3rd day before an election. See Appendix G of the Campaign Finance Manual.
- Contributions are anything of monetary value including contributions of money, in-kind and loans to the committee.
- Late Contribution Reports are not waived by the Reporting Waiver.
- Late Contribution Reports that are filed late result in the committee receiving a late filing fee. The maximum fee is \$2,000.00 per report.
- Paper filers may file the report by any written means (including fax) within 48 hour of receipt of the contribution with your Filing Official.
- Electronic Filers on the state level must file all Late Contribution Report electronically.
- The Late Contribution must also be reported on the next Campaign Statement owed by the committee.

4. Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial and if the contributor is an individual, the Occupation, Employer and Business address of the contributor.	5. Amount
Contributor Name and Address: <u>IBEW PAC Voluntary Fund</u> <u>900 Seventh Street N.W.</u> <u>Washington D.C. 20001</u> (If Individual, also provide:) Occupation _____ Employer / Business Address _____	500.00
Contributor Name and Address: (If Individual, also provide:) Occupation _____ Employer / Business Address _____	
Contributor Name and Address: (If Individual, also provide:) Occupation _____ Employer / Business Address _____	
Contributor Name and Address: (If Individual, also provide:) Occupation _____ Employer / Business Address _____	



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 150715
2. Committee Name CTE Edward Clements for Commission

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Coonan's Irish Hub</u> Address <u>1004 Johnson St.</u> <u>Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign Meeting</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/25/15</u> Date	<u>\$ 30.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>Speedway</u> Address <u>Bay City</u> <u>1740 N. Euclid Ave.</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Fuel</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/26/15</u> Date	<u>\$ 37.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>Euclid Party Store</u> Address <u>200 N. Euclid Ave.</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Beverages for Volunteers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/1/15</u> Date	<u>\$ 17.69</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>Staples</u> Address <u>4021 N. Euclid</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>9/1/15</u> Date	<u>\$ 23.30</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>USPS</u> Address <u>300 E. John St.</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/2/15</u> Date	<u>\$ 66.64</u> Click Here for Memo Itemization Type

Subtotal this page 174.63
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 150715
2. Committee Name CTE Edward Clements for Commission

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Rathskeller</u> Address <u>600 E. Midland St. Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign Meeting</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/8/15</u> 2/20/15 Date	\$ <u>20.00</u>
Expenditure #2 Name <u>Rudys Red Lion</u> Address <u>201 Center Ave. Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign Breakfast</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/12/15</u> Date	\$ <u>37.22</u>
Expenditure #3 Name <u>ATS</u> Address <u>22040 Gratiot Road Merrill, MI 48637</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign Shirts</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/12/15</u> Date	\$ <u>151.58</u>
Expenditure #4 Name <u>CTE Terrosi for 2nd Ward</u> Address <u>317 Green Ave. Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser Tickets</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/26/15</u> Date	\$ <u>50.00</u>
Expenditure #5 Name <u>Girard for Mayor</u> Address <u>100 S. Braddock St. Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser Tickets</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/10/15</u> Date	\$ <u>25.00</u>

Subtotal this page 283.80

Grand Total of all Schedules 1B
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on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 150715
2. Committee Name CTE Edward Clements for Commission

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>BCPS Print Shop</u> Address <u>910 N. Walnut St.</u> <u>Bay City, MI</u> <u>48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Copies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/2/15</u> Date	<u>\$ 20.00</u>
Expenditure #2 Name <u>USPS</u> Address <u>300 E. John St.</u> <u>Bay City, MI</u> <u>48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	8/31/15 <u>8/31/15</u> Date	\$ 147.00 <u>\$ 147.00</u>
Expenditure #3 Name <u>Allied Printing</u> Address <u>240 N. Fenway Dr.</u> <u>Fenton, MI</u> <u>48430</u> <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>9/17/15</u> Date	\$ 300.00 <u>449.06</u>
Expenditure #4 Name <u>Kramer's West Side Meats</u> Address <u>3536 E. Hotchkiss Rd.</u> <u>Bay City, MI</u> <u>48706</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Meat & Cheese Trays</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/17/15</u> Date	<u>\$ 50.00</u>
Expenditure #5 Name <u>Family Dollar</u> Address <u>950 N. Euclid St.</u> <u>Bay City, MI</u> <u>48706</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Plates</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/17/15</u> Date	<u>\$ 8.11</u>

Subtotal this page 674.17
 Grand Total of all Schedules 1B
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Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 150715
2. Committee Name CTE Edward Clements for Commission

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Rathskeller</u> Address <u>600 E. Midland St. Bay City, MI 48706</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser Tab</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/17/15</u> Date	<u>\$ 600.49</u> + Tip <u>170.00</u> <u>770.49</u>
Expenditure #2 Name <u>Lori Offenbecher</u> Address <u>927 N. Dewitt Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Lee Offenbecher Benefit</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/20/15</u> Date	<u>\$ 60.00</u>
Expenditure #3 Name <u>Great minds LLC</u> Address <u>2468 Kaye Ct. Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Graphic Design</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/18/15</u> Date	<u>\$ 250.00</u>
Expenditure #4 Name <u>USPS</u> Address <u>207 S. Kaiser St Pinconning, MI 48650</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/19/15</u> Date	<u>\$ 294.</u>
Expenditure #5 Name <u>Family Dollar</u> Address <u>950 N. Euclid 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>9/20/15</u> Date	<u>\$ 6.36</u>

Subtotal this page 1380.85

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

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Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 150715
2. Committee Name CTE Edward Clements For Commission

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</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>9/23/15</u> Date	<u>\$ 71.51</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>USPS</u> Address <u>1000 Washington Ave.</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/24/15</u> Date	<u>\$ 196.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>CTE Kathi Newsham Mayor</u> Address <u>409 N. Linn St.</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser Tickets</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/25/15</u> Date	<u>\$ 100.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>staples</u> Address <u>4021 N. Euclid Ave.</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Copies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/25/15</u> Date	<u>\$ 5.25</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>Auburn Hotel</u> Address <u>101 W. Midland Rd.</u> <u>Auburn, MI 48611</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign meeting</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/25/15</u> Date	<u>\$ 53.75</u> Click Here for Memo Itemization Type

Subtotal this page 426.51

Grand Total of all Schedules 1B
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Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 150715
2. Committee Name CTE Edward Clements For Commission

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>MI Dem Party</u> Address <u>606 Townsend Lansing, MI 48933</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/28/15</u> Date	<u>\$ 50.00</u>
Expenditure #2 Name <u>Citizens for Greg Durocher</u> Address <u>1916 5th St. Bay City, MI 48708</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser Tickets</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/28/15</u> Date	<u>\$ 50.00</u>
Expenditure #3 Name <u>Speedway</u> Address <u>Bay City 740 N. Euclid Ave. Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Fuel For Campaign Activities</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/27/15</u> Date	<u>\$ 100.00</u>
Expenditure #4 Name <u>Brent Brunner for 4th Ward</u> Address <u>705 Harold St. Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser Tickets</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/1/15</u> Date	<u>\$ 100.00</u>
Expenditure #5 Name <u>Family Dollar</u> Address <u>2616 Center Ave. Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Envelopes</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/4/15</u> Date	<u>\$ 6.84</u>

Subtotal this page 306.84

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

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Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 150715
2. Committee Name CTE Edward Clements for Commission

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 Ave.</u> <u>Bay City, MI</u> <u>48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/4/15</u> Date	<u>\$ 196.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>Staples</u> Address <u>4021 N. Euclid Ave.</u> <u>Bay City, MI</u> <u>48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Copies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/4/15</u> Date	<u>\$ 32.86</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>Staples</u> Address <u>4021 N. Euclid Ave.</u> <u>Bay City, MI</u> <u>48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Copies</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/5/15</u> Date	<u>\$ 7.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>USPS</u> Address <u>300 E. John St.</u> <u>Bay City, MI</u> <u>48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/5/15</u> Date	<u>\$ 16.80</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>Speedway</u> Address <u>740 N. Euclid Ave.</u> <u>Bay City, MI</u> <u>48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Campaign Fuel</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/7/15</u> Date	<u>\$ 25.00</u> Click Here for Memo Itemization Type

Subtotal this page 277.66

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

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Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 150715
2. Committee Name CTE Edward Clements For Commissioner

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Just For Kids Foundation</u> Address <u>5982 W. Side Saginaw Rd.</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Raffle Tickets</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/12/15</u> Date	<u>\$ 100.00</u>
Expenditure #2 Name <u>USPS</u> Address <u>300 E John St.</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/13/15</u> Date	<u>\$ 98.00</u>
Expenditure #3 Name <u>Brandon Krause Register of Deeds</u> Address <u>1010 S. Nine Mile Rd</u> <u>Kawkawlin, MI 48631</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser Ticket</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	<u>\$ 20.00</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 218.00

Grand Total of all Schedules 1B
(Complete on last page of Schedule) 3742.46

Enter this total
on line 8a of
Summary Page



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150715
2. Committee Name CTE Edward Clements for Commission

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>Sept. 17, 2015</u>	4. Number of Individuals Attending or Participating (whichever is greater) 80 <u>81</u>	5. Type of Fund Raising Activity <u>Social mixer</u>	6. Address and Name (if any) of the place where the activity was held. <u>Rothskeller</u> <u>600 E. Midland St.</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Private Residence
---	---	---	--

7. Total Contributions \$2138.00
8. Other Receipts 0
9. Gross Receipts (Add lines 7 and 8) 2138.00
10. Total Cost of Event \$778.00
(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.