



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.

1. Committee I.D. Number <u>150711</u>		3. This Statement covers: from <u>8/23/15</u> to <u>10/19/15</u>	
2. Committee Name <u>Team David Terrasi</u>		4. Candidate Last Name <u>Terrasi</u> First Name <u>David</u> M.I. <u>M.</u>	
5. Committee's Mailing Address <u>David Terrasi</u> <u>317 Green Ave Box</u> <u>Box City, MI</u> <u>48708</u> Area Code and Phone <u>989-316-2353</u> <small>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.</small>		4a. Office Sought Including District # or Community Served (If applicable) <u>2nd Ward City Commissioner</u>	
7. Treasurer's Business Address <u>David Terrasi</u> <u>317 Green Ave</u> <u>Box City, MI</u> <u>48708</u> Area Code and Phone <u>989-316-2353</u>		4b. County of Residence <u>Ben</u>	
6. Treasurer's Name & Residential Address <u>David Terrasi</u> <u>317 Green Ave</u> <u>Box City, MI</u> <u>48708</u> Area Code & Phone <u>989-316-2353</u>		6. Treasurer's Name & Residential Address <u>David Terrasi</u> <u>317 Green Ave</u> <u>Box City, MI</u> <u>48708</u> Area Code & Phone <u>989-316-2353</u>	
8. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper) <u>David Terrasi</u> <u>317 Green Ave</u> <u>Box City, MI</u> <u>48708</u> Area Code and Phone <u>989-316-2353</u>		8. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper) <u>David Terrasi</u> <u>317 Green Ave</u> <u>Box City, MI</u> <u>48708</u> Area Code and Phone <u>989-316-2353</u>	

9. TYPE OF STATEMENT 9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus Date of Election, Convention or Caucus _____		Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly 9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)		9e. Dissolution of Candidate Committee <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. Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Effective date of dissolution: _____ BY _____ BAY COUNTY CLERK CYNTHIA A. MLECZAK 2015 OCT 21 2 3:24 FILED COCLERK 18TH JUDICIAL CIRCUIT COURT	
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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 David Terrasi Signature [Signature] Date 10/21/15

Candidate David Terrasi Signature [Signature] Date 10/21/15



1. Committee I.D. Number 150711

2. Committee Name Team David Terrasi

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>2,400.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>2,400.00</u>	(18.) \$ <u>4,655.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _____	(19.) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>2,400.00</u>	(20.) \$ <u>4,655.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ _____	(21.) \$ <u>306.03</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ _____	(22.) \$ _____
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>2,246.72</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ _____	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ _____	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>2,246.72</u>	(23.) \$ <u>4,408.63</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ _____	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ _____	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ _____	(24.) \$ _____
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ _____	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _____	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>848.09</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>2,400.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>2,408.09</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>2,246.72</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>247.37</u> *	



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 150711
2. Committee Name Team David Terrasi

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

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 8/26/15
Name & Address: Spencer David
929 Center Ave
RAY City, MI
48708

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 #2 PAC Receipt? YES 4. Date of Receipt 8/25/15
Name & Address: Urban Grant
1611 Center
RAY City, MI
48704

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 8/25/15
Name & Address: Urban Sandy
1611 Center Ave
Ray City, MI
48708

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 #4 PAC Receipt? YES 4. Date of Receipt 8/26/15
Name & Address: Coran, Robert
1103 McKinley
Ray City, MI
48708

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: Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

Page Subtotal 125.00
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 150711
2. Committee Name Team David Terras

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/26/15</u>		
Name & Address: <u>Christensen, Gretchen</u> <u>1103 McKinley</u> <u>Bar City, MI 48118</u>			\$ <u>50.00</u>	\$ <u>50.00</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 # 2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/26/15</u>		
Name & Address: <u>Sheeran Joe</u> <u>1206 Wildernew Ct.</u> <u>Esserville MI 48732</u>			\$ <u>2500</u>	\$ <u>2500</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>8/26/15</u>		
Name & Address: <u>Schneider Stephanie</u> <u>202 Adams</u> <u>Midland, MI 48642</u>			\$ <u>1500</u>	\$ <u>1500</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>8/20/15</u>		
Name & Address: <u>Doris Mike</u> <u>5532 Merry Ct.</u> <u>Sunford, MI 48657</u>			\$ <u>15.00</u>	\$ <u>65.00</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 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 150711
2. Committee Name Team David Torres

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>Barbara Stuart</u> <u>421 Center Ave</u> <u>Bay City, MI</u> <u>48708</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/26/15</u>	<u>25.00</u>	<u>65.00</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>Steph Kerin</u> <u>14 Shanker Dr.</u> <u>Essexville, MI</u> <u>48732</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/26/15</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 # 3 Name & Address: <u>Margaret Mary</u> <u>613 Green Ave</u> <u>Bay City, MI</u> <u>48708</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/26/15</u>	<u>40.00</u>	<u>40.00</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>Wackerly Neil</u> <u>410 Green Ave</u> <u>Bay City, MI</u> <u>48708</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 _____ 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 140.00
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 150711
2. Committee Name TEAM DAVE & TERRAS

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:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/26/15</u>		
<u>Grabowski Michael</u> <u>909 5th St</u> <u>Bay City, MI</u>			<u>\$20.00</u>	<u>\$70.00</u>
5. If over \$100.00 cumulative, please provide:			Click Here for Memo Itemization	
Occupation _____ Employer _____				
Business Address _____				
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				
3. Contribution #2 Name & Address:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/26/15</u>		
<u>Gerard Chris</u> <u>100 Broaddock St.</u> <u>Bay City MI</u>			<u>\$25.00</u>	<u>\$25.00</u>
5. If over \$100.00 cumulative, please provide:			Click Here for Memo Itemization	
Occupation _____ Employer _____				
Business Address _____				
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				
3. Contribution #3 Name & Address:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/26/15</u>		
<u>Royce Sandra</u> <u>306 Valerie Ct.</u> <u>Esserville, MI</u>			<u>\$50.00</u>	<u>\$50.00</u>
5. If over \$100.00 cumulative, please provide:			Click Here for Memo Itemization	
Occupation _____ Employer _____				
Business Address _____				
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				
3. Contribution #4 Name & Address:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/26/15</u>		
<u>Cleary Edward</u> <u>515 Webb St.</u> <u>Bay City, MI</u>			<u>\$50.00</u>	<u>\$50.00</u>
5. If over \$100.00 cumulative, please provide:			Click Here for Memo Itemization	
Occupation _____ Employer _____				
Business Address _____				
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				

Page Subtotal 145.00

Grand Total of All Schedules 1A
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line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 150711
2. Committee Name Team David Terrasi

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>Tiller Broad</u> <u>617 Greenfield Dr</u> <u>Bay City, MI</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/20/15</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 #2 Name & Address: <u>Basmajian Kerice</u> <u>315 Kessel St</u> <u>Bay City MI</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 _____ 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>Harris Jane</u> <u>211 Dark Ave</u> <u>Bay City, MI</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 _____ 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>Michigan Laborers Political League</u> <u>1118 Centennial Way Suite 100</u> <u>Lansing, MI</u>	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>8/26/15</u>	\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Union Labor Union</u> Employer _____ Business Address <u>1118 Centennial Lansing MI</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 400.00

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 150711
2. Committee Name Team David Terras

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>Abrahamson Jonathan</u> <u>2300 Cleveland</u> <u>Bay city, MI</u> <u>48708</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 _____			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 #2 Name & Address: <u>Storkweather, Thomas</u> <u>1113 McKinley Ave</u> <u>Bay city, MI</u> <u>48708</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/26/15</u>	<u>50.00</u>	<u>60.00</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 Name & Address: <u>Brink Carl</u> <u>6329 Golf Lakes Ct</u> <u>Bay City, MI</u> <u>48708</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/26/15</u>	<u>40.00</u>	<u>40.00</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 Name & Address: <u>Kading Michelle</u> <u>1113 McKinley Ave</u> <u>Bay City, MI</u> <u>48708</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/26/15</u>	<u>20.00</u>	<u>20.00</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 130.00

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 1507011
2. Committee Name TEAM DAVID TELRAS

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>Lupate Barb</u> <u>411 Green Ave</u> <u>Pax City, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/27/15</u>	\$ <u>3500</u>	\$ <u>7500</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>48708</u>		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 #2 Name & Address: <u>Kleinert William</u> <u>1913 6th St</u> <u>Pax City, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/27/2015</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
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 Name & Address: <u>Shrobeck Bruce</u> <u>1818 5th St</u> <u>Pax City, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/04/15</u>	\$ <u>7500</u>	\$ <u>7500</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
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 Name & Address: <u>Shrobeck Cindy</u> <u>1818 5th St</u> <u>Pax City, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/04/15</u>	\$ <u>7500</u>	\$ <u>75.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 28500

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

1. Committee I.D. Number 150711
2. Committee Name Team David Terras

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:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9/8/11</u>		
<p><u>Terras, Jackie</u> <u>1259 Lorraine</u> <u>Monroe, MI 48161</u></p>			<u>2500</u>	<u>2500</u>
5. If over \$100.00 cumulative, please provide:			Click Here for Memo Itemization	
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 Name & Address:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/14/11</u>		
<p><u>Jim Collins</u> <u>2221 Center Ave</u> <u>Buy City, MI 48108</u></p>			<u>5500</u>	<u>5500</u>
5. If over \$100.00 cumulative, please provide:			Click Here for Memo Itemization	
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 Name & Address:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/14/11</u>		
<p><u>Ann Colburn Collins</u> <u>2221 Center Ave</u> <u>Buy City, MI 48108</u></p>			<u>5500</u>	<u>5500</u>
5. If over \$100.00 cumulative, please provide:			Click Here for Memo Itemization	
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 Name & Address:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/18/11</u>		
<p><u>Shelvia Dishy</u> <u>401 N. Sheridan</u> <u>Buy City, MI 48108</u></p>			<u>10.00</u>	<u>10.00</u>
5. If over \$100.00 cumulative, please provide:			Click Here for Memo Itemization	
Occupation _____ Employer _____				
Business Address _____				
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				

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 150711
2. Committee Name TEAM DAVID TERRASI

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:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/28/15</u>		
<p>Marlene Christoff-Sundberg 609 N Trumbull St Bay City, MI 48708</p>			\$ 35.00	\$ 60.00
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 #2 Name & Address:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/28/15</u>		
<p>Karen Olson 345 Green Ave Bay City, MI 48708</p>			\$ 5.00	\$ 5.00
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 Name & Address:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/2/15</u>		
<p>Howard Wetters 1866 Wetters Rd Kawkawlin, MI 48631</p>			\$ 20.00	\$ 20.00
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 Name & Address:	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/5/15</u>		
<p>Alan Flood 1900 Center Ave Bay City, MI 48708</p>			\$ 20.00	\$ 20.00
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

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 150711
2. Committee Name TEAM DAVID TERVASE

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>10/5/15</u>		
Name & Address: <u>James Stoddard</u> <u>2316 NURMI DR.</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 _____			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 # 2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/1/15</u>		
Name & Address: <u>Julia Bledsoe</u> <u>179 Rivertrail</u> <u>Bay City, MI 48706</u>			<u>\$20.00</u>	<u>\$20.00</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>10/1/15</u>		
Name & Address: <u>Sherry Bledsoe</u> <u>179 Rivertrail</u> <u>Bay City, MI 48706</u>			<u>\$20.00</u>	<u>\$119.97</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>NONE</u>			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>10/1/15</u>		
Name & Address: <u>David Bledsoe</u> <u>174 Rivertrail</u> <u>Bay City, MI 48706</u>			<u>20.00</u>	<u>\$20.00</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

110.00

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 150711
2. Committee Name Team David Terrasi

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>Jackie Terrasi</u> <u>1209 Lovander</u> <u>Monroe, MI 48162</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/7/15</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		<u>\$25.00</u>	<u>\$50.00</u>
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 Name & Address: <u>Richard Shook</u> <u>P.O. Box 382</u> <u>Bay City, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/10/15</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		<u>\$50.00</u>	<u>\$50.00</u>
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 Name & Address: <u>DAWN HUGER</u> <u>1421 6th St</u> <u>Bay City, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/8/15</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		<u>\$180.00</u>	<u>\$180.00</u>
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 Name & Address: <u>Donald Tiller</u> <u>617 Green Ave</u> <u>Bay City, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/10/15</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		<u>\$30.00</u>	<u>\$80.00</u>
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

205.00

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 150711
2. Committee Name Jean Davis (Term)

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>Mike Ombry</u> <u>4100 Green</u> <u>May City, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/10/15</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 #2 Name & Address: <u>Kristy White-Keenan</u> <u>2300 Gysin Ct.</u> <u>May City, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/10/15</u>	<u>\$30.00</u>	<u>\$30.00</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>Leticia Stock</u> <u>2700 Grandland</u> <u>May City, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/10/15</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>Aundrea Collins</u> <u>2021 Center Ave</u> <u>May City, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/10/15</u>	<u>\$130.00</u>	<u>\$180.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Director of Faculty Programs</u> Employer <u>Saginaw Valley St. University</u> Business Address <u>7400 May Rd University Center, MI 48710</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	

Page Subtotal 255.00

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 150711
2. Committee Name Team DAVID TERRAS

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 Each Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: <u>James Collins</u> <u>2021 Center Ave</u> <u>MAY CITY, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: <u>10/10/15</u>	\$ <u>125.00</u>	\$ <u>180.00</u>
5. If over \$100.00 cumulative, please provide: Occupation: <u>Retired</u> Employer: <u>48708</u>		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 #2 Name & Address: <u>Warren Smith</u> <u>1817 Center Ave</u> <u>MAY CITY, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: <u>10/10/15</u>	\$ <u>25.00</u>	\$ <u>25.00</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 Name & Address: <u>Faye Smith</u> <u>1817 Center Ave</u> <u>MAY CITY, MI 48708</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: <u>10/10/15</u>	\$ <u>25.00</u>	\$ <u>25.00</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 Name & Address: <u>David Terras</u> <u>317 Green</u> <u>3465 Gebot Sessow MI</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt: <u>9/29/15</u>	\$ <u>100.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation: <u>School Psychologist</u> Employer: <u>SPED</u>		Click Here for Memo Itemization	
Business Address: _____			
Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 275.00
Grand Total of All Schedules 1A (Complete on last page of Schedule) 2,400.00
Enter this total on line 3a of Summary Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 150711
2. Committee Name Team David Terrasi

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<p>Expenditure #1 Name <u>Asian Noodle</u> Address <u>200 Center Ave</u> <u>Bay City, MI</u> <u>48708</u></p> <p><input checked="" type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Food Fundraiser</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>8/26/15</u> Date</p>	<p><u>\$315.17</u></p>
<p>Expenditure #2 Name <u>Meijer</u> Address <u>595 Pine Rd.</u> <u>Bay City, MI</u> <u>48708</u></p> <p><input checked="" type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Beverage Fundraiser</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>8/25/15</u> Date</p>	<p><u>\$16.95</u></p>
<p>Expenditure #3 Name <u>Hobby Lobby</u> Address <u>2480 Tittabawassee</u> <u>Saginaw, MI</u> <u>48604</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Stencils for wood signs</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>8/25/15</u> Date</p>	<p><u>\$43.43</u></p>
<p>Expenditure #4 Name <u>Home Depot</u> Address <u>3860 State St.</u> <u>Bay City, MI</u> <u>48706</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Paint for wood signs</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>9/6/15</u> Date</p>	<p><u>\$41.05</u></p>
<p>Expenditure #5 Name <u>Hobby lobby</u> Address <u>2480 Tittabawassee</u> <u>Saginaw, MI</u> <u>48604</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Stencils for wood signs</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>9/18/15</u> Date</p>	<p><u>\$15.89</u></p>

Subtotal this page 432.46

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**

150711

1. Committee I. D. Number _____

2. Committee Name Team David Terrazi

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<p>Expenditure #1</p> <p>Name <u>Rimbald Printing</u></p> <p>Address <u>5171 Blackbeak Dr</u> <u>Saginaw, MI</u> <u>48604</u></p> <p><input checked="" type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Letters for Fundraiser</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<u>9/18/15</u>	<u>\$31.80</u>
<p>Expenditure #2</p> <p>Name <u>Rimbald Printing</u></p> <p>Address <u>"Postmaster"</u> <u>5171 Blackbeak Dr</u> <u>Saginaw, MI</u> <u>48604</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Postage for All voter trib Mailings</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<u>9/18/15</u>	<u>\$126.48</u>
<p>Expenditure #3</p> <p>Name <u>Meijer</u></p> <p>Address <u>595 N Pine Rd</u> <u>Bay City, MI</u> <u>48705</u></p> <p><input checked="" type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Address Labels fundraiser</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<u>9/19/15</u>	<u>\$14.71</u>
<p>Expenditure #4</p> <p>Name <u>Dollar Tree Store</u></p> <p>Address <u>2624 Center Ave</u> <u>Bay City, MI</u> <u>48708</u></p> <p><input checked="" type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Envelopes Fundraiser Mailings</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<u>9/19/15</u>	<u>\$9.54</u>
<p>Expenditure #5</p> <p>Name <u>US Post office</u></p> <p>Address <u>Bay City</u> <u>1000 Washington</u> <u>Bay City, MI</u> <u>48708</u></p> <p><input checked="" type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Postage for Are fundraiser Mailings</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<u>9/19/15</u>	<u>\$98.00</u>

Subtotal this page

280.53

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 150711
2. Committee Name TEAM DANIEL TERRAS

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name: <u>Wohlfeils Acc</u> Address: <u>5818 State St.</u> <u>Saginaw, MI</u> <u>48603</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Ties wraps for wood signs</u>	<u>9/18/15</u> Date	<u>\$15.89</u>
Expenditure #2 Name: <u>Home Depot</u> Address: <u>3860 State St</u> <u>Bay City, MI</u> <u>48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Paint for wood signs</u>	<u>9/6/15</u> Date	<u>\$41.05</u>
Expenditure #3 Name: <u>Menard's</u> Address: <u>2864 Wilder</u> <u>Bay City, MI</u> <u>48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Green stakes for wood signs</u>	<u>9/19/15</u> Date	<u>\$39.92</u>
Expenditure #4 Name: <u>D'Angelos</u> Address: <u>1305 Columbus</u> <u>Bay City, MI</u> <u>48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Road/sign painting</u>	<u>9/19/15</u> Date	<u>\$2279</u>
Expenditure #5 Name: <u>Reimold Printing</u> Address: <u>5171 Blackhawk Dr</u> <u>Saginaw, MI</u> <u>48604</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>TRIFOLD 1500.</u>	<u>9/18/15</u> Date	<u>\$4291</u>

Subtotal this page 7625.6
 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 150711
2. Committee Name Team David Terrasi

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Christopher Girard</u> Address <u>100 Broddock St. Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Campaign Director Fundraiser	<u>10/15</u> Date	<u>\$2500</u>
Expenditure #2 Name <u>Edwards Don Tiller</u> Address <u>617 Green Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Campaign Director Fundraiser	<u>09/16/15</u> Date	<u>\$5000</u>
Expenditure #3 Name <u>Cate Ed Clements</u> Address <u>515 Webb Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Campaign Director Fundraiser	<u>9/17/15</u> Date	<u>\$2500</u>
Expenditure #4 Name <u>Cate/Friends of Brian K Elder</u> Address <u>PO Box 66 Bay City, MI 48707</u> <input type="checkbox"/> Fund Raiser	Campaign Director Fundraiser	<u>09/15/15</u> Date	<u>\$2000</u>
Expenditure #5 Name <u>Reinhold Printing</u> Address <u>5171 Blackbeak Susina W MI 48604</u> <input type="checkbox"/> Fund Raiser	AV Postcards	<u>09/29/15</u> Date	<u>\$148.63</u>

Subtotal this page 268.63

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 150711
2. Committee Name TEAM DAVID TERPASI

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<p>Expenditure #1 Name <u>Walgreens</u> Address <u>2901 Center Ave</u> <u>Bay City, MI</u> <u>48708</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Stamps</u></p>	<p><u>10/28/15</u></p>	<p><u>\$19.60</u></p>
<p>Expenditure #2 Name <u>US Post office</u> Address <u>1000 Washington</u> <u>Bay City, MI</u> <u>48708</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>AV Postcards</u></p>	<p><u>9/29/15</u></p>	<p><u>\$52.50</u></p>
<p>Expenditure #3 Name <u>Tricity Brewing</u> Address <u>3020 N Water St</u> <u>Bay City, MI</u></p> <p><input checked="" type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Beer Beverage Fundraiser</u></p>	<p><u>10/1/15</u></p>	<p><u>\$80.00</u></p>
<p>Expenditure #4 Name <u>US Post office</u> Address <u>1233S Washington</u> <u>Saginaw, MI</u> <u>48601</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Mailing for AV Postcard postage</u></p>	<p><u>10/17/15</u></p>	<p><u>\$.35</u></p>
<p>Expenditure #5 Name <u>US Post office</u> Address <u>1000 Washington</u> <u>Bay City, MI</u> <u>48708</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Postage for Tricity Brewing mailing</u></p>	<p><u>10/9/15</u></p>	<p><u>\$17.64</u></p>

Subtotal this page

170.09

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

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

150711

1. Committee I. D. Number _____

2. Committee Name Team David Terassi

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Dollar Tree</u> Address <u>2624 Center</u> <u>Bay City MI</u> <u>48708</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Plates</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/9/15</u> Date	<u>\$ 2.12</u> Amount
Expenditure #2 Name <u>Meijer</u> Address <u>595 Pine Rd</u> <u>Bay City MI</u> <u>48708</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Food / Wine Beverage</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/27/15</u> Date	<u>\$ 57.01</u> Amount
Expenditure #3 Name <u>Meijer</u> Address <u>595 Pine Rd</u> <u>Bay City MI</u> <u>48708</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>cards for Fundraiser</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/9/15</u> Date	<u>\$ 1.07</u> Amount
Expenditure #4 Name <u>Gordon Food Service</u> Address <u>3730 E Wilder</u> <u>Bay City MI</u> <u>48706</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Food Fundraiser</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/23/15</u> Date	<u>\$ 36.00</u> Amount
Expenditure #5 Name <u>David Terassi</u> Address <u>317 Green</u> <u>Bay City MI</u> <u>48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Loan Payment</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/13/15</u> Date	<u>\$ 100.00</u> Amount

Subtotal this page 196.17

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

Enter this total
on line 8a of
Summary Page

Page 6 of 7



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 150711
2. Committee Name TEAM DAVID TERRAS

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Postmaster</u> Address <u>C/o Reimbold Printing</u> <u>3291 North MI</u> <u>48604</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Travel mailing</u> <u>of 408 total</u>	<u>10/13/15</u> Date	<u>\$ 226.48</u>
Expenditure #2 Name <u>Walmart</u> Address <u>2901 Center Ave</u> <u>Esserville, MI</u> <u>48732</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Mail/Postage</u> <u>for friends</u> <u>to Millerd</u>	<u>10/17/15</u> Date	<u>\$ 9.80</u>
Expenditure #3 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ Date _____ \$ _____		
Expenditure #4 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ Date _____ \$ _____		
Expenditure #5 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ Date _____ \$ _____		

Subtotal this page 136.28

Grand Total of all Schedules 1B
(Complete on last page of Schedule) 2,246.72

Enter this total
on line 8a of
Summary Page

2,246.72



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150711
2. Committee Name Team David Terrasi

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>08/26/2015</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>35</u>	5. Type of Fund Raising Activity <u>DINNER</u>	6. Address and Name (If any) of the place where the activity was held. <u>Asian Noodle</u> <u>200 Center Ave</u> <u>Boy City, MI</u> <input type="checkbox"/> Private Residence <u>48708</u>
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7. Total Contributions 1385.00

8. Other Receipts _____

9. Gross Receipts (Add lines 7 and 8) _____

10. Total Cost of Event 487.14
(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 150711
2. Committee Name TEAM DAVID TERRAS

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>10/10/15</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>18</u>	5. Type of Fund Raising Activity <u>DINNER</u>	6. Address and Name (if any) of the place where the activity was held. <u>Ann-Coburn Cellars</u> <u>3600 Collins</u> <u>2nd Floor</u> <u>Gray City MI</u> <input checked="" type="checkbox"/> Private Residence
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7. Total Contributions 835.00

8. Other Receipts 0.00

9. Gross Receipts (Add lines 7 and 8) _____

10. Total Cost of Event 330.22
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

48708

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 150711
2. Committee Name TEAM DAVID TERRASI

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

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: <u>DAVID TERRASI</u> <u>317 Green Ave</u> <u>But City, MI</u> <u>48728</u>	4. Type: <u>loan</u> 5. Date Debt Was Incurred: <u>10/13/15</u> 6. Original Amount of Debt: <u>\$100.00</u>	<u>10/13/15</u> <u>\$100.00</u> \$ _____ \$ _____ \$ _____	<u>100</u> \$ _____ \$ _____ \$ _____	<u>\$ 0.00</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:	4. Type: _____ 5. Date Debt Was Incurred: _____ 6. Original Amount of Debt: _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____ \$ _____ \$ _____	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. Date Debt Was Incurred: _____ 6. Original Amount of Debt: _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____ \$ _____ \$ _____	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) 0.00
 Grand Total of all Schedules 1E 0.00
 (Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.