



**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 150331		3. This Statement covers From: <u>11/25/2014</u> To: <u>07/19/2015</u> <small>Mo Day Year Mo Day Year</small>	
2. Committee Name Committee to Elect Vaughn J. Begick Commissioner		4. Candidate Last Name <u>Begick</u> First Name <u>Vaughn</u> M.I. _____ 4a. Office Sought Including District # or Community Served (If applicable) 3rd Dist Bay Co 4b. County of Residence <u>Bay</u> Driver License # (Optional) _____	
5. Committee's Mailing Address 522 N Madison Bay City MI 48708 Area Code and Phone <u>(989) 894-5007</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>		6. Treasurer's Name & Residential Address John Nyquist 311 N Grant Bay City MI 48708 Area code & Phone <u>(989) 450-1721</u> Driver License # (Optional) _____	
7. Treasurer's Business Address 522 N MADISON AVE Bay City MI 48708 Area Code and Phone <u>(989) 894-5007</u>		8. Designated Recordkeeper's Name and Mailing Address (If the committee has a Designated Recordkeeper) Margie Begick 5353 Lorraine Court Bay City MI 48706 Area Code and Phone <u>(989) 686-0578</u> Driver License # (Optional) _____	

FILED CO CLERK
 18TH JUDICIAL
 CIRCUIT COURT
 2015 JUL 10 A 11:45
 BAY COUNTY CLERK
 CYNTHIA R. LUCZAK

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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> School <input type="checkbox"/> Special <input type="checkbox"/> Caucus Date of Election, Convention or Caucus <u>08/04/2015</u> <small>Month Day Year</small>		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. <input type="checkbox"/> Dissolution of Candidate Committee Effective Date of Dissolution _____ <small>Mon Day Year</small> By checking this item, I certify that the committee has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.	
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A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement can not be waived.

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

Current Treasurer or Designated Recordkeeper	<u>John Nyquist</u> Type or Print Name		Date	<u>07/07/2015</u> Mo Day Year
Candidate	<u>Vaughn Begick</u> Type or Print Name		Date	<u>07/07/2015</u> Mo Day Year

Authority granted under P.A. 388 of 1976



**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>2550.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>0.00</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>2550.00</u>	(18.) \$ <u>2550.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0.00</u>	(19.) \$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>2550.00</u>	(20.) \$ <u>2550.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>0.00</u>	(21.) \$ <u>0.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0.00</u>	(22.) \$ <u>0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>1924.36</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>1924.36</u>	(23.) \$ <u>1924.36</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>0.00</u>	(24.) \$ <u>0.00</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0.00</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>3318.11</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + <u>2550.00</u>	
	(15.) = <u>5868.11</u>	
15. SUBTOTAL Add Lines 13 and 14		
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - <u>1924.36</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>3943.75</u> *	

NOTE: Direct contributions, in-Kind contributions, loans, expenditures and outstanding debts count against the \$1,000.00 Reporting Waiver threshold. All required schedules must be included with this statement. *If your ending balance is negative, please recheck your math.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>1</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Bill Appold Address: 3690 Stone Island Rd Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>2</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Herb Appold Address: 36975 Stone Island Road Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>3</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Dorine Auernhammer Address: 6869 Three Mile Rd Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>4</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Marcia Bacon Address: 2481 Old Bridge Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	70.00	

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>5</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Randy Badgerow Address: 613 30th St Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	50.00
3. Contribution # <u>6</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Dennis Banaszak Address: 617 14th St Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>7</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Jeremy Begick Address: 4607 Three Mile Rd Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>8</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Margie Begick Address: 5353 Lorraine Court Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	105.00	

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>9</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Norbert Begick</u> Address: <u>6242 3 Mile Road</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>10</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Paul Begick</u> Address: <u>5852 S. 4 Mile Road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>11</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Tim Begick</u> Address: <u>5353 Lorraine court</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>12</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Vaughn Begick</u> Address: <u>5353 Lorraine Court</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	55.00	

Enter this total on
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1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
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Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>13</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Charles Behmlander Address: 3162 Stone Island Rd Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>14</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Gary Behmlander Address: 1964 Kloha Rd Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>15</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Greg Behmlander Address: 3124 Stone Island Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	30.00
3. Contribution # <u>16</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Cynthia Birnbaum Address: 2612 Chapel Dr Saginaw MI 48603 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	80.00	

Enter this total on
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
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3. Contribution # <u>17</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Fred Boynton Address: 2424 East Tennis Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>18</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Gary Brandt Address: 3810 Three Mile Rd Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>19</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Bob Campbell Address: 810 Malzahan Saginaw MI 48602 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>20</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Carlene Dardas Address: 1680 N Jones Rd Essexville MI 48732 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	55.00	

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
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Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>21</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Brandon Defrain Address: 314 Vanetten Pinnconning MI 48650 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>22</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Tom Deprekel Address: 305 Stark Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>23</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Robert Eastman Address: 2430 Salzburg Rd Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>24</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Gene Engerer Address: 1401 Delta Rd. Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	15.00	15.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	55.00	

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
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Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>25</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Bill Fournier</u> Address: <u>1020 N. Water</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>26</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Lisette Gibson</u> Address: <u>6034 S. Saginaw road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>27</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Don Good</u> Address: <u>714 Webb Dr</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>28</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Walter Hagen</u> Address: <u>4650 Elm Drive</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	50.00	

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**ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE**

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2. Committee Name Committee to Elect Vaughn J. Begick Comm-
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3. Contribution # <u>29</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Larry Hair</u> Address: <u>2347 Amelith Rd.</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	30.00
3. Contribution # <u>30</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Glen Herbosheimer</u> Address: <u>66 West Whitefeather Rd</u> <u>Pinconning MI 48650</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	40.00	40.00
3. Contribution # <u>31</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Tom Hoerauf</u> Address: <u>3510 S Euclid</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>32</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Mark Janer</u> Address: <u>1701 Mosher</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	110.00	

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**ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
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Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>33</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Tammy Jay</u> Address: <u>5996 Redfeather Dr</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>34</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Mike Kegley</u> Address: <u>3372 East Woodland Drive</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>35</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Robert Kernstock</u> Address: <u>5050 South Eight Mile Road</u> <u>Auburn MI 48611</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>36</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Robert Klimmek</u> Address: <u>2922 Engelhardt Road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	30.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	80.00	

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt.)
3. Contribution # <u>37</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Bill Kramer Address: 5682 Michael Drive Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>38</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Robert Lee Address: 1803 Michigan Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>39</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Herb Matthes Address: 2949 Thunderbird Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>40</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Melvin McNally Address: 2081 Fraser Road Kawkawlin MI 48631 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	50.00	

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 41 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: William Miller Address: 1642 Townline Rd. Auburn MI 48611 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 42 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Ronald Monville Address: 2849 E Westwood Dr Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	30.00
3. Contribution # 43 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Thomas Mueller Address: 3938 Bush Drive Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # 44 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: John Neumeyer Address: 7425 N. Michigan Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	85.00	

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>45</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Robert Packard Address: 1482 West Salzburg Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>46</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Dennis R. Poirier Address: 1265 Orchard Road Essexville MI 48732 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	30.00
3. Contribution # <u>47</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Bill Powell Address: 5277 Crestway Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	50.00
3. Contribution # <u>48</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Elaine Prah Address: 424 Hotchkiss Road Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	30.00
Page Subtotal	130.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>49</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Gerald Prevost</u> Address: <u>1619 Stanton</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>50</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Robert Rankey</u> Address: <u>4758 Spittler Drive</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	40.00	40.00
3. Contribution # <u>51</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>James Reichard</u> Address: <u>6946 Mackinaw Road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	30.00
3. Contribution # <u>52</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Ruth Reuther</u> Address: <u>2918 S. Wuclid</u> <u>Bay City MI</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	100.00	

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>53</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Michael Rivard Address: 840 N. Garfield Rd. Linwood MI 48634 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	40.00	40.00
3. Contribution # <u>54</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Jim Ruthig Address: 4822 Basswood Saginaw MI 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>55</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Trent Ruthig Address: 4822 Basswood Saginaw MI 48603 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>56</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Ralph Schmidt Address: 6390 Westside Saginaw Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	90.00	

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>57</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Douglas Schweitzer Address: 3577 Monitor Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>58</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Jane Smith Address: 1311 Park Avenue Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>59</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Mel Smith Address: P.O. Box 1341 Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>60</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Bruce Sparks Address: 312 N Auburn Auburn MI 48611 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
Page Subtotal	75.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>61</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Terry Spencer Address: 2001 North Euclid Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>62</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Scott Sturm Address: 1017 Pine Road Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>63</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Jean E Sylvester Address: 1000 Pine St Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>64</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: Jean Turner Address: 5985 Red Feather Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	60.00	

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>65</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Alvin Vogtmann</u> Address: <u>3724 S. Euclid</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>66</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Marsha Voisine</u> Address: <u>5967 Red Feather Dr</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	30.00
3. Contribution # <u>67</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2015</u> Name: <u>Lyn Wegener</u> Address: <u>3090 Hotchkiss Road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>68</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: <u>Harold Appold</u> Address: <u>6847 Three Mile Rd</u> <u>Bay City MI 48706</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	10.00	10.00
Page Subtotal	70.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>69</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: Jean Appold Address: 2301 E. Hotchkiss Bay City MI 48706 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	50.00	50.00
3. Contribution # <u>70</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: Eleonore Begick Address: 5828 S. 4 Mile Road Bay City MI 48706 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	35.00	35.00
3. Contribution # <u>71</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: Michael Bouckaert Address: 4799 Stephen Court Auburn MI 48611-9212 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	50.00	50.00
3. Contribution # <u>72</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: Edward Brengman Address: 2042 E. Hothckiss Bay City MI 48706 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	40.00	40.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	175.00	

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>73</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: <u>Harry Gill</u> Address: <u>3030 W. Riverview</u> <u>Bay City, MI MI 48706</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	50.00	50.00
3. Contribution # <u>74</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: <u>Mike Green</u> Address: <u>1500 Blackmore</u> <u>Mayville MI 48744</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	25.00	25.00
3. Contribution # <u>75</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: <u>Mary Jane Gregory</u> Address: <u>264 Jennison Place</u> <u>Bay City MI 48708</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	50.00	50.00
3. Contribution # <u>76</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: <u>Guy Greve</u> Address: <u>2300 Nurmi Dr</u> <u>Bay City MI 48708</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	10.00	10.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	135.00	

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>77</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: Howard Helmreich Address: 2727 Ziegler Road Bay City MI 48706 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	25.00	25.00
3. Contribution # <u>78</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: Virley Herbolsheimer Address: 3086 Hotchkiss Road Bay City MI 48706 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	10.00	10.00
3. Contribution # <u>79</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: Jan Hoerauf Address: 5961 Red Feather Drive Bay City MI 48706 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	25.00	25.00
3. Contribution # <u>80</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: Melba Hoerauf Address: 6201 S Three Mile Bay City MI 48706 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	25.00	25.00
Page Subtotal	85.00	
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 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 81 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: Henry Johnson Address: 3490 E N Union Bay City MI 48706 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	25.00	25.00
3. Contribution # 82 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: Terrence Kelly Address: 164 Bay Shore Drive Bay City MI 48706 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	10.00	10.00
3. Contribution # 83 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: D Brian Law Address: 1007 N Water St Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00	50.00
3. Contribution # 84 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: Keith Markstrom Address: 1383 N. Jones Essexville MI 48732 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	25.00	25.00
Page Subtotal	110.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Enter this total on
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Summary Page



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>85</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: <u>Lucille Martin</u> Address: <u>2941 Chrysler Drive</u> <u>Bay City MI 48706</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	20.00	20.00
3. Contribution # <u>86</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: <u>Elaine McPhail</u> Address: <u>2567 1/2 E. Hotchkiss</u> <u>Bay City MI 48706</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	50.00	50.00
3. Contribution # <u>87</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: <u>Jody Meagher</u> Address: <u>3873 Utah Drive</u> <u>Bay City MI 48706</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	100.00	100.00
3. Contribution # <u>88</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: <u>Michael Myers</u> Address: <u>2163 Matthew Drive</u> <u>Bay City; MI 48706</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	50.00	50.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	220.00	

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 89 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: Robert Packard Address: 1482 West Salzburg Bay City MI 48706 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	50.00	70.00
3. Contribution # 90 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: Robert Palmer Address: 1100 Sixth Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # 91 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: Stewart Reid Address: 2196 Old Hickory Dr Bay City MI 48706 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	25.00	25.00
3. Contribution # 92 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: Roy Schairer Address: 103 Parkwood Court Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00	50.00
Page Subtotal	150.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>93</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: Richard Somalski Address: 1630 N. Southeast Boutell Essexville MI 48732 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	50.00	50.00
3. Contribution # <u>94</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: Marlene Sundberg Address: 609 N. Trumbull Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>95</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: Ken Van Cise Address: 2351 Coralinn Court Bay City MI 48706 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	50.00	50.00
3. Contribution # <u>96</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: Marsha Voisine Address: 5967 Red Feather Dr Bay City MI 48706 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	30.00	60.00
Page Subtotal	155.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 97 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: James Washabaugh Address: 5914 - 4 mile rd Bay City MI 48706 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	25.00	25.00
3. Contribution # 98 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/19/2015</u> Name: Helen Woods Address: 1200 McKinley Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # 99 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>04/30/2015</u> Name: Joseph Davis Address: 909 N Wenona Bay City MI 48706 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	50.00	50.00
3. Contribution # 100 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>04/30/2015</u> Name: Joyce Hardy Address: 3198 Monitor Road Kawkawlin MI 48631 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00	50.00
Page Subtotal	145.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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line 3a of
Summary Page



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Commissioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, 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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>101</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>04/30/2015</u> Name: Dan Latal Address: 304 Killarney Beach Drive Bay City MI 48706 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	10.00	10.00
3. Contribution # <u>102</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>04/30/2015</u> Name: Bob Sarow Address: 1111 N. Water St. #201 Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>103</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>04/30/2015</u> Name: Ralph Schmidt Address: 6390 Westside Saginaw Bay City MI 48706 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	10.00	20.00
3. Contribution # <u>104</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/17/2015</u> Name: Monte Oswald Address: 13814 County Road 407 Newberry MI 49868 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal	55.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	2550.00	

Enter this total on
line 3a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 1 Name: U.S. Postal Service Address: Washington Avenue Bay City MI 48708 <input type="checkbox"/> Fund Raiser	Purpose: <u>stamps</u> Expenditure Code <u>MA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	02/17/2015	98.00
Expenditure # 2 Name: Sam's Club Address: Bay Road Saginaw MI <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>food,etc</u> Expenditure Code <u>FE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	03/14/2015	293.42
Expenditure # 3 Name: Barbara Jezowski Address: LFA Hall 2323 Amelith Rd Bay City MI 48706 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>cook-ck#1133</u> Expenditure Code <u>FE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	03/17/2015	150.00
Expenditure # 4 Name: LFA Hall Address: Amelith road Bay City MI 48706 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>hall rent-ck#1131</u> Expenditure Code <u>RE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	03/17/2015	200.00
Expenditure # 5 Name: Wilma Zeilinger Address: Amelith Road Bay City MI 48706 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>cook-ck#1132</u> Expenditure Code <u>FE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	03/17/2015	150.00
Subtotal this page Grand Total of all Schedules 1B (Complete on last page of Schedule)			891.42

Enter this total on line 8a of Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 6 Name: American Legion Address: 700 Adams Bay City MI 48708 <input type="checkbox"/> Fund Raiser	Purpose: <u>Leader Training-ck#1135</u> Expenditure Code <u>CT</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	05/11/2015	325.00
Expenditure # 7 Name: Bay County Republican Party Address: Center Avenue Bay City MI 48708 <input type="checkbox"/> Fund Raiser	Purpose: <u>rent-ck#1134</u> Expenditure Code <u>RE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	05/11/2015	257.94
Expenditure # 8 Name: Bay County Republican Party Address: Center Avenue Bay City MI 48708 <input type="checkbox"/> Fund Raiser	Purpose: <u>LincolnDay-ck#1136</u> Expenditure Code <u>PP</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	06/01/2015	450.00

Subtotal this page	1032.94
Grand Total of all Schedules 1B (Complete on last page of Schedule)	1924.36
Enter this total on line 8a of Summary Page	



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

- USE A SEPARATE SHEET FOR EACH EVENT-

<p>3. Date Event Was Held</p> <p><u>03/17/2015</u></p> <p>Month Day Year</p>	<p>4. Number of Individuals Attending or Participating (whichever is greater)</p> <p>107</p>	<p>5. Type of Fund Raising Activity</p> <p>Spaghetti Dinner</p>	<p>6. Address and Name (If any) of the place where the activity was held</p> <p>LFA Hall Mar'15</p> <p>Bay City MI 48706 <input type="checkbox"/> Private Residence</p>
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7. Total Contributions of \$20.00 or less 735.00

8. Total Contributions of \$20.01 or more 585.00

9. SUBTOTAL (Add lines 7 and 8) 1320.00

10. Other Receipts 0.00

11. Gross Receipts (Add lines 9 and 10) 1320.00

12. Total Cost of Event* 793.42

*Includes In-Kind Contributions and All Expenditures Made For the Event

13. 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.