MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

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

3. This Statement covers: from 03/07/15 to 07/20/2015

1. Committee I.D. Number: 150711

2. Committee Name: Team David Terrasi

4. Candidate Last Name: Terrasi First Name: David M.I.

4a. Office Sought Including District # or Community Served (If applicable): 2nd Ward City Commissioner

4b. County of Residence: Bay

5. Committee's Mailing Address: 317 Green Ave, Bay City, MI 48708

Area Code and Phone: 989-316-2353

If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

6. Treasurer's Name & Residential Address: David Terrasi, 317 Green Ave, Bay City, MI 48708

Area Code & Phone: 989-316-2353

7. Treasurer's Business Address: David Terrasi, 317 Green Ave, Bay City, MI 48708

Area Code and Phone: 989-316-2353

8. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper): ~~None~~ Otcrrx David Terrasi, 317 Green Ave, Bay City, MI 48708

Area Code and Phone: 989-316-2353

9. TYPE OF STATEMENT

9a. [X] Pre-Election OR 9b. [ ] Post-Election

Pre-Election or Post-Election Statement relates to:

- [X] Primary
- [ ] General
- [ ] Convention
- [ ] Special
- [ ] School
- [ ] Caucus

Date of Election, Convention or Caucus: 08/04/2015

Required ONLY if candidate is not on the ballot for the current year:

- [ ] July Quarterly
- [ ] October Quarterly

9c. [ ] Annual Statement (_____) Coverage Year

9d. [ ] Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)

9e. Dissolution of Candidate Committee

[ ] By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven and no longer collectible from the committee. The committee has no outstanding assets, owes no lates fees or has any outstanding debt.

Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Effective date of dissolution _____

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

FILED CO CLERK 18TH JUDICIAL CIRCUIT COURT
2015 JUL 22 P 2:06
BAY COUNTY CLERK CYNTHIA A. LUCZAK
BY

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] Date: 07/22/15
Type or Print Name — Signature

Candidate: David Terrasi [signature] Date: 07/22/15
Type or Print Name — Signature

Authority granted under P.A. 388 of 1976

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 150711

SUMMARY PAGE
CANDIDATE COMMITTEE

2. Committee Name Team David Terrasi

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) $	1,770.00	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $		(18.) $
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) $		(19.) $
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) $	1,770.00	(20.) $
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) $	231.06	(21.) $
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) $		(22.) $
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) $	1627.20	
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.) $	1627.20	(23.) $
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.) $	200.00	
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.) $	0.00
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + $	1,770.00
15. SUBTOTAL Add lines 13 and 14	(15.) = $	1,770.00
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $	1627.20
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	142.80 *

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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	4. Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held.
06-07-2015	26	Dinner	☐ Private Residence

7. Total Contributions $ 1,295.00

8. Other Receipts 0.00

9. Gross Receipts (Add lines 7 and 8) $ 1,295.00

10. Total Cost of Event $501.43
(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.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 15071 DAVID
2. Committee Name Team 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 PAC Receipt? ☐ YES 4. Date of Receipt 5/20/15
Name & Address: ~~Robert~~ Gruber, Robert W.
701 Hayes
Bay City, MI 48708
$ 75.00 $ 75.00
5. If over $100.00 cumulative, please provide:
Click Here for Memo Itemization
Occupation _____ Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 5/17/2015
Name & Address
Romo, Leo R.
3545 Christy Way
Saginaw, MI 48603
$ 25.00 $ 25.00
5. If over $100.00 cumulative, please provide:
Click Here for Memo Itemization
Occupation _____ Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 5-18-15
Name & Address:
Beck Thomas E
2123 Center
Bay City, MI 48708
$ 20.00 $ 20.00
5. If over $100.00 cumulative, please provide:
Click Here for Memo Itemization
Occupation _____ Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 5-18-2015
Name & Address
Tighe Karen A
2123 Center
Bay City, MI 48708
$ 20.00 $ 20.00
5. If over $100.00 cumulative, please provide:
Click Here for Memo Itemization
Occupation _____ Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

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.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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 PAC Receipt? ☐ YES 4. Date of Receipt 5-18-2015
Name & Address: Horder Patrick T. 3803 Wheeler Bay City, MI 48706
$ 200.00 $ 200.00
5. If over $100.00 cumulative, please provide: Click Here for Memo Itemization
Occupation Retail Employer Self
Business Address 3389 S Huron Rd Bay City, MI 48708
Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 5/16/2015
Name & Address Howard Walter L. 2316 Gaisin Ct. Bay City, MI 48708
$ 50.00 $ 50.00
5. If over $100.00 cumulative, please provide: Click Here for Memo Itemization
Occupation Employer
Business Address
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 5/21/2015
Name & Address: Barber Shop 924 Center Bay City, MI 48708
$ 40.00 $ 40.00
5. If over $100.00 cumulative, please provide: Click Here for Memo Itemization
Occupation Employer
Business Address
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 5/27/2015
Name & Address ~~Stark~~ Starkweather Thomas 1113 McKinley Ave Bay City, MI 48708
$ 40.00 $ 40.00
5. If over $100.00 cumulative, please provide: Click Here for Memo Itemization
Occupation Employer
Business Address
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal 330.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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 PAC Receipt? ☐ YES 4. Date of Receipt 6-1-2015 Name & Address: Mallak Jeanne A. 4194 Rosewood Saginaw, MI 48603 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$35.00	$35.00 Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 5-29-2015 Name & Address: Laporte Barbara E 411 Green Ave Bay City, MI 48708 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$40.00	$40.00 Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 6-4-2015 Name & Address: Welsby Eric 4045 Cambria Dr. Bay City, MI 48706 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$20.00	$20.00 Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 6-4-2015 Name & Address: Doris Michael G 5522 Merry ct. Sanford, MI 48657 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$50.00	$50.00 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.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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 PAC Receipt? ☐ YES 4. Date of Receipt 6/4/2015
Name & Address:
Bay County Young Democrats
100 S Farragut APT 3
Bay City, MI 48708
$ 40.00 $ 40.00
5. If over $100.00 cumulative, please provide:
Click Here for Memo Itemization
Occupation _____ Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 6/4/2015
Name & Address
Kemmer Bruce R
205 River Trail Dr.
Bay City, MI 48706
$ 100.00 $ 100.00
5. If over $100.00 cumulative, please provide:
Click Here for Memo Itemization
Occupation _____ Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 6-4-2015
Name & Address:
Kavitz Donna J
3478 Hidden Rd.
Bay City, MI 48706
$ 50.00 $ 50.00
5. If over $100.00 cumulative, please provide:
Click Here for Memo Itemization
Occupation _____ Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 6-4-2015
Name & Address
Umberger Gordner T.
2157 6th St.
Bay City, MI 48708
$ 35.00 $ 35.00
5. If over $100.00 cumulative, please provide:
Click Here for Memo Itemization
Occupation _____ Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal 225.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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 PAC Receipt? ☐ YES 4. Date of Receipt 6-4-2015 Name & Address: Race Patrick, 1004 N. Sheridan, Bay City, MI 48708 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$25.00	$25.00 Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06-04-2015 Name & Address: Klawon, Matt G, 707 Green Ave, Bay City, MI 48708 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$50.00	$50.00 Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 6-4-2015 Name & Address: Tilley, Donald, 617 Green Ave, Bay City, MI 48708 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$50.00	$50.00 Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 6-09-2015 Name & Address: Rivet Joseph, 2600 Center Ave, Bay City, MI 48708 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a per	$25.00	$25.00 Click Here for Memo Itemization

150.00 → 200.00
Should Be

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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 PAC Receipt? ☐ YES 4. Date of Receipt 6-4-2015 Name & Address: Skeltis, Francey 3038 Kindlewood, Ln Bay city, MI 48706 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$100.00	$100.00 Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 6-4-2015 Name & Address Grabowski, Michael 909 5th St Bay city, MI 48708 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$50.00	$50.00 Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 6-4-2015 Name & Address: Nichols, Larry 909 Green Ave Bay city, MI 48708 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$20.00	$20.00 Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 6-4-2015 Name & Address Conde Terri 409 Hill St. Bay city, MI 48708 5. If over $100.00 cumulative, please provide: Occupation ____ Employer ____ Business Address ____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser	$20.00	$20.00 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.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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 PAC Receipt? ☐ YES 4. Date of Receipt 6-04-2015
Name & Address:
Cnudde, Taylor
409 Hill St
Bay City, MI 48708

$20.00 $20.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 6-4-2015
Name & Address
Boes, Jon, J
1514 Westbury
Davison, MI 48423

$20.00 $20.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06-30-2015
Name & Address:
Fleming Joshua
3330 Shane Dr.
Bay City, MI 48706

$10.00 $10.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06-17-2015
Name & Address
Wackerly, Crystal
410 Green Ave
Bay City, MI 48708

$50.00 $50.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal 100.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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 PAC Receipt? ☐ YES 4. Date of Receipt 06-17-2015
Name & Address:
Blecke Nathan
312 Green Ave
Bay City, MI
48708

$75.00 $75.00

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 06-30-2015
Name & Address
Herek Thomas
1606 30th St.
Bay City, MI
48708

$20.00 $20.00

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 05-29-2015
Name & Address:
Andrick, Floyd
4928 Anterest Dr.
Midland, MI 48640

$20.00 $20.00

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 06/18/2015
Name & Address
Laborers Local 1098
345 East Morley Dr.
Saginaw, MI 48601

$250.00 $250.00

5. If over $100.00 cumulative, please provide:
Occupation Union Employer Laborers Local 1098
Business Address 345 East Morley, Dr. Saginaw, MI 48601
Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

Page Subtotal 365.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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 PAC Receipt? ☐ YES 4. Date of Receipt 5-9-2015

Name & Address:
Bledsoe Sherry
179 River Trail
Rex City, MI 48700

$ 25.00 $ 75.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt _____

Name & Address

$ _____ $ _____

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt _____

Name & Address:

$ _____ $ _____

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt _____

Name & Address

$ _____ $ _____

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

$25.00 → 25.00

$1,670.00 → $ 1,770.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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 Meijer Address 545 N Pine Bay City, MI 48708 ☒ Fund Raiser	Purpose: Food Fundraiser ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	06/03/2015	$ 11.99
Expenditure #2 Name Meijer Address 545 N. Pine Bay City, MI 48708 ☒ Fund Raiser	Purpose: Food ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	06/01/2015	$ 23.15
Expenditure #3 Name Jack's Fruit Meat Market Address 1511 Center Ave Essexville, MI 48732 ☒ Fund Raiser	Purpose: Food ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	06/01/2015	$ 3.95
Expenditure #4 Name Gordon Food Services Address 3730 Wilder Rd Bay City, MI 48706 ☒ Fund Raiser	Purpose: Food ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	05/31/2015	$ 46.50
Expenditure #5 Name Meijer Address 545 N. Pine Rd. Bay City, MI 48708 ☒ Fund Raiser	Purpose: ~~Food~~ Address Labels ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	05/15/2015	$ 24.24

Subtotal this page 109.83

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

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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 7-Eleven Address 1500 Columbus Bay City, MI 48708 ☒ Fund Raiser	Purpose: Ice Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/04/2015	$4.38
Expenditure #2 Name Dollar Tree Stores Inc. Address 2624 Center Ave Bay City, MI 48708 ☒ Fund Raiser	Purpose: Thank You Cards Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/12/2015	$3.18
Expenditure #3 Name Swacki & Sons Address 1521 W Lafayette Detroit, MI 48216 ☐ Fund Raiser	Purpose: Yard Signs Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/08/2015	$810.90
Expenditure #4 Name Reimold Printing Address 5171 Blackbeak Dr. Saginaw, MI 48604 ☐ Fund Raiser	Purpose: Door Cards Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/17/2015	$429.54
Expenditure #5 Name Meijer Address 545 N. Pine Rd Bay City, MI 48708 ☐ Fund Raiser	Purpose: Water for Door Knocking Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/25/~~2015~~ 2015	$2.99

Subtotal this page 1,250.99

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

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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 Meijer Address 595 N Pine Rd Bay City, MI 48708 ☒ Fund Raiser	Purpose: Food/Beverage Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/24/2015	$29.57
Expenditure #2 Name Dollar Tree Address 2024 Center Ave Bay City, MI 48708 ☒ Fund Raiser	Purpose: Food containers Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/01/2015	$4.24
Expenditure #3 Name Bay City Democrat Party Address 304 9th St. Bay City, MI 48708 ☒ Fund Raiser	Purpose: Tickets/Flyers Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/15/2015	$50.88
Expenditure #4 Name Walgreens Address 2901 Center Ave Essexville, MI 48732 ☒ Fund Raiser	Purpose: Beverage Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/25/2015	$15.89
Expenditure #5 Name Walgreens Address 2901 Center Ave Essexville MI 48732 ☒ Fund Raiser	Purpose: Stamps/Thank cards Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	06/13/2015	$9.80

Subtotal this page 110.38

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

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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 Home Depot Address 3860 State St. Bay City MI 48706 ☐ Fund Raiser	Purpose: Paint & Large Wood Signs Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/03/2015	$57.34
Expenditure #2 Name Dollar Tree Address 2624 Center Ave Bay City, MI 48708 ☐ Fund Raiser	Purpose: Envelopes Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	05/15/2015	$8.48
Expenditure #3 Name Meijer Address 545 Pine Bay City, MI 48708 ☒ Fund Raiser	Purpose: Food Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	03/16/2015	$12.85
Expenditure #4 Name Meijer Address 545 Pine Bay City, MI 48708 ☒ Fund Raiser	Purpose: Food Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	04/04/2015	$29.86
Expenditure #5 Name Meijer Address 545 Pine Bay City, MI 48708 ☒ Fund Raiser	Purpose: Food/Beverage Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation r statement	05/02/2015	$47.49

	156.00
CORRECT → B le)	1,627.20

Enter this total on line 8a of Summary Page

Page 4 of 4

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK
CANDIDATE COMMITTEE

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

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: Jacqueline Terrasi, 1204 Lavender, Monroe, MI 48161 If over $100.00 cumulative, please provide: Occupation: Retired Homemaker Employer Name & Business Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☒ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description Campaign T-shirts (15 TOTAL) 5. Date Of Receipt: 06-14-2015 6. Vendor Name & Address: Shirts Mugs & More, 2728 Center Ave, Essexville, MI 48732 Click Here for Memo Itemization	$ 156.09	$ 156.09
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: Sherry Bledsoe, 179 River Trail, Max City, MI 48706 If over $100.00 cumulative, please provide: Occupation: Retired Employer Name & Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☒ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description Postage Stamps (153 TOTAL) 5. Date Of Receipt: 05-09-15 6. Vendor Name & Address: U.S. Post office, 1000 Washington Ave, Bay City, MI 48708 Click Here for Memo Itemization	$ 74.97	$ 74.97
Contribution #3 PAC Receipt? ☐ Yes Name & Address: If over $100.00 cumulative, please provide: Occupation: Employer Name & Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description 5. Date Of Receipt: 6. Vendor Name & Address: Click Here for Memo Itemization	$	$

Page Subtotal	231.06	231.06
Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	231.06	

Enter this total on line 6 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 150711

2. Committee Name Team David Terrasi

This Schedule itemizes:

a. [X] 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? [ ] Yes Owed to or by: David M. Terrasi 317 Green Ave Bay City, MI 48708	4. Type: Loan 5. Date Debt Was Incurred: 05/15/2015 6. Original Amount of Debt: $ 200.00	$ $ $ $ $	$	$ 200.00 [ ] FORGIVEN
If bank loan, name of endorser or guarantor:			Amount Endorsed: $	
Debt #2 Corp? [ ] Yes Owed to or by:	4. Type: 5. Date Debt Was Incurred: 6. Original Amount of Debt: $	$ $ $ $ $	$	$ [ ] FORGIVEN
If bank loan, name of endorser or guarantor:			Amount Endorsed: $	
Debt #3 Corp? [ ] Yes Owed to or by:	4. Type: 5. Date Debt Was Incurred: 6. Original Amount of Debt: $	$ $ $ $ $	$	$ [ ] FORGIVEN
If bank loan, name of endorser or guarantor:			Amount Endorsed: $	

Page Subtotal (Outstanding debt) 200.00

Grand Total of all Schedules 1E 200.00
(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.