



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**CANDIDATE COMMITTEE  
COVER PAGE**

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1075  
CIRCUIT COURT  
JUL 25 3 51 PM '08

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: 1/1/2008 to 7/20/2008  
Mo Day Year Mo Day Year

<p>1. Committee I.D. Number <b>150309</b></p> <p>2. Committee Name <b>Cynthia Luczak Your County Clerk</b></p>	<p>4. Candidate Last Name <b>Luczak</b> First Name <b>Cynthia</b> M.I. <b>A.</b></p> <p>4a. Office Sought including District # or Community Served (if applicable) <b>Bay County Clerk</b></p> <p>4b. County of Residence <b>Bay</b></p>
<p>5. Committee's Mailing Address <b>808 Frost Drive Bay City, MI 48706</b> Area Code and Phone _____</p> <p>If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.</p>	<p>6. Treasurer's Name &amp; Residential Address <b>Cynthia A. Luczak 808 Frost Dr., Bay City, MI 48706</b> Area Code &amp; Phone (____) _____</p>
<p>7. Treasurer's Business Address <b>Same</b></p> <p>Area Code and Phone <b>(989) 686-4288</b></p>	<p>8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) <b>N/A</b></p> <p>Area Code and Phone (____) _____</p>

<p>9. TYPE OF STATEMENT</p> <p>9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Convention <input type="checkbox"/> School</p> <p><input type="checkbox"/> Special <input type="checkbox"/> Caucus</p> <p>Date of Election, Convention or Caucus <u>8-5-08</u> Month Day Year</p>	<p>9c. <input type="checkbox"/> Annual Statement (____ Coverage Year)</p> <p>9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)</p> <p>9e. <input type="checkbox"/> Dissolution of Candidate Committee</p> <p>Effective Date of Dissolution _____ Month Day Year</p> <p>By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.</p>
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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 cannot be waived.

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 Cynthia A. Luczak, Cynthia A Luczak Date July 25, 2008  
Type or Print Name Signature Mo Day Year

Candidate Cynthia A. Luczak, Cynthia A Luczak Date July 25, 2008  
Type or Print Name Signature Mo Day Year



1. Committee I.D. Number 150309  
2. Committee Name Luczak Your County Clerk

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Itemized Contributions (Schedule 1A - Column 6)	(3.) \$ <u>925.00</u>	(18.) \$ _____
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>50.00</u>	(19.) \$ _____
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3 + Line 4)	(5.) \$ <u>975.00</u>	(20.) \$ _____
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>110.00</u>	(21.) \$ _____
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0.00</u>	(22.) \$ _____
<b>EXPENDITURES</b>		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>1,084.49</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ _____	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ _____	
<b>9. TOTAL EXPENDITURES</b> (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>1,084.49</u>	(23.) \$ _____
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (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>	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$ _____	(24.) \$ _____
<b>DEBTS AND OBLIGATIONS</b>		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>2,400.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _____	
<b>BALANCE STATEMENT</b>		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>3,097.39</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>975.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>4,072.39</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>1,084.49</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ <u>2,987.90</u>	

\*If your ending balance is negative, please recheck your math.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150309  
2. Committee Name Luczak Your County Clerk

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Thelma Luczak</u> Address: <u>3108 Kindlewood Lane</u> <u>Bay City, MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Justin Schmidt</u> Address: <u>246 N. Huron Road</u> <u>Linwood, MI 48634</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Gloria Kowalski</u> Address: <u>Box 394</u> <u>Linwood, MI 48634</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Brent &amp; Kellie Daniels</u> Address: <u>693 E. Cody Estey Rd.</u> <u>Pinconning, MI 48650</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	50.00	

Enter this total on  
line 3 of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150309  
2. Committee Name Luczak Your County Clerk

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Mike Bergeron</u> Address: <u>951 E. Whitefeather Rd.</u> <u>Pinconning, MI 48650</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Mary Powers</u> Address: <u>1682 Fraser Road</u> <u>Pinconning, MI 48650</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Sharon Stalsberg</u> Address: <u>3642 M-13</u> <u>Pinconning, MI 48650</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Betty Monsion</u> Address: <u>1133 W. Anderson</u> <u>Linwood, MI 48634</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	40.00	

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MICHIGAN DEPARTMENT OF STATE  
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ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150309

2. Committee Name Luczak Your County Clerk

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>4/3/2008</u> Name: <u>Mary Kusterer</u> Address: <u>2644 E. Pinconning 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 type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>4/7/2008</u> Name: <u>Friends of Jeff Mayes</u> Address: <u>4297 Zander 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 # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>4/9/2008</u> Name: <u>Greg Petrimoulx</u> Address: <u>463 E. Cottage Grove</u> <u>Linwood, MI 48634</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
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>4/10/2008</u> Name: <u>Friends of Jim Barcia</u> Address: <u>P.O. Box 775</u> <u>Bay City, MI 48707</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	40.00	40.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	95.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150309  
2. Committee Name Luczak Your County Clerk

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>4/3/2008</u> Name: <u>Theresa Anderzejewski</u> Address: <u>1175 E Prevo Road</u> <u>Linwood, MI 48634</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>4/3/2008</u> Name: <u>Hratch Basmadjian</u> Address: <u>1301 S. Henry Street</u> <u>Bay City, MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>4/3/2008</u> Name: <u>Issy Wojciechowski</u> Address: <u>420 Old Orchard Drive</u> <u>Essexville, MI 48732</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>4/1/2008</u> Name: <u>Jane F. Smith</u> Address: <u>265 E. Hampton</u> <u>Essexville, MI 48732</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)	40.00	

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150309  
2. Committee Name Luczak Your County Clerk

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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Al Greniuk</u> Address: <u>5978 Lincoln Road</u> <u>Standish, MI 48658</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Mary Lee Johnson</u> Address: <u>5095 N. Seven Mile</u> <u>Pinconning, MI 48650</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Michael Stoner</u> Address: <u>1480 E. Mt. Forest Rd.</u> <u>Pinconning, MI 48650</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Tina Bergeron</u> Address: <u>951 E. Whitefeather Rd.</u> <u>Pinconning, MI 48650</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	70.00	

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MICHIGAN DEPARTMENT OF STATE  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150309  
2. Committee Name Luczak Your County Clerk

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Dale Schmidt</u> Address: <u>246 N. Huron Rd.</u> <u>Linwood, MI 48634</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Janice Kotz</u> Address: <u>806 Whitefeather Road</u> <u>Pinconning, MI 48650</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Joanna Moody</u> Address: <u>204 2nd Street</u> <u>Pinconning, MI 48650</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Mary &amp; Boyd Boettger</u> Address: <u>505 Harold Street</u> <u>Bay City, MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
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ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150309

2. Committee Name Luczak Your County Clerk

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Kim Day/Kayla Day</u> Address: <u>1076 Crump Street</u> <u>Linwood, MI 48634</u> 5. If over \$100.00 cumulative, please provide: <u>48634</u> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Sally Sherman</u> Address: <u>322 N. Mackinaw Rd.</u> <u>Linwood, MI 48634</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Pat Mc Pherson</u> Address: <u>310 Parkview Drive</u> <u>Pinconning, MI 48650</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Charles &amp; Judy Brunner</u> Address: <u>208 Murphy Street</u> <u>Bay City, MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
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**ITEMIZED CONTRIBUTIONS  
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CANDIDATE COMMITTEE**

1. Committee I.D. Number 150309  
2. Committee Name Luczak Your County Clerk

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>4/3/2008</u> Name: <u>Pat Breiding</u> Address: <u>P.O. Box 151</u> <u>Linwood, MI 48634</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>4/3/2008</u> Name: <u>Patti &amp; Jeff Shorkey</u> Address: <u>53 Wheeler Road</u> <u>Bay City, MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	30.00
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>4/3/2008</u> Name: <u>Jerry Barbret</u> Address: <u>7300 Flajole Rd.</u> <u>Bentley, MI 48613</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>4/3/2008</u> Name: <u>Mike Buda</u> Address: <u>526 Handy Drive</u> <u>Bay City, MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
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**ITEMIZED CONTRIBUTIONS  
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CANDIDATE COMMITTEE**

1. Committee I.D. Number 150309  
2. Committee Name Luczak Your County Clerk

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 from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Don Goulet</u> Address: <u>69 York Drive</u> <u>Bay City, MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Denny Hayes</u> Address: <u>114 N. Sheridan</u> <u>Bay City, MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Delphine Jankowski</u> Address: <u>748 W. Parish Rd.</u> <u>Kawkawlin, MI 48631</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Don Thorner</u> Address: <u>120 Lapeer St. P.O. Box 234</u> <u>Standish, MI 48658</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	50.00	

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line 3 of Summary  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150309  
2. Committee Name Luczak Your County Clerk

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Mike Duranczyk</u> Address: <u>739 Bermuda Drive</u> <u>Pinconning, MI 48650</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Don Rezmer</u> Address: <u>1700 E. Cottage Grove Rd.</u> <u>Linwood, MI 48634</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Tom Hornacek</u> Address: <u>99 FENTON</u> <u>PINCONNING, MI 48650</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	40.00	40.00
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Doug Luczak</u> Address: <u>808 Frost Drive</u> <u>Bay City, MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100.00	100.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	160.00	

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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150309  
2. Committee Name Luczak Your County Clerk

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Robert K. Hall</u> Address: <u>130 E. Fourth</u> <u>Pinconning, MI 48650</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Connie Pierson</u> Address: <u>5649 N. M-13</u> <u>Pinconning, MI 48650</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Melissa Kotz</u> Address: <u>806 E. Whitefeather Rd.</u> <u>Pinconning, MI 48650</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3/26/2008</u> Name: <u>Bob Horner</u> Address: <u>3441 Coventry Drive</u> <u>Bay City, MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	40.00	

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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 150309  
2. Committee Name Luczak Your County Clerk

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Marilyn Zelek</u> Address: <u>4910 N. Mackinaw</u> <u>Pinconning, MI 48650</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Gene &amp; Lillian Haranda</u> Address: <u>915 Pinconning Road</u> <u>Pinconning, MI 48650</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Bob &amp; Janice Pierson</u> Address: <u>5623 N. M-13</u> <u>Pinconning, MI 48650</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/3/2008</u> Name: <u>Phyllis Thorner</u> Address: <u>120 Lapeer, P.O. Box 234</u> <u>Standish, MI 48658</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	60.00	

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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150309  
2. Committee Name Luczak Your County Clerk

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>4/3/2008</u> Name: <u>Dennis Curtis</u> Address: <u>1480 E. Mt. Forest Rd.</u> <u>Pinconning, MI 48650</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>4/3/2008</u> Name: <u>Mel &amp; Kay McNally</u> Address: <u>2081 S. Fraser Road</u> <u>Kawkawlin, MI 48631</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>4/3/2008</u> Name: <u>Pat Beson/Vicki Beson</u> Address: <u>1946 E. River Rd.</u> <u>Kawkawlin, MI 48631</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>4/3/2008</u> Name: <u>George &amp; Penny Schwerin</u> Address: <u>1678 W. Mt. Forest Rd.</u> <u>Pinconning, MI 48650</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
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 150309  
2. Committee Name Luczak Your County Clerk

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/12/2008</u> Name: <u>Richard &amp; Marlene Charbeneau</u> Address: <u>349 Garfield Road</u> <u>Linwood, MI 48634</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 #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>4/14/2008</u> Name: <u>Jennifer DeLorge/Mike Duranczyk</u> Address: <u>739 Bermuda</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 type="checkbox"/> Fund Raiser	50.00	50.00
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name: _____ Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name: _____ Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	70.00	

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**ITEMIZED OTHER RECEIPTS  
SCHEDULE 1A-1  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150309  
2. Committee Name C. Luczak Your County Clerk

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name: <b>PRCCI Raffle Calender 2008</b> Address: <b>P.O. Box 488 Petoskey, MI 49770</b> <input type="checkbox"/> Fund Raiser	Date of Receipt <u>7/2/08</u>	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input checked="" type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	<b>50.00</b>
Receipt #2 Name: _____ Address: _____ <input type="checkbox"/> Fund Raiser	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	
Receipt #3 Name: _____ Address: _____ <input type="checkbox"/> Fund Raiser	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	
Receipt #4 Name: _____ Address: _____ <input type="checkbox"/> Fund Raiser	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	
Receipt #5 Name: _____ Address: _____ <input type="checkbox"/> Fund Raiser	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	
Receipt #6 Name: _____ Address: _____ <input type="checkbox"/> Fund Raiser	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	
Receipt #7 Name: _____ Address: _____ <input type="checkbox"/> Fund Raiser	Date of Receipt _____	<input type="checkbox"/> Loan from a Lending Institution <input type="checkbox"/> Interest <input type="checkbox"/> Refund \Rebate <input type="checkbox"/> Other (Specify) _____	
Page Subtotal Grand Total of All Schedules 1A-1 (Complete on last page of Schedule)			<b>50.00</b>

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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**ITEMIZED IN-KIND CONTRIBUTIONS  
SCHEDULE 1-IK  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 150309  
2. Committee Name C. Luczak Your County Clerk

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)	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name <b>Doug Luczak</b> Address: <b>808 Frost Dr. Bay City, MI 48706</b>  If over \$100.00 cumulative, please provide: Occupation:  Employer:  Business Address:  <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN  Description <u>Bay City Independents Baseball Club Newspaper</u> 5. Date Of Receipt: <u>4/10/2008</u>  6. Vendor Name & Address: <u>Bay City Indep's c/o Ron O'Laughlin, 3339 Old Kawkawlin Rd., Bay City, MI</u>	\$50.00	50.00
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name <b>Cindy Luczak</b> Address: <b>808 Frost Dr. Bay City, MI 48706</b>  If over \$100.00 cumulative, please provide: Occupation:  Employer:  Business Address:  <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN  Description <u>Postage for April Event</u> 5. Date Of Receipt: <u>March 2008</u>  6. Vendor Name & Address: <u>Postmaster Washington Ave. Bay City, MI</u>	\$30.00	30.00
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name <b>Cindy Luczak</b> Address: <b>808 Frost Dr. Bay City, MI 48706</b>  If over \$100.00 cumulative, please provide: Occupation:  Employer:  Business Address:  <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN  Description <u>Flyer, Paper, Envelopes</u> 5. Date Of Receipt: <u>March 16, 2008</u>  6. Vendor Name & Address: <u>Staples North Pointe Plaza Wilder Road Bay City, MI 48706</u>	\$30.00	30.00

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Grand Total of all Schedules 1-IK  
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110.00
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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE

1. Committee I. D. Number 150309  
2. Committee Name Luczak Your County Clerk

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>Northwest Little League</u> Address <u>c/o Cindy Esch</u> <u>3976 Peppermill Lane</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Sign at Park</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/11/08</u>	<u>100.00</u>
Expenditure #2 Name <u>Pinconning Kof C</u> Address <u>1008 Water Street</u> <u>Pinconning, MI 48650</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser</u> <u>Donation</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/24/08</u>	<u>100.00</u>
Expenditure #3 Name <u>John Glenn High Soccer</u> Address <u>3201 Kiesel Road</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertisement</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3/28/08</u>	<u>25.00</u>
Expenditure #4 Name <u>Friends of Jeff Mayes</u> Address <u>4297 Zander Drive</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/7/08</u>	<u>20.00</u>
Expenditure #5 Name <u>Saginaw Co. Democrat Party</u> Address <u>c/o J.J. Horgan</u> <u>Bridgeport, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Spaghetti Dinner</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4/15/08</u>	<u>30.00</u>
Subtotal this page Grand Total of all Schedules 1B (Complete on last page of Schedule)			<u>275.00</u>

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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE

1. Committee I. D. Number 150309  
2. Committee Name Luczak Your County Clerk

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>Bay Co. Bar Association</u> Address <u>c/o Cathy Reder, Attny.</u> <u>Davidson Building</u> <u>Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Law Day Lunch</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/1/08</u>	<u>16.00</u>
Expenditure #2 Name <u>Bay Co. Democratic Party</u> Address <u>c/o T. Pawelski</u> <u>226 Libby Street</u> <u>Pinconning, MI 48650</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Spring Fling</u> <u>Fundraiser</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/5/08</u>	<u>100.00</u>
Expenditure #3 Name <u>Colleen Maillette</u> Address <u>Candidate Bangor Trustee</u> <u>3123 Kirkwood Drive</u> <u>Bay City, MI 48706</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/24/08</u>	<u>50.00</u>
Expenditure #4 Name <u>Kurt Asbury</u> Address <u>Candidate Prosecutor</u> <u>P.O. Box 775</u> <u>Bay City, MI 48707</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/29/08</u>	<u>20.00</u>
Expenditure #5 Name <u>St. Laurent Bros.</u> Address <u>1101 N. Water Street</u> <u>Bay City, MI 48708</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Prize/Donation</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/30/08</u>	<u>6.54</u>

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

192.54

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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE

1. Committee I. D. Number 150309  
2. Committee Name Luczak Your County Clerk

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>Tri City Bakery</u> <u>211 Third Street</u> Address <u>Bay City, MI 48708</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Training Session Refreshments</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/24/08</u>	<u>29.00</u>
Expenditure #2 Name <u>Rite Aid</u> <u>Center Ave. Store</u> Address <u>Essexville, MI 48732</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Training Session Refreshments</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/30/08</u>	<u>22.95</u>
Expenditure #3 Name <u>Don Tilley</u> <u>Comm. Candidate</u> Address <u>Green Avenue</u> <u>Bay City, MI 48708</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/1/08</u>	<u>20.00</u>
Expenditure #4 Name <u>Jennifer Schumann</u> <u>for Bangor Clerk</u> Address <u>3676 Schumann Rd.</u> <u>Bay City, MI 48706</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/2/08</u>	<u>40.00</u>
Expenditure #5 Name <u>Re-Elect Santos Comm.</u> <u>Bangor Clerk</u> Address <u>4646 Morningside Dr.</u> <u>Bay City, MI 48706</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/1/08</u>	<u>20.00</u>

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

131.95

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 150309  
2. Committee Name Luczak Your County Clerk

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 <b>Camp Fish Tales</b> Address <b>Erickson Road Pinconning, MI 48650</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Program</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	1/8/08	40.00
Expenditure #2 Name <b>All Saints Athletic Club</b> Address <b>207 Monroe Street Bay City, MI 48708</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Pot-o-Gold Event</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	2/11/08	100.00
Expenditure #3 Name <b>Bay County Fair</b> Address <b>Livingston Ave. Bay City, MI 48708</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Sponsorship</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	3/10/08	50.00
Expenditure #4 Name <b>Third Street Deli</b> Address <b>M-13/Third Street Pinconning, MI 48650</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser Costs</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	4/3/08	255.00
Expenditure #5 Name <b>U.S. Postmaster</b> Address <b>Washington Ave. Bay City, MI 48708</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps-March 08</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	3/10/08	20.00

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

**465.00**

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 150309  
2. Committee Name Luczak Your County Clerk

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 <b>Sue Rosebrock for Bangor Clk</b> Address <b>33 Spruce Ridge Drive Bay City, MI 48706</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Donation</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	6/20/08	20.00
Expenditure #2 Name _____ Address _____  <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3 Name _____ Address _____  <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4 Name _____ Address _____  <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5 Name _____ Address _____  <input type="checkbox"/> Fund Raiser	Purpose: _____  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		
Subtotal this page Grand Total of all Schedules 1B (Complete on last page of Schedule)			<div style="border: 1px solid black; padding: 5px; text-align: center;">20.00</div>

Enter this total on line 8a of Summary Page



**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 150309  
2. Committee Name Cynthia Luczak for County Clerk

This Schedule itemizes:

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

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Indicate type and you may assign an expenditure code) 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 Owed to or by: <u>Cynthia A. Luczak</u> <u>808 Frost Drive</u> <u>Bay City, Michigan 48706</u>  Corp? <input type="checkbox"/> Yes	4. Type: <u>Loan</u> Code <u>LN</u> 5. Date Debt Was Incurred: <u>6/30/2003</u> 6. Original Amount of Debt: <u>\$ 500.00</u>	<u> / / \$</u> <u> / / \$</u> <u> / / \$</u> <u> / / \$</u> <u> / / \$</u>	<u>\$ -0-</u>	<u>\$</u> <input type="checkbox"/> FORGIVEN

If bank loan, name of endorser or guarantor: \_\_\_\_\_ Amount Endorsed: \$ \_\_\_\_\_

Debt #2 Owed to or by: <u>Cynthia A. Luczak</u> <u>808 Frost Drive</u> <u>Bay City, Michigan 48706</u>  Corp? <input type="checkbox"/> Yes	4. Type: <u>Loan</u> Code <u>LN</u> 5. Date Debt Was Incurred: <u>8/1/2003</u> 6. Original Amount of Debt: <u>\$ 200.00</u>	<u> / / \$</u> <u> / / \$</u> <u> / / \$</u> <u> / / \$</u> <u> / / \$</u>	<u>\$ -0-</u>	<u>\$</u> <input type="checkbox"/> FORGIVEN
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If bank loan, name of endorser or guarantor: \_\_\_\_\_ Amount Endorsed: \$ \_\_\_\_\_

Debt #3 Owed to or by: <u>Cynthia A. Luczak</u> <u>808 Frost Drive</u> <u>Bay City, Michigan 48706</u>  Corp? <input type="checkbox"/> Yes	4. Type: <u>Loan</u> Code <u>LN</u> 5. Date Debt Was Incurred: <u>8/8/2003</u> 6. Original Amount of Debt: <u>\$ 200.00</u>	<u> / / \$</u> <u> / / \$</u> <u> / / \$</u> <u> / / \$</u> <u> / / \$</u>	<u>-0-</u>	<u>\$</u> <input type="checkbox"/> FORGIVEN
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If bank loan, name of endorser or guarantor: \_\_\_\_\_ Amount Endorsed: \$ \_\_\_\_\_

Page Subtotal (Outstanding debt) \_\_\_\_\_  
Grand Total of all Schedules 1E  
(Complete on last page of Schedule showing amounts owed by or to the committee) 900.00

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

PLEASE REFER TO INSTRUCTIONS FOR LIST OF EXPENDITURE CODES

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.

**DEBTS AND OBLIGATIONS  
SCHEDULE 1E  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150309

2. Committee Name Cynthia A. Luczak for County Clerk

This Schedule itemizes:

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

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Indicate type and you may assign an expenditure code) 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 <span style="float:right">Corp? <input type="checkbox"/> Yes</span> Owed to or by: <u>Cynthia A. Luczak</u> <u>808 Frost Drive</u> <u>Bay City, MI 48706</u>	4. Type: <u>Loan</u> Code <u>LN</u> 5. <u>Date Debt Was Incurred</u> <u>8-15-2003</u> 6. <u>Original Amount of Debt</u> <u>\$ 300.00</u>	<u> / / \$</u> <u> / / \$</u> <u> / / \$</u> <u> / / \$</u> <u> / / \$</u>	-0-	<input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor:		Amount Endorsed: \$		
Debt #2 <span style="float:right">Corp? <input type="checkbox"/> Yes</span> Owed to or by: <u>Cynthia A. Luczak</u> <u>808 Frost Drive</u> <u>Bay City, MI 48706</u>	4. Type: <u>Loan</u> Code <u>LN</u> 5. <u>Date Debt Was Incurred</u> <u>8-27-2003</u> 6. <u>Original Amount of Debt</u> <u>\$ 200.00</u>	<u> / / \$</u> <u> / / \$</u> <u> / / \$</u> <u> / / \$</u> <u> / / \$</u>	-0-	<input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor:		Amount Endorsed: \$		
Debt #3 <span style="float:right">Corp? <input type="checkbox"/> Yes</span> Owed to or by: <u>Cynthia A. Luczak</u> <u>808 Frost Drive</u> <u>Bay City, MI 48706</u>	4. Type: <u>Loan</u> Code <u>LN</u> 5. <u>Date Debt Was Incurred</u> <u>7-19-2006</u> 6. <u>Original Amount of Debt</u> <u>\$ 1,000.00</u>	<u> / / \$</u> <u> / / \$</u> <u> / / \$</u> <u> / / \$</u> <u> / / \$</u>	-0-	<input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor:		Amount Endorsed: \$		

Page Subtotal (Outstanding debt)

1,500.00

Grand Total of all Schedules 1E

2,400.00

(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

PLEASE REFER TO INSTRUCTIONS FOR LIST OF EXPENDITURE CODES

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.



MICHIGAN DEPARTMENT OF STATE  
Bureau of Elections

**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150309

2. Committee Name Cynthia Luczak, Your County Clerk

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

<p>3. Date Event Was Held</p> <p><u>April 3, 2008</u></p> <p>Month      Day      Year</p>	<p>4. Number of Individuals Attending or Participating (whichever is greater)</p> <p><u>50</u></p>	<p>5. Type of Fund Raising Activity</p> <p>Meet &amp; Greet Cynthia Luczak County Clerk</p>	<p>6. Address and Name (if any) of the place where the activity was held</p> <p><u>Third Street Deli Pinconning, Michigan</u></p> <p><input type="checkbox"/> Private Residence</p>
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7. Total Contributions of \$20.00 or less 995.00

8. Total Contributions of \$20.01 or more \_\_\_\_\_

9. SUBTOTAL (Add lines 7 and 8) 795.00

10. Other Receipts \_\_\_\_\_

11. Gross Receipts (Add lines 9 and 10) 540.00

12. Total Cost of Event\* 255.00

\*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 (1-1K), 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.