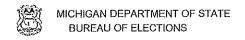


CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

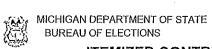
COVER PAGE					-
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by andidate.	3. This Statement covers From	m: <u>1-2039</u> 6_	7-19-	<u> 20</u> 20
1. Committee I.D. Number	,	4. Candidate Last Name	First Name	4 /	M.I. プン
(-2016-089		7 111000	istrict # or Community Served (,	
2. Committee Name	ù M	SHERTH OF		COUN	ノケン
Ken Maggeton It	160161	4b. County of Residence	NASHTENAM	. 2	
5. Committee's Mailing Address		6. Treasurer's Name & Reside	ential Address	•	
8850 STOFFER R	CAC	Ken Mx	AUEE ,		
CHESEA MI 48	118	8850 50	OFER RUM) 2 + 72	
Area Code and Phone 503)781-31	74	CHECSER	7 ML, 48	116	
If the address in this box is different from the commit mailing address on the Statement of Organization, in be sent to this address by the filing official.	ttee nail may	Area Code & Phone 50	3) 781-31	74	
7. Treasurer's Business Address (SAMC N	5 # 6)	8. Designated Record Keeper	r's Name and Address (If the co	ommittee has a	
KEN MAGGE		Designated Record Keeper)	NA		
8850 STOFER RUM) .	, ,	•		,
CHERSEA MI, 48	ll &				
Area Code and Phone 503) 281-3	174	Area Code and Phone		\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	,
9. TYPE OF STATEMENT			9e. Dissolution of Candida	te Committee	
9a. Pre-Election OR 9b. Post-Election	is not on the		By checking this item I/W		
Pre-Election or Post-Election Statement relates to:	current year:	•	by the committee to the candi by discharged and forgiven, a the committee. The committee	and no longer colle	ectible from
Primary	July Quart	erly .	owes no lates fees or has any		
General	October Q	uarterly	Eurober if the dissolution cann	Of Securanted the	≲ at Mashe
Convention			Further, if the dissolution canr considered a request for the F	Reporting Wait/er.	SH
Special .	9c. Annua	l Statement ()		PA F	<u> </u>
School		Coverage Year	Effective date of dis	設定と	ÉT OU
Caucus	9d. Ameni (Como	dment to Campaign Statement blete Item 9a, 9b, 9c or 9e to		Sign T	$\circ\circ$
·	indicat amend	te which Statement is being	Note: The disposition of resid Schedule 1B and the Summa	rý Page.	
Date of Election, Convention or Caucus	•	•		SEE S	*
9-4-7670					7420
0 1 200	•	,		·	·
		more many many many many many many many many			
 Verification: I\We certify that all reasonable diliger my\our knowledge and belief the ontents are trye, at 			ent and attached schedules (if	any) and to the be	st of .
Current Treasurer or Designated Record keeper	GEE	, Frinch	Date .	7-23	-20
Type or Print Name		Signature		*	
Candidate EN MAGER	<u> </u>	, tank	Date .	7-23	26
Type or Print Name		Slonature	"H"South#		



SUMMARY PAGE **CANDIDATE COMMITTEE**

I. Committee I.D	(-	201	6	05	<u> </u>	
	\sim	Λ	A 250	-1.~	4	~

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions	7 7 7 7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Outhandive the Glodion oyolo
a, Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>2/90</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ 2 7 40 hr	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES		·
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures	70	
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	· · · · · · · · · · · · · · · · · · ·
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	7097
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ 2092 72	(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	70	(24.) 4
12. Debts and Obligations a. Owed by the Committee (Schedule 1E)	(12a.)\$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
	BALANCE STATEMENT	-
 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE 	(13.) $\frac{102}{14.}$ (14.) + $\frac{2790}{15.}$ (15.) = $\frac{2892}{16.}$ (16.) - $\frac{2092}{14.}$	
(Subtract line 16 from line 15)	· (17.) \$ 800 11 *	



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

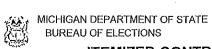
1. Committee I.D. Number C-2016-089

2. Committee Name Lew Magge for Sheriff.

line 3a of Summary

Page.

middle initial. Check box to indicate if contr Committee (PAC) Report <u>all</u> contributions n		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? Name & Address:	<u> </u>	s 500°	\$ 500°
5. If over \$100.00 cumulative, please prov	ide: Employer	Click Here fo	or Memo Itemization
Business Address Type of Contribution: Direct	Loan from a person Fund Raiser	Marine communication in the contraction of the cont	
3. Contribution #2 PAC Receipt? Name & Address	YES 4. Date of Receipt 3-11-20		
Mila Martheus		\$	\$ 575
5. If over \$100.00 cumulative, please provi Occupation	de: Employer	Click Here fo	r Memo Itemization
Type of Contribution: Direct	Loan from a person Fund Raiser		
Address: Note the proof of the	YES 4. Date of Receipt 5-18-20 ACDOR ROWN. PLYMOUTH MI 48170 de: Employer A France Rown, Rymouth Ro Loan from a person Fund Raiser	\$ (00 do Selection of the selection of t	\$_625** Memo Itemization
Contribution # 4 PAC Receipt? [lame & Address PAUL GUTTMAN 4657 S	YES 4. Date of Receipt 6-8-20 OUTH RIGGESTOR 48105	5 <u>\$ 50</u> E	· 1253
Cccupation			Memo Itemization
Type of Contribution: Direct	Loan from a person Fund Raiser	The second secon	gant and control for the control of
	Page Subtotal	725	



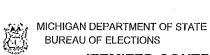
ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number <u>C-2016-089</u>

line 3a of Summary

Page.

CANDI	DATE COMMITTEE	2. Committee Name	· Kn/lave	1 1000) h(n
middle initial. Check box to indi		individual, enter last name, first na ical Committee or an independent		7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
	Receipt? YES 4. Da	te of Receipt <u> </u>		
Name & Address:	POTAINEN			J. Chamber
*	2223 F	Oller Gort #8	301A 200°	\$95
5. If over \$100.00 cumulative,	/ ハハハ / ハハ / ハハハ / ハハハハ / ハロ / ハロ / ハロ	11 4810)	T ₀	
Occupation (145 Room /		14-Muhigan	Click Here fo	or Memo Itemization
	TADONA, AMA Ad			•
Type of Contribution: Direc	· · · · · · · · · · · · · · · · · · ·			1
<u> </u>		e of Receipt	2	· ·
Name & Address				
			and an extended the state of th	
HUJUN I	1 AV Domin	, #133 Ann Arbo	, M, \$ 5	\$ 170
= 16 over \$100 00 completion =	į.	NAMES CO	, , ~~~	r Mama Harri-Air
5. If over \$100.00 cumulative, p	•	13	Click Here to	r Memo Itemization
Occupation	Employer		•	
Business Address			•••	
Type of Contribution: \(\sum_{\text{Direct}} \end{Direct}	Loan from a person	n Fund Raiser		Y 200
	Receipt? YES 4. Dat	e of Receipt 6-2-20	Δ	
Name & Address:	a tosse			16°)
1415 /	Marble crest	OQ,	\$ (50	\$ 1090°
5. If over \$100.00 cumulative, p	Political Control of the Control of	75067-4275	Click Here for	Memo Itemization
Occupation CLICO TO	Employer			
Business Address <u> </u>	N.O'COMMOR	BUP, JAB Das	W-Tx-75039	
Type of Contribution: Direct		n Fund Raiser		
3. Contribution # 4 PAC F Name & Address		te of Receipt 6 4 - 2	<u>6</u>	
The state of the s	LANDRUM			40
	-901 Noble (Championsus	77 s 100 00	s.1190°°
H 17 A400.00 4 11	DARDOUNTILE	TX 76726	,	V. * * • <u></u>
5. If over \$100.00 cumulative, pl	lease provide:		Click Here for	Memo Itemization
Occupation <u>Version to</u>	Employer		•	
Business Address			_	
Dualiticas Vidulicas				
Type of Contribution: Direct	t Loan from a perso	n Fund Raiser	-	
	t Loan from a perso	n Fund Raiser Page Su	ubtotal 445	
	t Loan from a perso			



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number, C-Z016-089

Red Maare for Sherset

CANDIDATE COIVINITIES 2. Committee Name	EULLAGEN INC JUST
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: PAC Receipt? YES 4. Date of Receipt 6.1(-20) HOWARSK! TOWARSK! TOWARSK! TOWARSK! Shelly Twp. M. 483(7)	\$ 100° \$ 1296°
Occupation Employer	Click Here for Memo Itemization
Business Address	•
Type of Contribution: Direct Loan from a person Fund Raiser	the second of the second
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 6-22-26	COLUMN TO THE RESIDENCE OF THE PROPERTY OF THE
8830 SOFER 60. 48116	\$ 1790 <u></u>
5. If over \$100,00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Petrop Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Ralser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 7-3-70 Name & Address; Receipt 7-3-70 Receipt 7-3-7	\$ 1060 \$ 2790 Click Here for Memo Itemization
Occupation Ketice 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	ľ
Business Address	T-1600°



ITEMIZED EXPENDITURES **SCHEDULE 1B**

1. Committee I. D. Number CANDIDATE COMMITTEE 2. Committee Name 3. Name and address of person or vendor to whom paid 4. Purpose (Required Information) 5. Date 6. Amount Name DB GRAPHICS Address 1935 S INDUSTRIAN Ann A-600 MI 48104 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #2 6-22-30 \$ 71 Name ALDAK Address 30600 Telegraph Purpose: MATI Birghan FARMY 480 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #3 Name ON THE POOL PRENTENS Address 338 Rogers Roma Abrevia M. 49221 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #4 Name Wastrewan Democratic Part Address 2257 WILD UALL Lange Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #5 Name Address Purpose: Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous **Fund Raiser** statement Subtotal this page Grand Total of all Schedules 1B

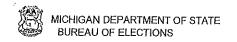
C-2016-689

Enter this total on line 8a of Summary Page

(Complete on last page of Schedule)



SCHEDULE 1E	. Committee I.D. Number	C-2016.	089	erif
OANDIDATE COMMITTEE	. Committee tvaline 1270	- LOCARE IN		<u></u>
This Schedule itemizes; a Debts and obligations owed by or forgiven the co	ommittee OR b. De	obts and obligations owed <u>to</u> o purpose checked.)	r forgiven <u>by</u> the co	mmittee.
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 Or by: KEN MAGEE	4. Type: LOAN 5. Date Debt Was Incurred: 5 - 4 - 16 6. Original Amount of Debt: \$ 500	\$ \$ \$ \$	\$ <u>O</u>	\$ 5∞ E
If bank loan, name of endorser or guarantor:		Amoi	unt Endorsed: \$	
Debt #2 Owedoor by: Corp? Yes	4. Type: LOAN 5. Date Debt Was Incurred: 6-20-16 6. Original Amount of Debt: \$ 2000	11-30-16s 1149 86	*	\$50 ²⁶ \$
If bank loan, name of endorser or guarantor;			45.	
Debt #3 Corp? Yes Owed to or by:	4. Type: LOAN 5. Date Debt Was Incurred: 7-11-16 6. Original Amount of Debt: 2000	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	unt Endorsed: \$	2000°6 \$ FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	unt Endorsed: \$	
(Co A debt or obligation must be shown on this Schedu this Campaign Statement or it was forgiven during t	omplete on last page of Schedule s le if there was an outstanding an he period covered by this Camp	nount owed on it at the clos	all Schedules 1E of the committee)	Enter this total on line 12a "owed by" or line 12b 'owed to" of the Summary Page



DEBTS AND OBLIGATIONS SCHEDULE 1E

CANDIDATE COMMITTEE

1. Committee I.D. Number

-2016-080

This Schedule itemizes: 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 4. Type of Obligation 7. Date and amount of 8. Cumulative 9. Outstanding financial institution to whom debt is owed. (Description) each payment payment to Balance at close 5. Indicate date debt was date on debt of this period Check box to indicate whether debt is owed to an incurred (Item 6 minus incorporated business. If debt is a bank loan, please 6. Indicate original amount Item 8) provide information regarding the endorsers or of debt guarantors, if any. Debt #1 LOAN Owed to or by: 5. Date Debt Was Incurred: 9-22-16 00 6. Original Amount of Debt: FORGIVEN If bank loan, name of endorser or guarantor: Amount Endorsed: \$ Debt #2 Corp? Owed to or by: \$ 5. Date Debt Was Incurred: 10~13~lb 50000 \$ FORGIVEN \$ If bank loan, name of endorser or guarantor: Amount Endorsed: \$ Debt #3 Corp? Owed to or by: 5. Date Debt Was Incurred: FORGIVEN 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)

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.