

AFFIDAVIT OF IDENTITY AND RECEIPT OF FILING

PLEASE COMPLETE SECTIONS I, II, III AND IV BELOW (Print or Type) - See Reverse Side for Important Notifications

OFFICE USE ONLY		Office Code ELECTIONS DIVISION	
Received by _____		Date of Filing 2010 JUL 26 PM 4:45	
No. of Petition Sheets or Receipt No. _____		CFR I.D. No. _____	

I. CANDIDATE IDENTIFICATION

Name DAVIS DANNY EDWARD Birth date 03 / 18 / 1960
(Last) (First) (Middle) (Month) (Day) (Year)

Have you changed your name within the last 10 years for reasons other than marriage? ☐ Yes ☒ No

If yes, enter full former name here (See "Section A" on reverse) _____

I WISH TO HAVE MY NAME APPEAR ON THE BALLOT AS PRINTED BELOW (Nicknames/titles not permitted. See "Section B" on reverse.)

D A N D A V I S

Residence Address (Street Address, City, Zip Code) 7718 RIGA HWY. RIGA, MI 49276

Mailing Address (See "Section C" on reverse) 7718 RIGA HWY. RIGA, MI 49276

Phone (517) 902-9521 Email ddavis edavis 4america.com

☐ City ☒ Township of RIGA Precinct # (required) _____ and Ward # (if any) _____

County of LENAWEE Resident of County for 22 years. Resident of Michigan for 33 years.

I am a citizen of the United States: ☒ Yes ☐ No (You must be a United States citizen to seek office.)

I am registered and qualified to vote at the address listed above: ☒ Yes ☐ No

DEPARTMENT OF STATE

II. OFFICE SOUGHT

Date of Election: Primary Election _____ General Election 11 / 02 / 2010
(Month) (Day) (Year) (Month) (Day) (Year)

Office Sought U.S. HOUSE OF REPRESENTATIVES District/Circuit # (if applicable) 7TH

If a partisan office, list political party THE TEA PARTY
(Note: If filing a Qualifying Petition list "No Party Affiliation")

Term of Office ☒ Regular Term ☐ Partial Term Expiring 01 / 03 / 2013
(Month) (Day) (Year)

Judicial Candidates Only (See "Section D" on reverse) ☐ Incumbent Position ☐ Non-Incumbent Position ☐ New Judgeship

III. FILER'S ACKNOWLEDGMENT - This filing contains the following (check all that apply):

☐ Nominating or Qualifying Petitions (Estimated number of signatures: _____)

☐ Filing Fee of \$100.00 (if applicable)

☒ Certification of Party Nomination and Certificate of Acceptance (if applicable)

☐ Affidavit of Constitutional Qualification (judicial candidates only)

☐ Affidavit of Candidacy (incumbent judicial candidates only)

☐ Destroy petitions in January

☐ Return petitions in January

IV. CAMPAIGN FINANCE COMPLIANCE STATEMENT AND ATTESTATION

By signing this affidavit, I swear (or affirm) that the facts I have provided are true. I further swear (or affirm) that the facts contained in the statement set forth below are true. (See Section "E" on reverse for further information.)

At this date, all statements, reports, late filing fees, and fines due from me or any Candidate Committee organized to support my election to office under the Michigan Campaign Finance Act, PA 388 of 1976, have been filed or paid.

I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000.00 or imprisonment for up to 5 years, or both. (MCL 168.558, 933 and 936)

SIGNATURE OF CANDIDATE DANNY E. DAVIS

Subscribed and sworn to by DANNY E. DAVIS Name of Notary Brenda J. Graham
before me on the 19 day of JULY, 2010 Notary Public, State of Michigan, County of LENAWEE

Brenda J. Graham My commission expires 12/22/2015
Signature of notary public Acting in the County of LENAWEE

AFFIDAVIT OF IDENTITY AND RECEIPT OF FILING

PLEASE COMPLETE SECTIONS I, II, III AND IV BELOW (Print or Type) - See Reverse Side for Important Notifications

ELECTIONS DIVISION

OFFICE USE ONLY		Office Code _____	
Received by _____		Date of Filing <u>28 JUL 25 PM 4:46</u>	
No. of Petition Sheets or Receipt No. _____		CFR I.D. No. _____	

DEPARTMENT OF STATE

I. CANDIDATE IDENTIFICATION

Name Dickerson Christopher J Birth date 10 / 24 / 1977
 (Last) (First) (Middle) (Month) (Day) (Year)

Have you changed your name within the last 10 years for reasons other than marriage? ☐ Yes ☒ No

If yes, enter full former name here (See "Section A" on reverse) _____

I WISH TO HAVE MY NAME APPEAR ON THE BALLOT AS PRINTED BELOW (Nicknames/titles not permitted. See "Section B" on reverse.)

C	h	r	i	s	t	o	p	h	e	r		J		D	i	c	k	e	r	s	o	n						
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Residence Address (Street Address, City, Zip Code) 120 Bingham, Brooklyn MI 49230

Mailing Address (See "Section C" on reverse) _____

Phone (517) 787-4011 Email clckercj@gmail.com

☐ City ☒ Township of Columbia Precinct # (required) 3 and Ward # (if any) _____

County of Jackson Resident of County for 25 years. Resident of Michigan for 25 years.

I am a citizen of the United States: ☒ Yes ☐ No (You must be a United States citizen to seek office.)

I am registered and qualified to vote at the address listed above: ☒ Yes ☐ No

II. OFFICE SOUGHT

Date of Election: Primary Election _____ / _____ / _____ General Election 11 / 2 / 10
 (Month) (Day) (Year) (Month) (Day) (Year)

Office Sought State Representative District/Circuit # (if applicable) 65th

If a partisan office, list political party The Tea Party (Note: If filing a Qualifying Petition list "No Party Affiliation")

Term of Office ☒ Regular Term ☐ Partial Term Expiring 01 / 01 / 2013
 (Month) (Day) (Year)

Judicial Candidates Only (See "Section D" on reverse) ☐ Incumbent Position ☐ Non-Incumbent Position ☐ New Judgeship

III. FILER'S ACKNOWLEDGMENT - This filing contains the following (check all that apply):

<input type="checkbox"/> Nominating or Qualifying Petitions (Estimated number of signatures: _____) <input type="checkbox"/> Filing Fee of \$100.00 (if applicable) <input checked="" type="checkbox"/> Certification of Party Nomination and Certificate of Acceptance (if applicable) <input type="checkbox"/> Affidavit of Constitutional Qualification (judicial candidates only) <input type="checkbox"/> Affidavit of Candidacy (incumbent judicial candidates only)	<input type="checkbox"/> Destroy petitions in January <input type="checkbox"/> Return petitions in January
--	---

IV. CAMPAIGN FINANCE COMPLIANCE STATEMENT AND ATTESTATION

By signing this affidavit, I swear (or affirm) that the facts I have provided are true. I further swear (or affirm) that the facts contained in the statement set forth below are true. (See Section "E" on reverse for further information.)

At this date, all statements, reports, late filing fees, and fines due from me or any Candidate Committee organized to support my election to office under the Michigan Campaign Finance Act, PA 388 of 1976, have been filed or paid.

I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000.00 or imprisonment for up to 5 years, or both. (MCL 168.558, 933 and 936)

SIGNATURE OF CANDIDATE Christopher J. Dickerson

Subscribed and sworn to by Christopher J. Dickerson Name of Notary Sharon L. Chase
 before me on the 22nd day of July, 2010 Notary Public, State of Michigan, County of Jackson

Sharon L. Chase My commission expires 9/13/10
 Signature of notary public Acting in the County of Jackson

ELECTIONS DIVISION

OFFICE USE ONLY Received by _____ No. of Petition Sheets or Receipt No. _____		Office Code _____ Date of Filing <u>2010 JUL 26 PM 4:45</u> CFR I.D. No. _____	
DEPARTMENT OF STATE			
I. CANDIDATE IDENTIFICATION			
Name <u>McGord</u> <u>Corey</u> <u>J</u>		Birth date <u>10</u> / <u>27</u> / <u>1975</u>	
(Last) (First) (Middle)		(Month) (Day) (Year)	
Have you changed your name within the last 10 years for reasons other than marriage? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, enter full former name here (See "Section A" on reverse) _____			
I WISH TO HAVE MY NAME APPEAR ON THE BALLOT AS PRINTED BELOW (Nicknames/titles not permitted. See "Section B" on reverse.)			
C o r e y J M c C o r d			
Residence Address (Street Address, City, Zip Code) <u>347 Addle Court, Michigan Center, Michigan 49254</u>			
Mailing Address (See "Section C" on reverse) _____			
Phone (<u>517</u>) <u>784-2121</u>		Email <u>coreyjmccord@yahoo.com</u>	
<input type="checkbox"/> City <input checked="" type="checkbox"/> Township of <u>Leoni</u>		Precinct # (required) <u>002</u> and Ward # (if any) <u>00</u>	
County of <u>Jackson</u>		Resident of County for <u>8</u> years. Resident of Michigan for <u>8</u> years.	
I am a citizen of the United States: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (You must be a United States citizen to seek office.)			
I am registered and qualified to vote at the address listed above: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
II. OFFICE SOUGHT			
Date of Election: Primary Election _____		General Election <u>11</u> / <u>2</u> / <u>10</u>	
(Month) (Day) (Year)		(Month) (Day) (Year)	
Office Sought <u>Attorney General</u>		District/Circuit # (if applicable) _____	
If a partisan office, list political party <u>The Tea Party</u>			
(Note: If filing a Qualifying Petition list "No Party Affiliation")			
Term of Office <input checked="" type="checkbox"/> Regular Term <input type="checkbox"/> Partial Term		Expiring <u>1</u> / <u>1</u> / <u>15</u>	
(Month) (Day) (Year)		(Month) (Day) (Year)	
Judicial Candidates Only (See "Section D" on reverse)		<input type="checkbox"/> Incumbent Position <input type="checkbox"/> Non-Incumbent Position <input type="checkbox"/> New Judgeship	
III. FILER'S ACKNOWLEDGMENT - This filing contains the following (check all that apply):			
<input type="checkbox"/> Nominating or Qualifying Petitions (Estimated number of signatures: _____)			
<input type="checkbox"/> Filing Fee of \$100.00 (if applicable)			
<input checked="" type="checkbox"/> Certification of Party Nomination and Certificate of Acceptance (if applicable)			
<input type="checkbox"/> Affidavit of Constitutional Qualification (judicial candidates only)			
<input type="checkbox"/> Affidavit of Candidacy (incumbent judicial candidates only)			
<input type="checkbox"/> Destroy petitions in January <input type="checkbox"/> Return petitions in January			
IV. CAMPAIGN FINANCE COMPLIANCE STATEMENT AND ATTESTATION			
By signing this affidavit, I swear (or affirm) that the facts I have provided are true. I further swear (or affirm) that the facts contained in the statement set forth below are true. (See Section "E" on reverse for further information.)			
At this date, all statements, reports, late filing fees, and fines due from me or any Candidate Committee organized to support my election to office under the Michigan Campaign Finance Act, PA 388 of 1976, have been filed or paid.			
I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000.00 or imprisonment for up to 5 years, or both. (MCL 168.558, 933 and 936)			
SIGNATURE OF CANDIDATE <u>Corey J. McGord</u>			
Subscribed and sworn to by <u>Corey J. McGord</u>		Name of Notary <u>Sharon L. Chase</u>	
before me on the <u>22nd</u> day of <u>July</u> , <u>2010</u>		Notary Public, State of Michigan, County of <u>Jackson</u>	
<u>Sharon L. Chase</u> Signature of notary public		My commission expires <u>9/13/10</u> Acting in the County of <u>Jackson</u>	

[illegible]

PLEASE COMPLETE SECTIONS I, II, III AND IV BELOW (Print or Type) - See Reverse Side for Important Notifications

ГД 10/150005

AFFIDAVIT OF IDENTITY AND RECEIPT OF FILING

PLEASE COMPLETE SECTIONS I, II, III AND IV BELOW (Print or Type) **ELECTIONS DIVISION** See Reverse Side for Important Notifications

OFFICE USE ONLY

Received by _____

Office Date 2010 JUL 26 PM 4:45

Date of Filing _____

No. of Petition Sheets or Receipt No. _____

CLERK OF CIRCUIT COURT OF STATE

I. CANDIDATE IDENTIFICATION

Name Nicholls Andrew Stephen Birth date 05 1 09 1988
 (Last) (First) (Middle) (Month) (Day) (Year)

Have you changed your name within the last 10 years for reasons other than marriage?

☐ Yes ☒ No

If yes, enter full former name here (See "Section A" on reverse)

I WISH TO HAVE MY NAME APPEAR ON THE BALLOT AS PRINTED BELOW (Nicknames/titles not permitted. See "Section B" on reverse.)

A n d r e w N i c h o l l s _____

Residence Address (Street Address, City, Zip Code) 4808 Parkridge Dr., Waterford, 48329Mailing Address (See "Section C" on reverse) SamePhone (248) 683-7903 Email _____☐ City ☒ Township of Waterford Precinct # (required) 6 and Ward # (if any) _____County of Oakland Resident of County for 22 years. Resident of Michigan for 22 years.I am a citizen of the United States: ☒ Yes ☐ No (You must be a United States citizen to seek office.)I am registered and qualified to vote at the address listed above: ☒ Yes ☐ No

II. OFFICE SOUGHT

Date of Election: Primary Election 8 1 1 General Election 11 1 02 2010
 (Month) (Day) (Year) (Month) (Day) (Year)

Office Sought State Senate District/Circuit # (if applicable) 26If a partisan office, list political party Tea Party

(Note: If filing a Qualifying Petition list "No Party Affiliation")

Term of Office ☒ Regular Term ☐ Partial Term Expiring _____
 (Month) (Day) (Year)Judicial Candidates Only (See "Section D" on reverse) ☐ Incumbent Position ☐ Non-Incumbent Position ☐ New Judgeship

III. FILER'S ACKNOWLEDGMENT - This filing contains the following (check all that apply):

☐ Nominating or Qualifying Petitions (Estimated number of signatures: _____)☐ Filing Fee of \$100.00 (if applicable)☒ Certification of Party Nomination and Certificate of Acceptance (if applicable)☐ Affidavit of Constitutional Qualification (judicial candidates only)☐ Affidavit of Candidacy (incumbent judicial candidates only)☐ Destroy petitions in January☐ Return petitions in January

IV. CAMPAIGN FINANCE COMPLIANCE STATEMENT AND ATTESTATION

- By signing this affidavit, I swear (or affirm) that the facts I have provided are true. I further swear (or affirm) that the facts contained in the statement set forth below are true. (See Section "E" on reverse for further information.)

At this date, all statements, reports, late filing fees, and fines due from me or any Candidate Committee organized to support my election to office under the Michigan Campaign Finance Act, PA 388 of 1976, have been filed or paid.

- I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000.00 or imprisonment for up to 5 years, or both. (MCL 168.558, 933 and 936)

SIGNATURE OF CANDIDATE

Subscribed and sworn to by Andrew Nicholls Name of Notary Jason H. Savarbefore me on the 23rd day of July, 2010 Notary Public, State of Michigan, County of OaklandMy commission expires July, 20, 2016Acting in the County of Oakland

Signature of notary public

PLEASE COMPLETE SECTIONS I, II, III AND IV BELOW (Print or Type) - See Reverse Side for Important Notifications

OFFICE USE ONLY

Received by _____

No. of Petition Sheets or Receipt No. _____

Office Code _____

Date of Filing _____

CFR I.D. No. _____

ELECTIONS DIVISION

I. CANDIDATE IDENTIFICATION

Name WHITEHILL FRANTT V Birth date 06-01-51
(Last) (First) (Middle) DEPARTMENT OF STATE (Day) (Month) (Year)

Have you changed your name within the last 10 years for reasons other than marriage?

☐ Yes ☒ No

If yes, enter full former name here (See "Section A" on reverse)

I WISH TO HAVE MY NAME APPEAR ON THE BALLOT AS PRINTED BELOW (Nicknames/aliases not permitted. See "Section B" on reverse.)

FRANTT V WHITEHILL

Residence Address (Street Address, City, Zip Code) 915 EAST INDIAN ST. MIDLAND MI 48640

Mailing Address (See "Section C" on reverse)

Phone (989) 839-0869 Email frantt.whitehill@att.net☒ City ☐ Township of MIDLAND Precinct # (required) 003 and Ward # (if any) 02County of MIDLAND Resident of County for 32 years. Resident of Michigan for 59 years.I am a citizen of the United States: ☒ Yes ☐ No (You must be a United States citizen to seek office.)I am registered and qualified to vote at the address listed above: ☒ Yes ☐ No

II. OFFICE SOUGHT

Date of Election: Primary Election 11-02-2010 General Election 11-02-2010
(Month) (Day) (Year) (Month) (Day) (Year)Office Sought STATE SENATE 36TH DIST. District/Circuit # (if applicable) _____If a partisan office, list political party LEA PARTY
(Note: If filing a Qualifying Petition list "No Party Affiliation")Term of Office ☒ Regular Term ☐ Partial Term Expiring _____
(Month) (Day) (Year)Judicial Candidates Only (See "Section D" on reverse) ☐ Incumbent Position ☐ Non-Incumbent Position ☐ New Judgeship

III. FILER'S ACKNOWLEDGMENT - This filing contains the following (check all that apply):

- ☐ Nominating or Qualifying Petitions (Estimated number of signatures: _____)
- ☐ Filing Fee of \$100.00 (if applicable)
- ☒ Certification of Party Nomination and Certificate of Acceptance (if applicable)
- ☐ Affidavit of Constitutional Qualification (judicial candidates only)
- ☐ Affidavit of Candidacy (incumbent judicial candidates only)
- ☐ Destroy petitions in January
- ☐ Return petitions in January

IV. CAMPAIGN FINANCE COMPLIANCE STATEMENT AND ATTESTATION

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At this date, all statements, reports, late filing fees, and fines due from me or any Candidate Committee organized to support my election to office under the Michigan Campaign Finance Act, PA 388 of 1976, have been filed or paid.

- I acknowledge that making a false statement in this affidavit is perjury, a felony punishable by a fine up to \$1,000.00 or imprisonment for up to 5 years, or both. (MCL 168.558, 932 and 936)

SIGNATURE OF CANDIDATE Frantt WhitehillSubscribed and sworn to by Frantt Whitehill
before me on the 22 day of July, 10Jan M. Sugar
Signature of notary publicName of Notary Jan M. Sugar
Notary Public, State of Michigan, County of Bay
My commission expires 4-19-13
Acting in the County of Bay

JAN-M. SUGAR
Notary Public, State of Michigan, County of Bay
My Commission Expires April 19, 2013

AFFIDAVIT OF IDENTITY AND RECEIPT OF FILING

PLEASE COMPLETE SECTIONS I, II, III AND IV BELOW (Print or Type) - See Reverse Side for Important Notifications

ELECTIONS DIVISION

OFFICE USE ONLY

Received by _____

Office Code _____

Date of Filing 28 JUL 26 PM 4:58

No. of Petition Sheets or Receipt No. _____

CFR I.D. No. _____

DEPARTMENT OF STATE

I. CANDIDATE IDENTIFICATION

Name Canto Jameson Christopher Birth date 04 30 1985
(Last) (First) (Middle) (Month) (Day) (Year)

Have you changed your name within the last 10 years for reasons other than marriage? ☒ Yes ☐ No

If yes, enter full former name here (See "Section A" on reverse) Christopher Ryan Amee

I WISH TO HAVE MY NAME APPEAR ON THE BALLOT AS PRINTED BELOW (Nicknames/titles not permitted. See "Section B" on reverse.)

J a m e s o n C h r i s t o p h e r C a n t o

Residence Address (Street Address, City, Zip Code) 20863 Hunt Club Drive, Harper Woods 48825

Mailing Address (See "Section C" on reverse) _____

Phone (248) 635-8481

Email _____

☒ City ☐ Township of Harper Woods Precinct # (required) 5 and Ward # (if any) _____

County of Wayne Resident of County for 5 years. Resident of Michigan for 25 years.

I am a citizen of the United States: ☒ Yes ☐ No (You must be a United States citizen to seek office.)

I am registered and qualified to vote at the address listed above: ☒ Yes ☐ No

II. OFFICE SOUGHT

Date of Election: Primary Election _____ General Election 11 02 2010
(Month) (Day) (Year) (Month) (Day) (Year)

Office Sought State Representative District/Circuit # (if applicable) 1

If a partisan office, list political party Tea Party

Term of Office ☒ Regular Term ☐ Partial Term Expiring 12 31 12
(Month) (Day) (Year)

(Note: If filing a Qualifying Petition list "No Party Affiliation")

Judicial Candidates Only (See "Section D" on reverse) ☐ Incumbent Position ☐ Non-Incumbent Position ☐ New Judgeship

III. FILER'S ACKNOWLEDGMENT - This filing contains the following (check all that apply):

- ☐ Nominating or Qualifying Petitions (Estimated number of signatures: _____)
- ☐ Filing Fee of \$100.00 (if applicable)
- ☒ Certification of Party Nomination and Certificate of Acceptance (if applicable)
- ☐ Affidavit of Constitutional Qualification (judicial candidates only)
- ☐ Affidavit of Candidacy (incumbent judicial candidates only)

- ☐ Destroy petitions in January
- ☐ Return petitions in January

IV. CAMPAIGN FINANCE COMPLIANCE STATEMENT AND ATTESTATION

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At this date, all statements, reports, late filing fees, and fines due from me or any Candidate Committee organized to support my election to office under the Michigan Campaign Finance Act, PA 388 of 1976, have been filed or paid.

- I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000.00 or imprisonment for up to 5 years, or both. (MCL 168.558, 933 and 936)

SIGNATURE OF CANDIDATE

James C. Canto

Subscribed and sworn to by James Christopher Canto Name of Notary

before me on the 22nd day of July, 2010 Notary Public, State of Michigan, County of Oakland

My commission expires July 20, 2016

Acting in the County of Wayne

Signature of notary public

PLEASE COMPLETE SECTIONS I, II, III AND IV BELOW (Print or Type) - **ELECTIONS DIVISION**

PLEASE COMPLETE SECTION 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100

OFFICE USE ONLY
Received by _____
No. of Petition Sheets or Receipt No. _____

Office Code 2010 J0 26 PM 4:58
Date of Filing _____
CFR I.D. No. DEPARTMENT OF STATE

I. CANDIDATE IDENTIFICATION
Name QASHAT SUSAN MARYSO Birth date SEPT. 16, 1959
(Last) (First) (Middle) (Month) (Day) (Year)
Have you changed your name within the last 10 years for reasons other than marriage? ☐ Yes ☒ No
If yes, enter full former name here (See "Section A" on reverse) _____
I WISH TO HAVE MY NAME APPEAR ON THE BALLOT AS PRINTED BELOW (Nicknames/titles not permitted. See "Section B" on reverse.)
S U S A N Q A S H A T
Residence Address (Street Address, City, Zip Code) 2437 ROWLAND AVE, ROYAL OAK, MI 48067
Mailing Address (See "Section C" on reverse) P.O. BOX 250061, WEST BLOOMFIELD, 48325
Phone (248) 214-7937 Email surety159@gmail.com
☒ City ☐ Township of ROYAL OAK Precinct # (required) 002 and Ward # (if any) _____
County of OAKLAND Resident of County for 45 years. Resident of Michigan for 50 years.
I am a citizen of the United States: ☒ Yes ☐ No (You must be a United States citizen to seek office.)
I am registered and qualified to vote at the address listed above: ☒ Yes ☐ No

II. OFFICE SOUGHT
Date of Election: Primary Election NOV 5, 2009 General Election 11, 02, 2010
(Month) (Day) (Year) (Month) (Day) (Year)
Office Sought STATE REPRESENTATIVE District/Circuit # (if applicable) 210
If a partisan office, list political party TEA PARTY (Note: If filing a Qualifying Petition list "No Party Affiliation")
Term of Office ☒ Regular Term ☐ Partial Term Expiring _____
(Month) (Day) (Year)
Judicial Candidates Only (See "Section D" on reverse) ☐ Incumbent Position ☐ Non-Incumbent Position ☐ New Judgeship

III. FILER'S ACKNOWLEDGMENT - This filing contains the following (check all that apply):
☐ Nominating or Qualifying Petitions (Estimated number of signatures: _____)
☒ Filing Fee of \$100.00 (if applicable)
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☐ Affidavit of Constitutional Qualification (judicial candidates only)
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At this date, all statements, reports, late filing fees, and fines due from me or any Candidate Committee organized to support my election to office under the Michigan Campaign Finance Act, PA 388 of 1976, have been filed or paid.
I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000.00 or imprisonment for up to 5 years, or both. (MCL 168.558, 933 and 936)
SIGNATURE OF CANDIDATE Susan Qashat
Subscribed and sworn to by Susan Qashat Name of Notary Jason K. Brown
before me on the 23rd day of July, 2010 Notary Public, State of Michigan, County of Oakland
My commission expires July 20, 2016
Acting in the County of Oakland
Signature of notary public _____

AFFIDAVIT OF IDENTITY AND RECEIPT OF FILING

PLEASE COMPLETE SECTIONS I, II, III AND IV BELOW (Print or Type) *See Reverse Side for Important Notifications*

ELECTIONS DIVISION

OFFICE USE ONLY		Office Code	
Received by: _____		Date of Filing: <u>2010 JUL 26 PM 4:58</u>	
No. of Petition Sheets or Receipt No. _____		CFR I.D. No. _____	
DEPARTMENT OF STATE			

I. CANDIDATE IDENTIFICATION

Name Quinn Matthew Daniel Birth date 1 / 18 / 1988
 (Last) (First) (Middle) (Month) (Day) (Year)

Have you changed your name within the last 10 years for reasons other than marriage? ☐ Yes ☒ No

If yes, enter full former name here (See "Section A" on reverse) _____

I WISH TO HAVE MY NAME APPEAR ON THE BALLOT AS PRINTED BELOW (Nicknames/titles not permitted. See "Section B" on reverse.)

Matthew Quinn

Residence Address (Street Address, City, Zip Code) 4467 Meigs Ave., Waterford, MI 48329

Mailing Address (See "Section C" on reverse) Same

Phone (248) 618-3520 Email N/A

☐ City ☒ Township of Waterford Precinct # (required) 60 and Ward # (if any) _____

County of Oakland Resident of County for 22 years. Resident of Michigan for 22 years.

I am a citizen of the United States: ☒ Yes ☐ No (You must be a United States citizen to seek office.)

I am registered and qualified to vote at the address listed above: ☒ Yes ☐ No

II. OFFICE SOUGHT

Date of Election: Primary Election _____ General Election 11 / 2 / 2010
 (Month) (Day) (Year) (Month) (Day) (Year)

Office Sought State Representative District/Circuit # (if applicable) 43

If a partisan office, list political party The Tea Party
 (Note: If filing a Qualifying Petition list "No Party Affiliation")

Term of Office ☒ Regular Term ☐ Partial Term Expiring 12 / 31 / 2012
 (Month) (Day) (Year)

Judicial Candidates Only (See "Section D" on reverse) ☐ Incumbent Position ☐ Non-Incumbent Position ☐ New Judgeship

III. FILER'S ACKNOWLEDGMENT -- This filing contains the following (check all that apply):

<input type="checkbox"/> Nominating or Qualifying Petitions (Estimated number of signatures: _____)	<input type="checkbox"/> Destroy petitions in January <input type="checkbox"/> Return petitions in January
<input type="checkbox"/> Filing Fee of \$100.00 (if applicable)	
<input checked="" type="checkbox"/> Certification of Party Nomination and Certificate of Acceptance (if applicable)	
<input type="checkbox"/> Affidavit of Constitutional Qualification (judicial candidates only)	
<input type="checkbox"/> Affidavit of Candidacy (incumbent judicial candidates only)	

IV. CAMPAIGN FINANCE COMPLIANCE STATEMENT AND ATTESTATION

• By signing this affidavit, I swear (or affirm) that the facts I have provided are true. I further swear (or affirm) that the facts contained in the statement set forth below are true. (See Section "E" on reverse for further information.)

At this date, all statements, reports, late filing fees, and fines due from me or any Candidate Committee organized to support my election to office under the Michigan Campaign Finance Act, PA 388 of 1976, have been filed or paid.

• I acknowledge that making a false statement in this affidavit is perjury -- a felony punishable by a fine up to \$1,000.00 or imprisonment for up to 5 years, or both. (MCL 168.558, 933 and 936)

SIGNATURE OF CANDIDATE X Matthew Quinn

Subscribed and sworn to by Matthew Quinn Name of Notary Jason H. Bauer
 before me on the 26th day of July, 2010 Notary Public, State of Michigan, County of Oakland

Jason H. Bauer My commission expires July 20, 2010
 Acting in the County of Oakland

Signature of notary public

AFFIDAVIT OF IDENTITY AND RECEIPT OF FILING

PLEASE COMPLETE SECTIONS I, II, III AND IV BELOW (Print or Type) - See Reverse Side for Important Notifications

OFFICE USE ONLY		Office ELECTIONS DIVISION	
Received by _____		Date of Filing _____	
No. of Petition Sheets or Receipt No. _____		CFR 1.1 2010 JUL 26 PM 4:58	

I. CANDIDATE IDENTIFICATION

Name Gunther William Thomas Birth date 03 20 1966
(Last) (First) (Middle) (Month) (Day) (Year)

Have you changed your name within the last 10 years for reasons other than marriage? ☐ Yes ☒ No
 (If yes, enter full former name here (See "Section A" on reverse)) _____

I WISH TO HAVE MY NAME APPEAR ON THE BALLOT AS PRINTED BELOW (Nicknames/titles not permitted. See "Section B" on reverse.)

W I L L I A M T G U N T H E R

Residence Address (Street Address, City, Zip Code) 811 Hidden Ponds Dr. Grand Blanc 48429

Mailing Address (See "Section C" on reverse) _____

Phone (810) 655-2497 Email N/A

☐ City ☒ Township of Mundy Precinct # (required) _____ and Ward # (if any) _____

County of Genesee Resident of County for 10 years. Resident of Michigan for 44 years.

I am a citizen of the United States: ☒ Yes ☐ No (You must be a United States citizen to seek office.)

I am registered and qualified to vote at the address listed above: ☒ Yes ☐ No

DEPARTMENT OF STATE

II. OFFICE SOUGHT

Date of Election: Primary Election _____ General Election November 2 / 2010
(Month) (Day) (Year) (Month) (Day) (Year)

Office Sought State House of Michigan District/Circuit # (if applicable) 5/51

If a partisan office, list political party THE TEA PARTY
(Note: If filing a Qualifying Petition list "No Party Affiliation")

Term of Office ☒ Regular Term ☐ Partial Term Expiring 1 1 2013
(Month) (Day) (Year)

Judicial Candidates Only (See "Section D" on reverse) ☐ Incumbent Position ☐ Non-Incumbent Position ☐ New Judgeship

III. FILER'S ACKNOWLEDGMENT - This filing contains the following (check all that apply):

☐ Nominating or Qualifying Petitions (Estimated number of signatures: _____)

☐ Filing Fee of \$100.00 (if applicable)

☒ Certification of Party Nomination and Certificate of Acceptance (if applicable)

☐ Affidavit of Constitutional Qualification (judicial candidates only)

☐ Affidavit of Candidacy (incumbent judicial candidates only)

☐ Destroy petitions in January

☐ Return petitions in January

IV. CAMPAIGN FINANCE COMPLIANCE STATEMENT AND ATTESTATION

- By signing this affidavit, I swear (or affirm) that the facts I have provided are true. I further swear (or affirm) that the facts contained in the statement set forth below are true. (See Section "E" on reverse for further information.)

At this date, all statements, reports, late filing fees, and fines due from me or any Candidate Committee organized to support my election to office under the Michigan Campaign Finance Act, PA 388 of 1976, have been filed or paid.

- I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000.00 or imprisonment for up to 5 years, or both. (MCL 168.558, 933 and 936)

SIGNATURE OF CANDIDATE W. Gunther

Subscribed and sworn to by Linda M. Miller

before me on the 21st day of July, 2010

Linda M. Miller
Signature of notary public

Name of Notary Linda M. Miller

Notary Public, State of Michigan, County of Saginaw

My commission expires 4-8-2011

Acting in the County of SAGINAW

PLEASE COMPLETE SECTIONS I, II, III AND IV BELOW (Print or Type) - See Reverse Side for Important Notifications

ED-104 (3/7/08)

PLEASE COMPLETE SECTIONS I, II, III AND IV BELOW (Print or Type) - See Reverse Side for Important Notifications

OFFICE USE ONLY		Office Code ELECTIONS DIVISION	
Received by _____		Date of Filing _____	
No. of Petition Sheets or Receipt No. _____		CFR I.D. No. 2010 JUL 26 PM 4:46	
I. CANDIDATE IDENTIFICATION		DEPARTMENT OF STATE	
Name	<u>Polzin David A.</u>	Birth date	<u>10 / 11 / 1954</u>
(Last)	(First)	(Middle)	(Month) (Day) (Year)
Have you changed your name within the last 10 years for reasons other than marriage? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, enter full former name here (See "Section A" on reverse) _____			
I WISH TO HAVE MY NAME APPEAR ON THE BALLOT AS PRINTED BELOW (Nicknames/titles not permitted. See "Section B" on reverse.)			
<u>D a r i d P O L Z I N</u>			
Residence Address (Street Address, City, Zip Code) <u>N 1195 River Drive</u>			
Mailing Address (See "Section C" on reverse) _____			
Phone (<u>906</u>) <u>863 2111</u>	Email <u>DPolzin74@yahoo.com</u>		
<input type="checkbox"/> City <input checked="" type="checkbox"/> Township of <u>Menominee</u>	Precinct # (required) _____ and Ward # (if any) _____		
County of <u>Menominee</u>	Resident of County for <u>20</u> years. Resident of Michigan for <u>24</u> years.		
I am a citizen of the United States: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (You must be a United States citizen to seek office.)			
I am registered and qualified to vote at the address listed above: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
II. OFFICE SOUGHT			
Date of Election: Primary Election _____	General Election <u>Nov 2 2010</u>		
(Month) (Day) (Year)	(Month) (Day) (Year)		
Office Sought <u>State house of rep.</u>	District/Circuit # (if applicable) <u>108th House</u>		
If a partisan office, list political party <u>THE TEA Party</u>	(Note: If filing a Qualifying Petition list "No Party Affiliation")		
Term of Office <input type="checkbox"/> Regular Term <input type="checkbox"/> Partial Term	Expiring _____		
(Month) (Day) (Year)	(Month) (Day) (Year)		
Judicial Candidates Only (See "Section D" on reverse)	<input type="checkbox"/> Incumbent Position	<input type="checkbox"/> Non-Incumbent Position	<input type="checkbox"/> New Judgeship
III. FILER'S ACKNOWLEDGMENT - This filing contains the following (check all that apply):			
<input type="checkbox"/> Nominating or Qualifying Petitions (Estimated number of signatures: _____)			
<input checked="" type="checkbox"/> Filing Fee of \$100.00 (if applicable)			
<input type="checkbox"/> Certification of Party Nomination and Certificate of Acceptance (if applicable)			
<input type="checkbox"/> Affidavit of Constitutional Qualification (judicial candidates only)			
<input type="checkbox"/> Affidavit of Candidacy (incumbent judicial candidates only)			
<input type="checkbox"/> Destroy petitions in January			
<input type="checkbox"/> Return petitions in January			
IV. CAMPAIGN FINANCE COMPLIANCE STATEMENT AND ATTESTATION			
By signing this affidavit, I swear (or affirm) that the facts I have provided are true. I further swear (or affirm) that the facts contained in the statement set forth below are true. (See Section "E" on reverse for further information.)			
At this date, all statements, reports, late filing fees, and fines due from me or any Candidate Committee organized to support my election to office under the Michigan Campaign Finance Act, PA 388 of 1976, have been filed or paid.			
I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000.00 or imprisonment for up to 5 years, or both. (MCL 168.538, 933 and 936)			
SIGNATURE OF CANDIDATE <u>David A. Polzin</u>			
Subscribed and sworn to by <u>Wesley Stripling</u> Name of Notary <u>Wesley Stripling</u>			
before me on the <u>23</u> day of <u>July</u> , <u>2010</u> Notary Public, State of Michigan, County of <u>Menominee</u>			
My commission expires <u>4/21/11</u>			
Signature of notary public <u>Wesley Stripling</u> in the County of <u>Menominee</u>			
NOTARY PUBLIC-MENOMINEE COUNTY, MI			
COMMISSION EXPIRES 04/21/2011			

AFFIDAVIT OF IDENTITY AND RECEIPT OF FILING

PLEASE COMPLETE SECTIONS I, II, III AND IV BELOW (Print or Type) - See Reverse Side for Important Notifications

ELECTIONS DIVISION

OFFICE USE ONLY

Received by _____

Office Code _____

No. of Petition Sheets or Receipt No. _____

Date of Filing 28 JUL 26 PM 4:46
CFR ID No. _____

I. CANDIDATE IDENTIFICATION

DEPARTMENT OF STATE

Name HARD WILLIAM R Birth date 07 126 1961
(Last) (First) (Middle) (Month) (Day) (Year)

Have you changed your name within the last 10 years for reasons other than marriage?

☐ Yes☒ No

If yes, enter full former name here (See "Section A" on reverse) _____

I WISH TO HAVE MY NAME APPEAR ON THE BALLOT AS PRINTED BELOW (Nicknames/titles not permitted. See "Section B" on reverse.)

WILLIAMRHARD _____

Residence Address (Street Address, City, Zip Code) 9875 MIDLAND Rd FREELAND, 48623Mailing Address (See "Section C" on reverse) P.O. Box #3 FREELAND, MI 48623Phone (989) 695-9829Email WRHARD@MSN.COM

☐ City ☒ Township of TITABAWASSEE Precinct # (required) 1 and Ward # (if any) _____

County of SAGINAW Resident of County for 49 years. Resident of Michigan for 49 years.

I am a citizen of the United States: ☒ Yes ☐ No (You must be a United States citizen to seek office.)

I am registered and qualified to vote at the address listed above:

☒ Yes☐ No

II. OFFICE SOUGHT

Date of Election: Primary Election _____ General Election 11 103 2010
(Month) (Day) (Year) (Month) (Day) (Year)

Office Sought THE UNIVERSITY OF MICHIGAN BOARD OF REGENTS District/Circuit # (if applicable) _____If a partisan office, list political party THE TEN PARTY

(Note: If filing a Qualifying Petition list "No Party Affiliation")

Term of Office ☒ Regular Term ☐ Partial Term Expiring 01 101 2013
(Month) (Day) (Year)

Judicial Candidates Only (See "Section D" on reverse) ☐ Incumbent Position ☐ Non-Incumbent Position ☐ New Judgeship

III. FILER'S ACKNOWLEDGMENT - This filing contains the following (check all that apply):

- ☐ Nominating or Qualifying Petitions (Estimated number of signatures: _____)
- ☐ Filing Fee of \$100.00 (if applicable)
- ☒ Certification of Party Nomination and Certificate of Acceptance (if applicable)
- ☐ Affidavit of Constitutional Qualification (judicial candidates only)
- ☐ Affidavit of Candidacy (incumbent judicial candidates only)

- ☐ Destroy petitions in January
- ☐ Return petitions in January

IV. CAMPAIGN FINANCE COMPLIANCE STATEMENT AND ATTESTATION

- By signing this affidavit, I swear (or affirm) that the facts I have provided are true. I further swear (or affirm) that the facts contained in the statement set forth below are true. (See Section "E" on reverse for further information.)

At this date, all statements, reports, late filing fees, and fines due from me or any Candidate Committee organized to support my election to office under the Michigan Campaign Finance Act, PA 388 of 1976, have been filed or paid.

- I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000.00 or imprisonment for up to 5 years, or both. (MCL 168.558, 933 and 936)

SIGNATURE OF CANDIDATE William E. Hard

Subscribed and sworn to by William Hard
before me on the 22 day of July, 10

Name of Notary Jan M. SugarNotary Public, State of Michigan, County of BayMy commission expires 4-19-13Acting in the County of Bay

Signature of notary-public

JAN M. SUGAR

AFFIDAVIT OF IDENTITY AND RECEIPT OF FILING

PLEASE COMPLETE SECTIONS I, II, III AND IV BELOW (Print or Type) - See Reverse Side for Instructions

ELECTIONS DIVISION

OFFICE USE ONLY	Office Code <u>2010-III-26-PM-1-15</u>
Received by _____	Date of Filing _____
No. of Petition Sheets or Receipt No. _____	CFR I.D. No. <u>DEPARTMENT OF STATE</u>

I. CANDIDATE IDENTIFICATION

Name FRANKLIN KYLE DONALD Birth date 05 / 30 / 1983
 (Last) (First) (Middle) (Month) (Day) (Year)

Have you changed your name within the last 10 years for reasons other than marriage? ☐ Yes ☒ No

If yes, enter full former name here (See "Section A" on reverse)

I WISH TO HAVE MY NAME APPEAR ON THE BALLOT AS PRINTED BELOW (Nicknames/titles not permitted. See "Section B" on reverse.)

KYLE FRANKLIN

Residence Address (Street Address, City, Zip Code) 12916 DENMARK ST, DETROIT, 48217

Mailing Address (See "Section C" on reverse)

Phone (586) 822-9392 Email KYLEFRANKLIN@HOTMAIL.COM

☐ City ☐ Township of _____ Precinct # (required) _____ and Ward # (if any) _____

County of WAYNE Resident of County for 1 years. Resident of Michigan for 27 years.

I am a citizen of the United States: ☒ Yes ☐ No (You must be a United States citizen to seek office.)

I am registered and qualified to vote at the address listed above: ☒ Yes ☐ No

II. OFFICE SOUGHT

Date of Election: Primary Election _____ General Election 11 / 02 / 2010
 (Month) (Day) (Year) (Month) (Day) (Year)

Office Sought SECRETARY OF STATE District/Circuit # (if applicable) _____

If a partisan office, list political party THE TEA PARTY

(Note: If filing a Qualifying Petition list "No Party Affiliation")

Term of Office ☐ Regular Term ☐ Partial Term Expiring _____
 (Month) (Day) (Year)

Judicial Candidates Only (See "Section D" on reverse) ☐ Incumbent Position ☐ Non-Incumbent Position ☐ New Judgeship

III. FILER'S ACKNOWLEDGMENT - This filing contains the following (check all that apply):

☐ Nominating or Qualifying Petitions (Estimated number of signatures: _____)

☐ Filing Fee of \$100.00 (if applicable)

☒ Certification of Party Nomination and Certificate of Acceptance (if applicable)

☐ Affidavit of Constitutional Qualification (judicial candidates only)

☐ Affidavit of Candidacy (incumbent judicial candidates only)

☐ Destroy petitions in January

☐ Return petitions in January

IV. CAMPAIGN FINANCE COMPLIANCE STATEMENT AND ATTESTATION

By signing this affidavit, I swear (or affirm) that the facts I have provided are true. I further swear (or affirm) that the facts contained in the statement set forth below are true. (See Section "E" on reverse for further information.)

At this date, all statements, reports, late filing fees, and fines due from me or any Candidate Committee organized to support my election to office under the Michigan Campaign Finance Act, PA 388 of 1976, have been filed or paid.

I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000.00 or imprisonment for up to 5 years, or both. (MCL 168.558, 933 and 936)

SIGNATURE OF CANDIDATE Kyle Franklin

Subscribed and sworn to by Kyle Franklin
 before me on the 27 day of July, 2010

Name of Notary John H. Baver
 Notary Public, State of Michigan, County of Oakland
 My commission expires July 20, 2016
 Acting in the County of Oakland

Signature of notary public

PLEASE COMPLETE SECTIONS I, II, III AND IV BELOW (Print or Type) - See Reverse Side for Important Notifications

OFFICE USE ONLY		Office Code		ELECTIONS DIVISION	
Received by		Date of Filing		2010 JUL 26 PM 4:45	
No. of Petition Sheets or Receipt No.		CFR I.D. No.			
I. CANDIDATE IDENTIFICATION				DEPARTMENT OF STATE	
Name Snyder		Lenny Lee		Birth date 12 / 09 / 1968	
(Last)		(First)		(Middle)	
Have you changed your name within the last 10 years for reasons other than marriage?				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If yes, enter full former name here (See "Section A" on reverse)					
I WISH TO HAVE MY NAME APPEAR ON THE BALLOT AS PRINTED BELOW (Nicknames/titles not permitted. See "Section B" on reverse.)					
L O N N Y S N Y D E R					
Residence Address (Street Address, City, Zip Code) 2460 Schmidt Rd 48631					
Mailing Address (See "Section C" on reverse) 2460 Schmidt Rd 48631					
Phone (989) 686-4719 Email					
<input type="checkbox"/> City <input type="checkbox"/> Township of		Precinct # (required)		and Ward # (if any)	
County of Bay		Resident of County for 25 years		Resident of Michigan for 27 years	
I am a citizen of the United States: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (You must be a United States citizen to seek office.)					
I am registered and qualified to vote at the address listed above: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
II. OFFICE SOUGHT					
Date of Election: Primary Election		General Election		11 / 2 / 2010	
(Month) (Day) (Year)		(Month) (Day) (Year)		(Month) (Day) (Year)	
Office Sought U.S. Congress		District/Circuit # (if applicable) 1st			
If a partisan office, list political party THE TEA PARTY					
(Note: If filing a Qualifying Petition list "No Party Affiliation".)					
Term of Office: <input checked="" type="checkbox"/> Regular Term <input type="checkbox"/> Partial Term		Expiring 1 / 1 / 2013			
		(Month) (Day) (Year)			
Judicial Candidates Only (See "Section D" on reverse) <input type="checkbox"/> Incumbent Position <input type="checkbox"/> Non-Incumbent Position <input type="checkbox"/> New Judgeship					
III. FILER'S ACKNOWLEDGMENT - This filing contains the following (check all that apply):					
<input type="checkbox"/> Nominating or Qualifying Petitions (Estimated number of signatures:)					
<input type="checkbox"/> Filing Fee of \$100.00 (if applicable)					
<input checked="" type="checkbox"/> Certification of Party Nomination and Certificate of Acceptance (if applicable)					
<input type="checkbox"/> Affidavit of Constitutional Qualification (judicial candidates only)					
<input type="checkbox"/> Affidavit of Candidacy (incumbent judicial candidates only)					
<input type="checkbox"/> Destroy petitions in January					
<input type="checkbox"/> Return petitions in January					
IV. CAMPAIGN FINANCE COMPLIANCE STATEMENT AND ATTESTATION					
By signing this affidavit, I swear (or affirm) that the facts I have provided are true. I further swear (or affirm) that the facts contained in the statement set forth below are true. (See Section "E" on reverse for further information.)					
At this date, all statements, reports, late filing fees, and fines due from me or any Candidate Committee organized to support my election to office under the Michigan Campaign Finance Act, PA 388 of 1976, have been filed or paid.					
I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000.00 or imprisonment for up to 5 years, or both. (MCL 168.538, 933 and 936)					
SIGNATURE OF CANDIDATE					
Subscribed and sworn to by Linda M. Miller		Name of Notary Linda M. Miller			
before me on the 2-18-10 day of July 2010		Notary Public, State of Michigan, County of Saginaw			
Linda M. Miller		My commission expires 4-8-2011			
Signature of notary public		Acting in the County of Saginaw			

AFFIDAVIT OF IDENTITY AND RECEIPT OF FILING

PLEASE COMPLETE SECTIONS I, II, III AND IV BELOW (Print or Type) - See Reverse Side for Important Notifications

ELECTIONS DIVISION**OFFICE USE ONLY**

Received by _____

Office Code _____

Date of Filing _____

No. of Petition Sheets or Receipt No. _____

CFR I.D. No. _____

I. CANDIDATE IDENTIFICATIONName NILES SHELLEY MEREDITH Birth date 05 26 1954
(Last) (First) (Middle) (Month) (Day) (Year)Have you changed your name within the last 10 years for reasons other than marriage? ☐ Yes ☒ No

If yes, enter full former name here (See "Section A" on reverse)

I WISH TO HAVE MY NAME APPEAR ON THE BALLOT AS PRINTED BELOW (Nicknames/titles not permitted. See "Section B" on reverse.)

S H E L L E Y N I L E S Residence Address (Street Address, City, Zip Code) 19472 SILVER SPRING DRIVE APT. 101
NORTHVILLE MI 48167

Mailing Address (See "Section C" on reverse)

Phone (248) 348-7631

Email _____

☐ City ☒ Township of NORTHVILLE Precinct # (required) 2 and Ward # (if any) _____County of WAYNE Resident of County for 7 years. Resident of Michigan for 56 years.I am a citizen of the United States: ☒ Yes ☐ No (You must be a United States citizen to seek office.)I am registered and qualified to vote at the address listed above: ☒ Yes ☐ No**II. OFFICE SOUGHT**Date of Election: Primary Election _____ General Election 11 02 10
(Month) (Day) (Year) (Month) (Day) (Year)Office Sought STATE SENATE District/Circuit # (if applicable) 07If a partisan office, list political party THE TEA PARTY

(Note: If filing a Qualifying Petition list "No Party Affiliation")

Term of Office ☒ Regular Term ☐ Partial Term Expiring 12 31 14
(Month) (Day) (Year)Judicial Candidates Only (See "Section D" on reverse) ☐ Incumbent Position ☐ Non-Incumbent Position ☐ New Judgeship**III. FILER'S ACKNOWLEDGMENT - This filing contains the following (check all that apply):**☐ Nominating or Qualifying Petitions (Estimated number of signatures: _____)☐ Filing Fee of \$100.00 (if applicable)☒ Certification of Party Nomination and Certificate of Acceptance (if applicable)☐ Affidavit of Constitutional Qualification (judicial candidates only)☐ Affidavit of Candidacy (incumbent judicial candidates only)☐ Destroy petitions in January☐ Return petitions in January**IV. CAMPAIGN FINANCE COMPLIANCE STATEMENT AND ATTESTATION**

- By signing this affidavit, I swear (or affirm) that the facts I have provided are true. I further swear (or affirm) that the facts contained in the statement set forth below are true. (See Section "E" on reverse for further information.)

At this date, all statements, reports, late filing fees, and fines due from me or any Candidate Committee organized to support my election to office under the Michigan Campaign Finance Act, PA 388 of 1976, have been filed or paid.

- I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000.00 or imprisonment for up to 5 years, or both. (MCL 168.558, 933 and 936)

SIGNATURE OF CANDIDATESubscribed and sworn to by Shelley Niles Name of Notary Jason H. Baur
before me on the 24th day of July 2010 Notary Public, State of Michigan, County of WayneMy commission expires July 20, 2016Acting in the County of Wayne

Signature of notary public

AFFIDAVIT OF IDENTITY AND RECEIPT OF FILING

PLEASE COMPLETE SECTIONS I, II, III AND IV BELOW (Print or Type) - Electoral Division

OFFICE USE ONLY		Office Code <u>2010 JUL 26 PM 4:57</u>	
Received by _____		Date of Filing _____	
No. of Petition Sheets or Receipt No. _____		CFR ID <u>DEPARTMENT OF STATE</u>	

I. CANDIDATE IDENTIFICATION

Name Young Johnathon Michael Birth date 4 / 11 / June 1985
 (Last) (First) (Middle) (Month) (Day) (Year)

Have you changed your name within the last 10 years for reasons other than marriage? ☐ Yes ☒ No

If yes, enter full former name here (See "Section A" on reverse) _____

I WISH TO HAVE MY NAME APPEAR ON THE BALLOT AS PRINTED BELOW (Nicknames/titles not permitted. See "Section B" on reverse.)

Johnathon Young

Residence Address (Street Address, City, Zip Code) 893 Linden Way, Auburn Hills, MI 48326

Mailing Address (See "Section C" on reverse) same

Phone (248) 872-4830 Email w/a

☒ City ☐ Township of Auburn Hills Precinct # (required) 5 and Ward # (if any) _____

County of Oakland Resident of County for 15 years. Resident of Michigan for 15 years.

I am a citizen of the United States: ☒ Yes ☐ No (You must be a United States citizen to seek office.)

I am registered and qualified to vote at the address listed above: ☒ Yes ☐ No

II. OFFICE SOUGHT

Date of Election: Primary Election _____ General Election 11 / 7 / 2010
 (Month) (Day) (Year) (Month) (Day) (Year)

Office Sought State Senate District/Circuit # (if applicable) 17

If a partisan office, list political party Tea Party

(Note: If filing a Qualifying Petition list "No Party Affiliation")

Term of Office ☒ Regular Term ☐ Partial Term Expiring 12 / 31 / 2014
 (Month) (Day) (Year)

Judicial Candidates Only (See "Section D" on reverse) ☐ Incumbent Position ☐ Non-Incumbent Position ☐ New Judgeship

III. FILER'S ACKNOWLEDGMENT - This filing contains the following (check all that apply):

<input type="checkbox"/> Nominating or Qualifying Petitions (Estimated number of signatures: _____)	<input type="checkbox"/> Destroy petitions in January <input type="checkbox"/> Return petitions in January
<input checked="" type="checkbox"/> Filing Fee of \$100.00 (if applicable)	
<input checked="" type="checkbox"/> Certification of Party Nomination and Certificate of Acceptance (if applicable)	
<input type="checkbox"/> Affidavit of Constitutional Qualification (judicial candidates only)	
<input type="checkbox"/> Affidavit of Candidacy (incumbent judicial candidates only)	

IV. CAMPAIGN FINANCE COMPLIANCE STATEMENT AND ATTESTATION

• By signing this affidavit, I swear (or affirm) that the facts I have provided are true. I further swear (or affirm) that the facts contained in the statement set forth below are true. (See Section "E" on reverse for further information.)

At this date, all statements, reports, late filing fees, and fines due from me or any Candidate Committee organized to support my election to office under the Michigan Campaign Finance Act, PA 388 of 1976, have been filed or paid.

• I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000.00 or imprisonment for up to 5 years, or both. (MCL 168.359, 933 and 936)

SIGNATURE OF CANDIDATE Johnathon Young

Subscribed and sworn to by Johnathon Young Name of Notary Jason H. Bane
 before me on the 23rd day of July 2010 Notary Public, State of Michigan, County of Oakland

[Signature] My commission expires July 20, 2016
 Signature of notary public Acting in the County of Oakland

OFFICE USE ONLY Received by _____ No. of Petition Sheets or Receipt No. _____		Office Code <u>0000</u> Date of Filing <u>JUL 26 PM 4:57</u> CFR I.D. <u>DEPARTMENT OF STATE</u>	
I. CANDIDATE IDENTIFICATION			
Name <u>Murdoch</u> <u>Thomas</u> <u>Richard</u>		Birth date <u>07</u> <u>107</u> <u>1990</u>	
(Last) (First) (Middle)		(Month) (Day) (Year)	
Have you changed your name within the last 10 years for reasons other than marriage? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, enter full former name here (See "Section A" on reverse)			
I WISH TO HAVE MY NAME APPEAR ON THE BALLOT AS PRINTED BELOW (Nicknames/titles not permitted. See "Section B" on reverse.)			
T h o m a s M u r d o c k			
Residence Address (Street Address, City, Zip Code) <u>1264 Chaucer, Troy, 48083</u>			
Mailing Address (See "Section C" on reverse) <u>1264 Chaucer, Troy, 48083</u>			
Phone (448) <u>943-7516</u>		Email <u>trmur@yaho.com</u>	
<input checked="" type="checkbox"/> City <input type="checkbox"/> Township of <u>Troy</u>		Precinct # (required) <u>22</u> and Ward # (if any)	
County of <u>Oakland</u>		Resident of County for <u>10</u> years. Resident of Michigan for <u>20</u> years.	
I am a citizen of the United States: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (You must be a United States citizen to seek office.)			
I am registered and qualified to vote at the address listed above: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
II. OFFICE SOUGHT			
Date of Election: Primary Election <u>08</u> <u>103</u> <u>2010</u>		General Election <u>11</u> <u>102</u> <u>2010</u>	
(Month) (Day) (Year)		(Month) (Day) (Year)	
Office Sought <u>State Senate</u>		District/Circuit # (if applicable) <u>13</u>	
If a partisan office, list political party <u>Tea Party</u>			
(Note: If filing a Qualifying Petition list "No Party Affiliation")			
Term of Office <input checked="" type="checkbox"/> Regular Term <input type="checkbox"/> Partial Term		Expiring <u>012</u> <u>131</u> <u>2014</u>	
		(Month) (Day) (Year)	
Judicial Candidates Only (See "Section D" on reverse)		<input type="checkbox"/> Incumbent Position <input type="checkbox"/> Non-Incumbent Position <input type="checkbox"/> New Judgeship	
III. FILER'S ACKNOWLEDGMENT - This filing contains the following (check all that apply):			
<input type="checkbox"/> Nominating or Qualifying Petitions (Estimated number of signatures: _____)		<input type="checkbox"/> Destroy petitions in January	
<input type="checkbox"/> Filing Fee of \$100.00 (if applicable)		<input type="checkbox"/> Return petitions in January	
<input checked="" type="checkbox"/> Certification of Party Nomination and Certificate of Acceptance (if applicable)			
<input type="checkbox"/> Affidavit of Constitutional Qualification (judicial candidates only)			
<input type="checkbox"/> Affidavit of Candidacy (incumbent judicial candidates only)			
IV. CAMPAIGN FINANCE COMPLIANCE STATEMENT AND ATTESTATION			
By signing this affidavit, I swear (or affirm) that the facts I have provided are true. I further swear (or affirm) that the facts contained in the statement set forth below are true. (See Section "E" on reverse for further information.)			
At this date, all statements, reports, late filing fees, and fines due from me or any Candidate Committee organized to support my election to office under the Michigan Campaign Finance Act, PA 388 of 1976, have been filed or paid.			
I acknowledge that making a false statement in this affidavit is perjury - a felony punishable by a fine up to \$1,000.00 or imprisonment for up to 5 years, or both. (MCL 168.558, 933 and 936)			
SIGNATURE OF CANDIDATE <u>Thomas Murdoch</u>		Name of Notary <u>Jason H. B...</u>	
Subscribed and sworn to by <u>Thomas Murdoch</u>		Notary Public, State of Michigan, County of <u>Oakland</u>	
before me on the <u>23rd</u> day of <u>July</u> <u>2010</u>		My commission expires <u>Jul. 20, 2016</u>	
Signature of notary public		Acting in the County of <u>Oakland</u>	