MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1613

ORIGINAL OR AMENDED

STATEMENT OF ORGANIZATION FORM FOR LOCAL CANDIDATE COMMITTEES FILED WITH A COUNTY CLERK

Information on this form is made public.

1. Committee ID #: 75667	*2. Type of Filing: ☐ Original: ☒ Amendment to items: 7a, 7b, 8, 11 (CHANGE TO ADDRESS & BANK NAME) Eff. Date: 03/01/2021

*3. Full Name of Committee (must include Candidate's first and last name):
COMMITTEE TO ELECT DAVID DENHOUTEN PROSECUTOR

*4a. Candidate Full Name: Last Name: DENHOUTEN	First Name: DAVID	M.I.: A
*4b. Political Party (if applicable): REPUBLICAN	*4c. County of Residence: MISSAUKEE	
*4d. Office Sought: MISSAUKEE COUNTY PROSECUTING ATTORNEY	*4e. District or Jurisdiction: MISSAUKEE	

*5. Date Committee was Formed: 03/10/20

*6a. Committee Phone: 231-846-4378	6b. Committee Fax #:
*6c. Committee Email Address: ddenhouten@gmail.com	6d. Committee Website Address:

FILED
28th Circuit Court
MAR 01 2021
Missaukee County

*7a. Complete Committee Mailing Address (May be PO Box): P.O. Box 829, LAKE CITY, MI 49651-0829

*7b. Complete Committee Street Address (May not be PO Box): 209 S. CANAL ST., LAKE CITY, MI 49651

*8. Treasurer Name and Complete Residential Address: DENHOUTEN, DAVID, A. 209 S. CANAL ST., LAKE CITY, MI 49651

Phone #: 231-846-4378 Email Address: ddenhouten@gmail.com

9. Designated Record Keeper Name and Complete Address:

Phone #: Email Address:

*10. REPORTING WAIVER REQUEST:

☐ **YES, I/We WANT TO APPLY FOR THE REPORTING WAIVER.** The committee does not expect to receive or expend in excess of $1,000.00 in an *election*. I/We understand that if the committee does not spend or received in excess of $1,000.00 in an ***election***, the committee does not owe detailed campaign statements. I/We further understand that the Reporting Waiver will be automatically lost if the committee exceeds the $1,000.00 threshold and all required campaign statements must be filed. ***A Reporting Waiver does not exempt a committee from filing Late Contribution Reports***.

☒ **NO, I/We DO NOT WANT TO APPLY FOR THE REPORTING WAIVER.** The committee expects to receive or expend in excess of $1,000.00 in an *election*. I/We understand that the committee owes detailed campaign statements even if the committee does not spend or receive in excess of $1,000.00 in an election. **I further understand that the Reporting Waiver cannot be requested retroactively to avoid filing requirements and to avoid paying late filing fees.** Further information regarding Reporting Waivers can be found in Appendix C of the Committee Manual.

*11. **Name and Address of Depositories** or Intended Depositories of committee funds. (Michigan Bank, Credit Union or Savings & Loan Association) While this item must be completed, an account does not have to be opened until the first contribution is received.

*Official Depository (name and address): HUNTINGTON BANK, 127 SOUTH MAIN ST, LAKE CITY, MI 49651

Secondary Depository (name and address):

12. Verification: I/We certify that all reasonable diligence was used in the preparation of the above statement and that the contents are true, accurate and complete to the best of my/our knowledge or belief. If filing campaign statements electronically, we further agree that the signatures below shall serve as the signatures that verify the accuracy and completeness of each statement filed electronically by the committee. I/We certify that all reasonable diligence will be used in the preparation of each statement electronically filed by this committee and that the contents of each statement will be true, accurate and complete to the best of my/our knowledge or belief. (Sign Name and Date)

*Candidate: David A. DenHouten Date: 3/1/21	*Current Treasurer David A. DenHouten Date: 3/1/21

*Designated Record Keeper (If Applicable) Date:

#1622

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 11/24/20 to 12/31/21

1. Committee I.D. Number 75667
84-5060097

2. Committee Name
COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

4. Candidate Last Name: DENHOUTEN First Name: DAVID M.I.: A

4a. Office Sought Including District # or Community Served (If applicable)
PROSECUTING ATTORNEY

4b. County of Residence MISSAUKEE

5. Committee's Mailing Address
P.O. Box 829
LAKE CITY, MI 49651

Area Code and Phone (231) 846-4378
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

6. Treasurer's Name & Residential Address
DEN HOUTEN, DAVID, A
P.O. Box 829
LAKE CITY, MI 49651

Area Code & Phone (231) 846-4378

7. Treasurer's Business Address
P.O. Box 829
LAKE CITY, MI 49651

Area Code and Phone (231) 846-4378

8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)

FILED
28th Circuit Court
AUG 22 2022
Missaukee County

Area Code and Phone

9. **TYPE OF STATEMENT**

9a. ☐ Pre-Election **OR** 9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

- ☐ Primary
- ☐ General
- ☐ Convention
- ☐ Special
- ☐ School
- ☐ Caucus

Date of Election, Convention or Caucus

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

- ☐ July Quarterly
- ☐ October Quarterly

9c. ☒ Annual Statement (2021) Coverage Year

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

9e. **Dissolution of Candidate Committee**

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

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

Effective date of dissolution

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

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

Current Treasurer or Designated Record keeper: DAVID A. DENHOUTEN / [signature] Date 8/21/22
Type or Print Name / Signature

Candidate: DAVID A. DEN HOUTEN / [signature] Date 8/21/22
Type or Print Name / Signature

Authority granted under P.A. 388 of 1976

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 84-50600097

SUMMARY PAGE
CANDIDATE COMMITTEE

2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) $	0	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $	0	(18.) $ 0
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) $	0	(19.) $ 0
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) $	0	(20.) $ 0
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) $	0	(21.) $ 0
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) $	0	(22.) $ 0
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) $	496.68	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) $	0	
c. Unitemized (less than $50.01 each - no Schedule)	(8c.) $	0	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) $	496.68	(23.) $ 496.68
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) $	0	
b. Unitemized (less than $50.01 each - no Schedule)	(10b.) $	0	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) $	0	(24.) $ 0
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed **by** the Committee (Schedule 1E)	(12a.) $	0	
b. Owed **to** the Committee (Schedule 1E)	(12b.) $	0	

BALANCE STATEMENT

13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) $	4,422.87
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + $	0
15. SUBTOTAL Add lines 13 and 14	(15.) = $	4,422.87
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $	496.68
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	3,926.19

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 84-50100097

2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt _____
Name & Address:

N/A

$_____ $_____

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

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

$_____ $_____

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt _____
Name & Address:

$_____ $_____

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

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

$_____ $_____

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal	0
Grand Total of All Schedules 1A (Complete on last page of Schedule)	0

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED OTHER RECEIPTS
SCHEDULE 1A-1

CANDIDATE COMMITTEE

1. Committee I.D. Number 84-50100097

2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address: N/A	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____ Click for Memo Itemization Type	$ _____
Receipt #2 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____ Click for Memo Itemization Type	$ _____
Receipt #3 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____ Click for Memo Itemization Type	$ _____
Receipt #4 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____ Click for Memo Itemization Type	$ _____
Receipt #5 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____ Click for Memo Itemization Type	$ _____
Receipt #6 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____ Click for Memo Itemization Type	$ _____
Receipt #7 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____ Click for Memo Itemization Type	$ _____

Page Subtotal	0
Grand Total of All Schedules 1A -1 (Complete on last page of Schedule)	0

Enter this total on line 4 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 84-5060097

2. Committee Name COMMITTEE TO ELECT DAVID DEN HOUTEN FOR PROSECUTOR

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)

Contribution # 1 PAC Receipt? ☐ Yes

Name & Address:

N/A

If over $100.00 cumulative, please provide:
Occupation:

Employer Name & Business Address:

4. ☐ Endorsement or Guarantee of Bank Loan
☐ Goods Donated or Loaned ☐ Services Donated $ _____ $ _____
☐ Goods or Services Purchased by Candidate or Others
☐ Goods or Services Purchased by Candidate or Others- **LOAN**

Description _____

5. Date Of Receipt: _____

6. **Vendor Name & Address:**

Click Here for Memo Itemization

☐ Fund Raiser Contribution

Contribution # 2 PAC Receipt? ☐ Yes

Name & Address

If over $100.00 cumulative, please provide:
Occupation:

Employer Name & Address:

4. ☐ Endorsement or Guarantee of Bank Loan
☐ Goods Donated or Loaned ☐ Services Donated
☐ Goods or Services Purchased by Candidate or Others $ _____ $ _____
☐ Goods or Services Purchased by Candidate or Others- **LOAN**

Description _____

5. Date Of Receipt: _____

6. **Vendor Name & Address:**

Click Here for Memo Itemization

☐ Fund Raiser Contribution

Contribution #3 PAC Receipt? ☐ Yes

Name & Address:

If over $100.00 cumulative, please provide:
Occupation:

Employer Name & Address:

4. ☐ Endorsement or Guarantee of Bank Loan
☐ Goods Donated or Loaned ☐ Services Donated $ _____ $ _____
☐ Goods or Services Purchased by Candidate or Others
☐ Goods or Services Purchased by Candidate or Others- **LOAN**

Description _____

5. Date Of Receipt: _____

6. **Vendor Name & Address:**

Click Here for Memo Itemization

☐ Fund Raiser Contribution

Page Subtotal	0	
Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	0	Enter this total on line 6 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 84-5000097

2. Committee Name COMMITTEE TO ELECT DAVID DENHOOTEN FOR PROSECUTOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name TCF BANK OF LAKE CITY Address 127 S. MAIN ST. LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: ACCOUNT FEE. ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	11/30/20	$ 3.00
Expenditure #2 Name TCF BANK OF LAKE CITY Address 127 S. MAIN ST. LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: ACCOUNT FEE. ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	12/31/20	$ 3.00
Expenditure #3 Name TCF BANK OF LAKE CITY Address 127 S. MAIN ST. LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: ACCOUNT FEE. ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	1/31/21	$ 3.00
Expenditure #4 Name TCF BANK OF LAKE CITY Address 127 S. MAIN ST. LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: ACCOUNT FEE. ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	2/19/21	$ 3.00
Expenditure #5 Name TCF BANK OF LAKE CITY Address 127 S. MAIN ST. LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: ACCOUNT FEE. ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	3/10/21	$ 3.00

Click Here for Memo Itemization Type

Subtotal this page $15.00

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

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 84-50100097

2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name TCF BANK OF LAKE CITY Address 127 S. MAIN ST LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: ACCOUNT FEE. Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	4/10/21	$ 3.00
Expenditure #2 Name TCF BANK OF LAKE CITY Address 127 S. MAIN ST LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: ACCOUNT FEE. Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	5/18/21	$ 3.00
Expenditure #3 Name TCF BANK OF LAKE CITY Address 127 S. MAIN ST. LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: ACCOUNT FEE. Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	6/10/21	$ 3.00
Expenditure #4 Name TCF BANK OF LAKE CITY Address 127 S. MAIN ST LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: ACCOUNT FEE. Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	7/10/21	$ 3.00
Expenditure #5 Name TCF BANK OF LAKE CITY Address 127 S. MAIN ST. LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: ACCOUNT FEE Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	8/17/21	$ 3.00

Subtotal this page	$15.00
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 84-50100097
2. Committee Name COMMITTEE TO ELECT DANA DENHOOTEN FOR PROSECUTOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name THE MISSAUKEE SENTINEL Address 130 NORTH MAIN STREET LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: NEWSPAPER AD ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	8/27/21	$ 460.68
Expenditure #2 Name TCF BANK OF LAKE CITY Address 127 S. MAIN ST. LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: ACCOUNT FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	9/10/21	$ 3.00
Expenditure #3 Name HUNTINGTON BANK OF LAKE CITY Address 127 S. MAIN ST, LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: ACCOUNT FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/18/21	$ 3.00
Expenditure #4 Name Address ☐ Fund Raiser	Purpose: ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement		$
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement		$

Click Here for Memo Itemization Type

Subtotal this page $466.68

Grand Total of all Schedules 1B (Complete on last page of Schedule) $496.68

Enter this total on line 8a of Summary Page

#1623

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 11/1/22 to 5/20/22

1. Committee I.D. Number 75667
84-5060097

2. Committee Name
COMMITTEE TO ELECT
DAVID DENHOUTEN FOR PROSECUTOR

4. Candidate Last Name: DENHOUTEN First Name: DAVID M.I.: A

4a. Office Sought Including District # or Community Served (If applicable)
PROSECUTING ATTORNEY

4b. County of Residence MISSAUKEE

5. Committee's Mailing Address
P.O. BOX 829
LAKE CITY, MI 49651

Area Code and Phone (231) 846-4378
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

6. Treasurer's Name & Residential Address
DENHOUTEN, DAVID, A
P.O. BOX 829
LAKE CITY, MI 49651

Area Code & Phone (231) 846-4378

7. Treasurer's Business Address
P.O. BOX 829
LAKE CITY, MI 49651

Area Code and Phone (231) 846-4378

8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)

FILED
28th Circuit Court
AUG 22 2022
Missaukee County

Area Code and Phone

9. **TYPE OF STATEMENT**

9a. ☐ Pre-Election **OR** 9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

- ☐ Primary
- ☐ General
- ☐ Convention
- ☐ Special
- ☐ School
- ☐ Caucus

Date of Election, Convention or Caucus

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

- ☐ July Quarterly
- ☐ October Quarterly

9c. ☐ Annual Statement (_____) Coverage Year

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

9e. **Dissolution of Candidate Committee**

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

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

Effective date of dissolution
5/20/22

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

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

Current Treasurer or Designated Record keeper: DAVID A. DENHOUTEN / [signature] Date 8/21/22
Type or Print Name / Signature

Candidate: DAVID A. DENHOUTEN / [signature] Date 8/21/22
Type or Print Name / Signature

Authority granted under P.A. 388 of 1976

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 84-50100097

SUMMARY PAGE
CANDIDATE COMMITTEE

2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) $	0	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $	0	(18.) $ 0
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) $	0	(19.) $ 0
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) $	0	(20.) $ 0
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) $	0	(21.) $ 0
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) $	0	(22.) $ 0
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) $	3,926.19	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) $	0	
c. Unitemized (less than $50.01 each - no Schedule)	(8c.) $	0	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) $	3,926.19	(23.) $ 3,926.19
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) $	0	
b. Unitemized (less than $50.01 each - no Schedule)	(10b.) $	0	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) $	0	(24.) $ 0
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed **by** the Committee (Schedule 1E)	(12a.) $	0	
b. Owed **to** the Committee (Schedule 1E)	(12b.) $	0	

BALANCE STATEMENT

13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) $	3,926.19
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + $	0
15. SUBTOTAL Add lines 13 and 14	(15.) = $	3,926.19
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $	3,926.19
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	0 *

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 84-50100097

2. Committee Name COMMITTEE TO ELECT DAWN DENHOUTEN FOR PROSECUTOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt _____
Name & Address:

N/A

$_____ $_____

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

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

$_____ $_____

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt _____
Name & Address:

$_____ $_____

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

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

$_____ $_____

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal	0
Grand Total of All Schedules 1A (Complete on last page of Schedule)	0

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED OTHER RECEIPTS
SCHEDULE 1A-1

CANDIDATE COMMITTEE

1. Committee I.D. Number 84-50600097

2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address: N/A	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____ Click for Memo Itemization Type	$ _____
Receipt #2 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____ Click for Memo Itemization Type	$ _____
Receipt #3 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____ Click for Memo Itemization Type	$ _____
Receipt #4 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____ Click for Memo Itemization Type	$ _____
Receipt #5 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____ Click for Memo Itemization Type	$ _____
Receipt #6 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____ Click for Memo Itemization Type	$ _____
Receipt #7 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____ Click for Memo Itemization Type	$ _____

Page Subtotal	0
Grand Total of All Schedules 1A -1 (Complete on last page of Schedule)	0

Enter this total on line 4 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK
CANDIDATE COMMITTEE

1. Committee I. D. Number 84-50000097

2. Committee Name COMMITTEE TO ELECT DAVID DEHOOGEN FOR PROSECUTOR

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)

Contribution # 1 PAC Receipt? ☐ Yes

Name & Address:

N/A

If over $100.00 cumulative, please provide:
Occupation:

Employer Name & Business Address:

4. ☐ Endorsement or Guarantee of Bank Loan
☐ Goods Donated or Loaned ☐ Services Donated
☐ Goods or Services Purchased by Candidate or Others
☐ Goods or Services Purchased by Candidate or Others- **LOAN**

$ _____ $ _____

Description _____

5. Date Of Receipt: _____

6. **Vendor Name & Address:**

Click Here for Memo Itemization

☐ Fund Raiser Contribution

Contribution # 2 PAC Receipt? ☐ Yes

Name & Address

If over $100.00 cumulative, please provide:
Occupation:

Employer Name & Address:

4. ☐ Endorsement or Guarantee of Bank Loan
☐ Goods Donated or Loaned ☐ Services Donated
☐ Goods or Services Purchased by Candidate or Others
☐ Goods or Services Purchased by Candidate or Others- **LOAN**

$ _____ $ _____

Description _____

5. Date Of Receipt: _____

6. **Vendor Name & Address:**

Click Here for Memo Itemization

☐ Fund Raiser Contribution

Contribution #3 PAC Receipt? ☐ Yes

Name & Address:

If over $100.00 cumulative, please provide:

Occupation:

Employer Name & Address:

4. ☐ Endorsement or Guarantee of Bank Loan
☐ Goods Donated or Loaned ☐ Services Donated
☐ Goods or Services Purchased by Candidate or Others
☐ Goods or Services Purchased by Candidate or Others- **LOAN**

$ _____ $ _____

Description _____

5. Date Of Receipt: _____

6. **Vendor Name & Address:**

Click Here for Memo Itemization

☐ Fund Raiser Contribution

Page Subtotal	0	
Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	0	Enter this total on line 6 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 84-SD60097

2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name HUNTINGTON BANK Address OF LAKE CITY 127 S. MAIN ST. LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: ACCOUNT FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	11/8/22	$ 5.00
Expenditure #2 Name HUNTINGTON BANK Address OF LAKE CITY 127 S. MAIN ST. LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: ACCOUNT FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	2/5/22	$ 5.00
Expenditure #3 Name HUNTINGTON BANK Address OF LAKE CITY 127 S. MAIN ST. LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: ACCOUNT FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	3/15/22	$ 5.00
Expenditure #4 Name HUNTINGTON BANK Address OF LAKE CITY 127 S. MAIN ST. LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: ACCOUNT FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	4/15/22	$ 5.00
Expenditure #5 Name DAVID A. DENHOUTEN Address P.O. BOX 829 LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: DISSOLUTION OF COMMITTEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	5/20/22	$ 3,906.19

Subtotal this page	3,926.19
Grand Total of all Schedules 1B (Complete on last page of Schedule)	3,926.19

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

#1568

ORIGINAL OR AMENDED

STATEMENT OF ORGANIZATION FORM FOR LOCAL CANDIDATE COMMITTEES FILED WITH A COUNTY CLERK

Information on this form is made public.

1. Committee ID #: 75667
84-50600097

*2. Type of Filing: ☑ ~~Original:~~
☑ Amendment to items: 10, 11 Eff. Date: 1-3-24

*3. Full Name of Committee (must include Candidate's first and last name):
COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

*4a. Candidate Full Name: Last Name: DENHOUTEN First Name: DAVID M.I.: A

*4b. Political Party (if applicable): REPUBLICAN PARTY

*4c. County of Residence: MISSAUKEE

*4d. Office Sought: PROSECUTING ATTORNEY

*4e. District or Jurisdiction: COUNTY

*5. Date Committee was Formed:

*6a. Committee Phone: 231-846-4378

6b. Committee Fax #: N/A

*6c. Committee Email Address: ddenhouten@gmail.com

6d. Committee Website Address:

*7a. Complete Committee Mailing Address (May be PO Box):
PO Box 829, LAKE CITY, MI 49651

*7b. Complete Committee Street Address (May not be PO Box):
209 S. CANAL ST, LAKE CITY, MI 49651

*8. Treasurer Name and Complete Residential Address:
DAVID A. DENHOUTEN, 209 S. CANAL ST., PO Box 829
LAKE CITY, MI 49651

Phone #: 231-846-4378 Email Address: ddenhouten@gmail.com

9. Designated Record Keeper Name and Complete Address:

Phone #: Email Address:

*10. REPORTING WAIVER REQUEST:

☐ **YES, I/We WANT TO APPLY FOR THE REPORTING WAIVER.** The committee does not expect to receive or expend in excess of $1,000.00 in an *election*. I/We understand that if the committee does not spend or received in excess of $1,000.00 in an ***election***, the committee does not owe detailed campaign statements. I/We further understand that the Reporting Waiver will be automatically lost if the committee exceeds the $1,000.00 threshold and all required campaign statements must be filed. ***A Reporting Waiver does not exempt a committee from filing Late Contribution Reports***.

☒ **NO, I/We DO NOT WANT TO APPLY FOR THE REPORTING WAIVER.** The committee expects to receive or expend in excess of $1,000.00 in an *election*. I/We understand that the committee owes detailed campaign statements even if the committee does not spend or receive in excess of $1,000.00 in an election. **I further understand that the Reporting Waiver cannot be requested retroactively to avoid filing requirements and to avoid paying late filing fees.** Further information regarding Reporting Waivers can be found in Appendix C of the Committee Manual.

*11. Name and Address of Depositories or Intended Depositories of committee funds. (Michigan Bank, Credit Union or Savings & Loan Association) While this item must be completed, an account does not have to be opened until the first contribution is received.

*Official Depository (name and address): FOREST AREA FEDERAL CREDIT UNION
101 N MAIN ST, PO BOX 625, LAKE CITY, MI 49651

Secondary Depository (name and address):

12. **Verification:** I/We certify that all reasonable diligence was used in the preparation of the above statement and that the contents are true, accurate and complete to the best of my/our knowledge or belief. If filing campaign statements electronically, we further agree that the signatures below shall serve as the signatures that verify the accuracy and completeness of each statement filed electronically by the committee. I/We certify that all reasonable diligence will be used in the preparation of each statement electronically filed by this committee and that the contents of each statement will be true, accurate and complete to the best of my/our knowledge or belief. (Sign Name and Date)

*Candidate: David A. DenHouten Date: 1/3/24

*Current Treasurer David A. DenHouten Date: 1/3/24

*Designated Record Keeper (If Applicable) Date:

FILED
28th Circuit Court
JAN 03 2024
Missaukee County

1593

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 1/3/24 to 7/21/24

1. Committee I.D. Number
84-50600971 / 75667

2. Committee Name
COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

4. Candidate Last Name: DENHOUTEN First Name: DAVID M.I.: A

4a. Office Sought Including District # or Community Served (If applicable)
MISSAUKEE COUNTY PROSECUTING ATTORNEY

4b. County of Residence MISSAUKEE

5. Committee's Mailing Address
P.O. BOX 829
LAKE CITY, MI 49651

Area Code and Phone (231) 846-4378
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

6. Treasurer's Name & Residential Address
DAVID A. DENHOUTEN
209 S. CANAL ST.
P.O. BOX 829
LAKE CITY, MI 49651

Area Code & Phone 231-846-4378

7. Treasurer's Business Address
N/A

Area Code and Phone

8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)
N/A

FILED
28th Circuit Court
JUL 23 2024
Missaukee County

Area Code and Phone

9. **TYPE OF STATEMENT**

9a. ☑ Pre-Election **OR** 9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

- ☑ Primary
- ☐ General
- ☐ Convention
- ☐ Special
- ☐ School
- ☐ Caucus

Date of Election, Convention or Caucus
8/6/24

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

- ☐ July Quarterly
- ☐ October Quarterly

9c. ☐ Annual Statement (_____) Coverage Year

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

9e. **Dissolution of Candidate Committee**

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

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

Effective date of dissolution

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

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

Current Treasurer or Designated Record keeper DAVID A. DENHOUTEN (Type or Print Name) David A. DenHouten (Signature) Date 07/23/24

Candidate DAVID A. DENHOUTEN (Type or Print Name) David A. DenHouten (Signature) Date 07/23/24

Authority granted under P.A. 388 of 1976

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 84-50600097 / 75667

2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

SUMMARY PAGE
CANDIDATE COMMITTEE

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) $	11,900.00	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $		(18.) $
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) $	0	(19.) $
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) $	11,900.00	(20.) $
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) $	0	(21.) $
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) $		(22.) $
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) $	7,140.61	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) $		
c. Unitemized (less than $50.01 each - no Schedule)	(8c.) $		
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) $	7,140.61	(23.) $
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) $		
b. Unitemized (less than $50.01 each - no Schedule)	(10b.) $		
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) $		(24.) $
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed **by** the Committee (Schedule 1E)	(12a.) $		
b. Owed **to** the Committee (Schedule 1E)	(12b.) $		

BALANCE STATEMENT

13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) $	0
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + $	11,900.00
15. SUBTOTAL Add lines 13 and 14	(15.) = $	11,900.00
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $	7,140.61
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	4,759.39 *

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 84-50600971 75667

2. Committee Name COMMITTEE TO ELECT DAVID DEN HOUTEN FOR PROSECUTOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 1/5/24

Name & Address:
DAVID A. DEN HOUTEN
P.O. BOX 829
LAKE CITY, MI 49651

$ 1,500.00 $ 1,500.00

5. If over $100.00 cumulative, please provide:
Occupation PROSECUTING ATTORNEY Employer MISSAUKEE COUNTY
Business Address 129 S. MAIN ST., LAKE CITY, MI 49651
Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 2/4/24

Name & Address
DAVID A. DEN HOUTEN
P.O. BOX 829
LAKE CITY, MI 49651

$ 400.00 $ 1,900.00

5. If over $100.00 cumulative, please provide:
Occupation PROSECUTING ATTORNEY Employer MISSAUKEE COUNTY
Business Address 129 S. MAIN ST., LAKE CITY, MI 49651
Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 2/27/24

Name & Address:
DAVID A. DEN HOUTEN
P.O. BOX 829
LAKE CITY, MI 49651

$ 500.00 $ 2,400.00

5. If over $100.00 cumulative, please provide:
Occupation PROSECUTING ATTORNEY Employer MISSAUKEE COUNTY
Business Address 129 S. MAIN ST., LAKE CITY, MI 49651
Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 3/25/24

Name & Address
DAVID A. DEN HOUTEN
P.O. BOX 829
LAKE CITY, MI 49651

$ 600.00 $ 3,000.00

5. If over $100.00 cumulative, please provide:
Occupation PROSECUTING ATTORNEY Employer MISSAUKEE COUNTY
Business Address 129 S. MAIN ST., LAKE CITY, MI 49651
Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

Page Subtotal 3,000.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 84-50600971 75667

2. Committee Name COMMITTEE TO ELECT DAVID DEN HOUTEN FOR PROSECUTOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 4/11/24

Name & Address:
DAVID A. DEN HOUTEN
P.O. BOX 829
LAKE CITY, MI 49651

$ 1,500.00 $ 4,500.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation PROSECUTING ATTORNEY Employer MISSAUKEE COUNTY

Business Address 129 S. MAIN ST., LAKE CITY, MI 49651

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

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 4/27/24

Name & Address
DAVID A. DEN HOUTEN
P.O. BOX 829
LAKE CITY, MI 49651

$ 700.00 $ 5,200.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation PROSECUTING ATTORNEY Employer MISSAUKEE COUNTY

Business Address 129 S. MAIN ST., LAKE CITY, MI 49651

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

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 5/9/24

Name & Address:
DAVID A. DEN HOUTEN
P.O. BOX 829
LAKE CITY, MI 49651

$ 500.00 $ 5,700.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation PROSECUTING ATTORNEY Employer MISSAUKEE COUNTY

Business Address 129 S MAIN ST., LAKE CITY, MI 49651

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

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 5/18/24

Name & Address
BRUCE RENDON
4833 RIVER WOODS RD.
LAKE CITY, MI 49651

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

---

Page Subtotal 2,800.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 84-50600971751667

2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 5/18/24

Name & Address:
DAIRE RENDON
4833 RIVER WOODS RD.
LAKE CITY, MI 49651

$ 100.00 $ 100.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 5/24/24

Name & Address
DAVID A. DENHOUTEN
P.O. BOX 829
LAKE CITY, MI 49651

$ 700.00 $ 6,400.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation PROSECUTING ATTORNEY Employer MISSAUKEE COUNTY

Business Address 129 S. MAIN ST., LAKE CITY, MI 49651

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 6/15/24

Name & Address:
DON PASSENGER
1555 ARBORETUM DRIVE, STE 101
GRAND RAPIDS, MI 49546

$ 300.00 $ 300.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation ATTORNEY Employer PASSENGER LAW PLLC

Business Address 1555 ARBORETUM DRIVE, STE 101 GRAND RAPIDS, MI 49546

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 6/24/24

Name & Address
DAVID A. DEN HOUTEN
P.O. BOX 829
LAKE CITY, MI 49651

$ 1,500.00 $ 7,900.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation PROSECUTING ATTORNEY Employer MISSAUKEE COUNTY

Business Address 129 S. MAIN ST. LAKE CITY, MI 49651

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

Page Subtotal 2,000.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 84-50600971751667

2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7/19/24

Name & Address:
DAVID A. DENHOUTEN
P.O. BOX 829
LAKE CITY, MI 49651

$ 3,500.00 $ 11,400.00

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation PROSECUTING ATTORNEY Employer MISSAUKEE COUNTY

Business Address 129 S. MAIN ST., LAKE CITY, MI 49651

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

---

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

Name & Address

$ $

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Employer

Business Address

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

---

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

Name & Address:

$ $

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Employer

Business Address

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

---

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

Name & Address

$ $

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Employer

Business Address

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

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Page Subtotal 3,500.00

Grand Total of All Schedules 1A (Complete on last page of Schedule) 11,900.00

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED OTHER RECEIPTS
SCHEDULE 1A-1
CANDIDATE COMMITTEE

1. Committee I.D. Number 84-50600971/75067
2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address: N/A	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	$ _____ Click for Memo Itemization Type
Receipt #2 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	$ _____ Click for Memo Itemization Type
Receipt #3 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	$ _____ Click for Memo Itemization Type
Receipt #4 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	$ _____ Click for Memo Itemization Type
Receipt #5 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	$ _____ Click for Memo Itemization Type
Receipt #6 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	$ _____ Click for Memo Itemization Type
Receipt #7 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	$ _____ Click for Memo Itemization Type

Page Subtotal	0
Grand Total of All Schedules 1A -1 (Complete on last page of Schedule)	0

Enter this total on line 4 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK
CANDIDATE COMMITTEE

1. Committee I. D. Number 84-50100971/25607

2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: N/A **If over $100.00 cumulative, please provide:** Occupation: Employer Name & Business Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- **LOAN** Description _____ 5. Date Of Receipt: _____ 6. **Vendor Name & Address:** Click Here for Memo Itemization	$ _____	$ _____
Contribution # 2 PAC Receipt? ☐ Yes Name & Address **If over $100.00 cumulative, please provide:** Occupation: Employer Name & Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- **LOAN** Description _____ 5. Date Of Receipt: _____ 6. **Vendor Name & Address:** Click Here for Memo Itemization	$ _____	$ _____
Contribution #3 PAC Receipt? ☐ Yes Name & Address: **If over $100.00 cumulative, please provide:** Occupation: Employer Name & Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- **LOAN** Description _____ 5. Date Of Receipt: _____ 6. **Vendor Name & Address:** Click Here for Memo Itemization	$ _____	$ _____

Page Subtotal	0	
Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	0	

Enter this total on line 6 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 84-50600971751067

2. Committee Name COMMITTEE TO ELECT DAVID DEN HOUTEN FOR PROSECUTOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name FOREST AREA FEDERAL CREDIT UNION Address 101 N. MAIN ST. LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: CHECKS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	1/12/24	$ 28.57
Expenditure #2 Name YELLOW WOOD MEDIA SOLUTIONS Address 112 BIRCH LANE CADILLAC, MI 49601 ☐ Fund Raiser	Purpose: WEBSITE / FACEBOOK DEVELOPMENT ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	2/6/24	$ 1,000.00
Expenditure #3 Name JUDY K GILDE PHOTOGRAPHY Address 1630 W. BLUE RD. MCBAIN, MI 49657 ☐ Fund Raiser	Purpose: PHOTOS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	2/26/24	$ 150.00
Expenditure #4 Name SQUARESPACE Address 225 VARICK ST. NY, NY 10014 ☐ Fund Raiser	Purpose: WEBPAGE FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	3/1/24	$ 23.00
Expenditure #5 Name JUDY K. GILDE PHOTOGRAPHY Address 1630 W. BLUE RD. MCBAIN, MI 49657 ☐ Fund Raiser	Purpose: PHOTOS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	3/14/24	$ 445.20

Subtotal this page 1,646.77

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

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 84-50600971751667

2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name CADILLAC PRINTING CO. Address 214 S. MITCHELL ST. P.O. BOX 157 CADILLAC, MI 49601 ☐ Fund Raiser	Purpose: SIGN LABELS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	3/26/24	$ 307.40
Expenditure #2 Name SQUARESPACE Address 225 VARICK ST. NY, NY 10014 ☐ Fund Raiser	Purpose: WEBPAGE FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	4/1/24	$ 23.00
Expenditure #3 Name VISTAPRINT Address 275 WYMAN ST. WALTHAM, MA 02451 ☐ Fund Raiser	Purpose: DOOR HANGERS / CAR SIGNS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	4/6/24	$ 390.05
Expenditure #4 Name FACEBOOK / META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	4/8/24	$ 10.00
Expenditure #5 Name FACEBOOK / META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	4/9/24	$ 10.00

Subtotal this page 740.45

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

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 84-5016 00971751067
2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name FACEBOOK / META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	4/10/24	$ 10.00
Expenditure #2 Name FACEBOOK / META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	4/11/24	$ 11.00
Expenditure #3 Name FACEBOOK / META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	4/12/24	$ 12.10
Expenditure #4 Name FACEBOOK / META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	4/13/24	$ 13.31
Expenditure #5 Name FACEBOOK / META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	4/14/24	$ 14.64

Subtotal this page	61.05
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 84-50100097/751067
2. Committee Name COMMITTEE TO ELECT DAVID DENHOVEN FOR PROSECUTOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name FACEBOOK / META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	4/15/24	$ 15.00
Expenditure #2 Name CADILLAC PRINTING Address 214 S. MITCHELL ST. P.O. BOX 157 CADILLAC, MI 49601 ☐ Fund Raiser	Purpose: LARGE SIGNS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	4/15/24	$ 1,318.27
Expenditure #3 Name FACEBOOK / META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	4/16/24	$ 16.50
Expenditure #4 Name FACEBOOK / META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	4/18/24	$ 10.37
Expenditure #5 Name FACEBOOK / META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	4/18/24	$ 8.73

Subtotal this page 1,368.87

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

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 84-50000971751667

2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name FACEBOOK	META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	4/20/24	$ 25.00
Expenditure #2 Name FACEBOOK	META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	4/22/24	$ 35.00
Expenditure #3 Name FACEBOOK	META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	4/26/24	$ 50.00
Expenditure #4 Name MISSAUKEE COUNTY CHAMBER OF COMMERCE Address 112 E. JOHN ST. PO BOX H LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: PARADE ENTRY FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	4/30/24	$ 25.00
Expenditure #5 Name MISSAUKEE COUNTY CHAMBER OF COMMERCE Address 112 E. JOHN ST. PO BOX H LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: MEMBERSHIA FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	4/30/24	$ 100.00

Subtotal this page 235.00

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

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 84-50600971751067
2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name SQUARESPACE Address 225 VARICK ST. NY, NY 10014 ☐ Fund Raiser	Purpose: WEBPAGE FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	5/1/24	$ 23.00
Expenditure #2 Name FACEBOOK / META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	5/2/24	$ 75.00
Expenditure #3 Name MISSAUKEE REPUBLICAN COMMITTEE Address P.O. Box 155 LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: TABLE SPONSORSHIP ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	5/13/24	$ 370.00
Expenditure #4 Name FACEBOOK / META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	5/13/24	$ 125.00
Expenditure #5 Name MISSAUKEE SENTINEL Address 130 NORTH MAIN ST LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: NEWSPAPER ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	5/14/24	$ 632.52

Subtotal this page	1,225.52
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 84-50000971756067

2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name FACEBOOK / META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	5/18/24	$ 31.02
Expenditure #2 Name FACEBOOK / META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	5/18/24	$ 7.29
Expenditure #3 Name NORTHERN DISTRICT FAIR Address 221 E. 13TH STREET P.O. BOX 131 CADILLAC, MI 49601 ☐ Fund Raiser	Purpose: EVENT SPONSORSHIP ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	5/29/24	$ 250.00
Expenditure #4 Name SQUARESPACE Address 225 VARICK ST. NY, NY 10014 ☐ Fund Raiser	Purpose: WEBPAGE FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	6/1/24	$ 23.00
Expenditure #5 Name AMERICAN LEGION POST 300 Address 114 N. MAIN ST. LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: GOLF HOLE SPONSORSHIP ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	6/5/24	$ 100.00

Subtotal this page	411.31
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 84-50100971751067
2. Committee Name COMMITTEE TO ELECT DAVID DEANHOUTEN FOR PROSECUTOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name WEXFORD | MISSAUKEE RIGHT TO LIFE Address 5855 S. MOREY RD MCBAIN, MI 49657 ☐ Fund Raiser	Purpose: GOLF HOLE SPONSORSHIP ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	6/7/24	$ 100.00
Expenditure #2 Name FACEBOOK | META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	6/12/24	$ 175.00
Expenditure #3 Name VISTAPRINT Address 275 WYMAN ST. WALTHAM, MA 02451 ☐ Fund Raiser	Purpose: DOOR HANGERS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	6/15/24	$ 205.63
Expenditure #4 Name FACEBOOK | META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	6/18/24	$ 39.15
Expenditure #5 Name LAKE CITY WOMEN'S CLUB Address P.O. BOX 275 LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: GOLF HOLE SPONSORSHIP ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	6/21/24	$ 100.00

Subtotal this page	619.78
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 84-50100971751067

2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name CHUCK'S SHOP AND SAVE Address 1960 S. MOREY RD. LAKE CITY, MI 49651 ☐ Fund Raiser	Purpose: CANDY FOR PARADE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	6/26/24	$ 37.50
Expenditure #2 Name CADILLAC PRINTING Address 214 S. MITCHELL ST. P.O. BOX 157 CADILLAC, MI 49601 ☐ Fund Raiser	Purpose: SIGN LABELS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	6/28/24	$ 474.03
Expenditure #3 Name MCBAIN GRAIN CO. Address 111 W. MAPLE ST. MCBAIN, MI 49657 ☐ Fund Raiser	Purpose: POSTS FOR SIGNS ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	6/28/24	$ 82.55
Expenditure #4 Name SQUARESPACE Address 225 VARICK ST. NY, NY 10014 ☐ Fund Raiser	Purpose: WEBPAGE FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	7/1/24	$ 23.00
Expenditure #5 Name FACEBOOK / META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	7/11/24	$ 175.00

Click Here for Memo Itemization Type

Subtotal this page	792.08
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 84-50600097 | 751067

2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name FACEBOOK	META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	7/18/24	$ 39.78
Expenditure #2 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	_____	$ _____
Expenditure #3 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	_____	$ _____
Expenditure #4 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	_____	$ _____
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	_____	$ _____

Subtotal this page	39.78
Grand Total of all Schedules 1B (Complete on last page of Schedule)	7,140.61

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 7/22/24 to 8/26/24

1. Committee I.D. Number: 84-50600971 / 75067

2. Committee Name: COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

4. Candidate Last Name: DENHOUTEN First Name: DAVID M.I.: A

4a. Office Sought Including District # or Community Served (If applicable): MISSAUKEE COUNTY PROSECUTING ATTORNEY

4b. County of Residence: MISSAUKEE

5. Committee's Mailing Address: PO BOX 829 LAKE CITY, MI 49651

Area Code and Phone: (231) 846-4378

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

6. Treasurer's Name & Residential Address: DAVID A. DEN HOUTEN 209 S. CANAL ST. PO BOX 829 LAKE CITY, MI 49651

Area Code & Phone: 231-846-4378

FILED
28th Circuit Court
SEP 05 2024
Missaukee County

7. Treasurer's Business Address: N/A

Area Code and Phone

8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper): N/A

Area Code and Phone

9. **TYPE OF STATEMENT**

9a. ☐ Pre-Election **OR** 9b. ☑ Post-Election

Pre-Election or Post-Election Statement relates to:

☑ Primary
☐ General
☐ Convention
☐ Special
☐ School
☐ Caucus

Date of Election, Convention or Caucus: 8/6/24

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

☐ July Quarterly
☐ October Quarterly

9c. ☐ Annual Statement (_____) Coverage Year

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

9e. **Dissolution of Candidate Committee**

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

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

Effective date of dissolution

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

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

Current Treasurer or Designated Record keeper: DAVID A. DEN HOUTEN / Type or Print Name — Signature — Date 09/05/24

Candidate: DAVID A. DEN HOUTEN / Type or Print Name — Signature — Date 09/05/24

Authority granted under P.A. 388 of 1976

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 84-50600971756067

2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

SUMMARY PAGE
CANDIDATE COMMITTEE

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) $	0	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $	0	(18.) $
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) $	0	(19.) $
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) $	0	(20.) $
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) $	0	(21.) $
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) $	0	(22.) $
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) $	4,209.41	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) $		
c. Unitemized (less than $50.01 each - no Schedule)	(8c.) $		
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) $	4,209.41	(23.) $
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) $		
b. Unitemized (less than $50.01 each - no Schedule)	(10b.) $		
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) $		(24.) $
DEBTS AND OBLIGATIONS 12. Debts and Obligations			
a. Owed **by** the Committee (Schedule 1E)	(12a.) $		
b. Owed **to** the Committee (Schedule 1E)	(12b.) $		

BALANCE STATEMENT

13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) $	4,759.39
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + $	0
15. SUBTOTAL Add lines 13 and 14	(15.) = $	4,759.39
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $	4,209.41
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	549.98 *

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 84-50600971 / 75607

2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt _____
Name & Address:

N/A

$_____ $_____

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

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

$_____ $_____

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt _____
Name & Address:

$_____ $_____

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

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

$_____ $_____

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal	0
Grand Total of All Schedules 1A (Complete on last page of Schedule)	0

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED OTHER RECEIPTS
SCHEDULE 1A-1

CANDIDATE COMMITTEE

1. Committee I.D. Number 84-50600097/75667

2. Committee Name COMMITTEE TO ELECT DAVID DEN HOUTEN FOR PROSECUTOR

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address: N/A	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____ Click for Memo Itemization Type	$ _____
Receipt #2 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____ Click for Memo Itemization Type	$ _____
Receipt #3 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____ Click for Memo Itemization Type	$ _____
Receipt #4 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____ Click for Memo Itemization Type	$ _____
Receipt #5 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____ Click for Memo Itemization Type	$ _____
Receipt #6 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____ Click for Memo Itemization Type	$ _____
Receipt #7 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____ Click for Memo Itemization Type	$ _____
		Page Subtotal	0
		Grand Total of All Schedules 1A -1 (Complete on last page of Schedule)	0

Enter this total on line 4 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK
CANDIDATE COMMITTEE

1. Committee I. D. Number 84-50600971/75667
2. Committee Name COMMITTEE TO ELECT DAVID DEN HOUTEN PROSECUTOR

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: **If over $100.00 cumulative, please provide:** Occupation: Employer Name & Business Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- **LOAN** Description _____ 5. Date Of Receipt: _____ 6. **Vendor Name & Address:** Click Here for Memo Itemization	$ _____	$ _____
Contribution # 2 PAC Receipt? ☐ Yes Name & Address **If over $100.00 cumulative, please provide:** Occupation: Employer Name & Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- **LOAN** Description _____ 5. Date Of Receipt: _____ 6. **Vendor Name & Address:** Click Here for Memo Itemization	$ _____	$ _____
Contribution #3 PAC Receipt? ☐ Yes Name & Address: **If over $100.00 cumulative, please provide:** Occupation: Employer Name & Address: ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- **LOAN** Description _____ 5. Date Of Receipt: _____ 6. **Vendor Name & Address:** Click Here for Memo Itemization	$ _____	$ _____

Page Subtotal	0
Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	0

Enter this total on line 6 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 84-50600097 / 756067
2. Committee Name COMMITTEE TO ELECT DAVID DEN HOUTEN FOR PROSECUTOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name CADILLAC PRINTING CO. Address 214 S. MITCHELL ST. PO BOX 157 CADILLAC, MI 49601 ☐ Fund Raiser	Purpose: MAILING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	7/29/24	$ 3,476.47
Expenditure #2 Name SQUARESPACE Address 225 VARICK ST NY, NY 10014 ☐ Fund Raiser	Purpose: WEBPAGE FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	8/1/24	$ 23.00
Expenditure #3 Name FACEBOOK / META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	8/5/24	$ 175.00
Expenditure #4 Name FACEBOOK / META Address 1 META WAY MENLO PARK, CA 94025 ☐ Fund Raiser	Purpose: ADVERTISING ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	8/18/24	$ 24.94
Expenditure #5 Name YELLOW WOOD MEDIA SOLUTIONS Address 112 BIRCH CANE CADILLAC, MI 49601 ☐ Fund Raiser	Purpose: WEBSITE / FACEBOOK PAGE DEVELOPMENT ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	8/26/24	$ 510.00

Subtotal this page	4,209.41
Grand Total of all Schedules 1B (Complete on last page of Schedule)	4,209.41

Enter this total on line 8a of Summary Page

#1596

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 8/27/24 to 10/20/24

1. Committee I.D. Number
84-50600971 75667

2. Committee Name
COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

4. Candidate Last Name: DENHOUTEN First Name: DAVID M.I.: A

4a. Office Sought Including District # or Community Served (If applicable)
MISSAUKEE COUNTY PROSECUTING ATTORNEY

4b. County of Residence MISSAUKEE

5. Committee's Mailing Address
PO Box 829
LAKE CITY, MI 49651

Area Code and Phone (231) 846-4378
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

6. Treasurer's Name & Residential Address
DAVID A. DENHOUTEN
209 S. CANAL ST.
PO Box 829
LAKE CITY, MI 49651

FILED
28th Circuit Court
OCT 21 2024
Missaukee County

Area Code & Phone 231-846-4378

7. Treasurer's Business Address
N/A

Area Code and Phone

8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)
N/A

Area Code and Phone

9. TYPE OF STATEMENT

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

Pre-Election or Post-Election Statement relates to:

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

Date of Election, Convention or Caucus
11/5/24

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

- [ ] July Quarterly
- [ ] October Quarterly

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

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

9e. **Dissolution of Candidate Committee**

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

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

Effective date of dissolution

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

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

Current Treasurer or Designated Record keeper: DAVID A. DENHOUTEN (Type or Print Name) [signature] (Signature) Date 10/21/24

Candidate: DAVID A. DENHOUTEN (Type or Print Name) / [signature] (Signature) Date 10/21/24

Authority granted under P.A. 388 of 1976

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 84-50600971751067

2. Committee Name COMMITTEE TO ELECT DAVID DEN HOUTEN FOR PROSECUTOR

SUMMARY PAGE
CANDIDATE COMMITTEE

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) $		
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $		(18.) $
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) $		(19.) $
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) $		(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			
a. Itemized (Schedule 1B, Column 6)	(8a.) $	46.00	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) $		
c. Unitemized (less than $50.01 each - no Schedule)	(8c.) $		
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) $	46.00	(23.) $
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) $		
b. Unitemized (less than $50.01 each - no Schedule)	(10b.) $		
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) $		(24.) $
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed **by** the Committee (Schedule 1E)	(12a.) $		
b. Owed **to** the Committee (Schedule 1E)	(12b.) $		

BALANCE STATEMENT

13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) $	549.98
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + $	0
15. SUBTOTAL Add lines 13 and 14	(15.) = $	549.98
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $	46.00
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	503.98 *

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 84-50600971756067

2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt _____
Name & Address:

N/A

$_____ $_____

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

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

$_____ $_____

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt _____
Name & Address:

$_____ $_____

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

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

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

$_____ $_____

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation _____ Employer _____

Business Address _____

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

Page Subtotal 0

Grand Total of All Schedules 1A (Complete on last page of Schedule) 0

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED OTHER RECEIPTS
SCHEDULE 1A-1

CANDIDATE COMMITTEE

1. Committee I.D. Number 84-50600097/750607

2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

3. Name & Address From Whom Received	4. Date of Receipt	5. Type of Receipt	6. Amount
Receipt #1 Name & Address: NIA	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	$ _____ Click for Memo Itemization Type
Receipt #2 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	$ _____ Click for Memo Itemization Type
Receipt #3 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	$ _____ Click for Memo Itemization Type
Receipt #4 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	$ _____ Click for Memo Itemization Type
Receipt #5 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	$ _____ Click for Memo Itemization Type
Receipt #6 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	$ _____ Click for Memo Itemization Type
Receipt #7 Name & Address:	Date of Receipt _____ ☐ Fund Raiser	☐ Loan from a Lending Institution ☐ Interest ☐ Refund \Rebate ☐ Other (Specify) _____	$ _____ Click for Memo Itemization Type

Page Subtotal	0
Grand Total of All Schedules 1A -1 (Complete on last page of Schedule)	0

Enter this total on line 4 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK
CANDIDATE COMMITTEE

1. Committee I. D. Number 84-50600097/75667

2. Committee Name COMMITTEE TO ELECT DAVID DEN HOUTEN PROSECUTOR

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: N/A **If over $100.00 cumulative, please provide:** Occupation: Employer Name & Business Address:	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- **LOAN** Description _____ 5. Date Of Receipt: _____ 6. **Vendor Name & Address:** Click Here for Memo Itemization ☐ Fund Raiser Contribution	$ _____	$ _____
Contribution # 2 PAC Receipt? ☐ Yes Name & Address **If over $100.00 cumulative, please provide:** Occupation: Employer Name & Address:	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- **LOAN** Description _____ 5. Date Of Receipt: _____ 6. **Vendor Name & Address:** Click Here for Memo Itemization ☐ Fund Raiser Contribution	$ _____	$ _____
Contribution #3 PAC Receipt? ☐ Yes Name & Address: **If over $100.00 cumulative, please provide:** Occupation: Employer Name & Address:	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- **LOAN** Description _____ 5. Date Of Receipt: _____ 6. **Vendor Name & Address:** Click Here for Memo Itemization ☐ Fund Raiser Contribution	$ _____	$ _____

Page Subtotal	0	
Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	0	

Enter this total on line 6 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 84-50600971 75667

2. Committee Name COMMITTEE TO ELECT DAVID DENHOUTEN FOR PROSECUTOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name SQUARE SPACE Address 225 VARICK ST NY, NY 10014 ☐ Fund Raiser	Purpose: WEBPAGE FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	9/1/24	$ 23.00
Expenditure #2 Name SQUARE SPACE Address 225 VARICK ST NY, NY 10014 ☐ Fund Raiser	Purpose: WEBPAGE FEE ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/1/24	$ 23.00
Expenditure #3 Name Address ☐ Fund Raiser	Purpose: ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement		$
Expenditure #4 Name Address ☐ Fund Raiser	Purpose: ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement		$
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement		$

Click Here for Memo Itemization Type

Subtotal this page	46.00
Grand Total of all Schedules 1B (Complete on last page of Schedule)	46.00

Enter this total on line 8a of Summary Page

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 10/21/24 to 11/25/24

1. Committee I.D. Number
84-5060097 / 75667

2. Committee Name
COMMITTEE TO ELECT
DAVID DENHOUTEN FOR PROSECUTOR

4. Candidate Last Name: DENHOUTEN First Name: DAVID M.I.: A

4a. Office Sought Including District # or Community Served (If applicable)
MISSAUKEE COUNTY
PROSECUTING ATTORNEY

4b. County of Residence MISSAUKEE

5. Committee's Mailing Address
PO BOX 829
LAKE CITY, MI 49651

Area Code and Phone (231) 846-4378
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

6. Treasurer's Name & Residential Address
DAVID A. DENHOUTEN
209 S. CANAL ST.
PO BOX 829
LAKE CITY, MI 49651

Area Code & Phone (231) 846-4378

7. Treasurer's Business Address
N/A

Area Code and Phone

8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)
N/A

FILED
28th Circuit Court
NOV 25 2024
Missaukee County

Area Code and Phone

9. **TYPE OF STATEMENT**

9a. ☐ Pre-Election **OR** 9b. ☑ Post-Election

Pre-Election or Post-Election Statement relates to:

- ☐ Primary
- ☑ General
- ☐ Convention
- ☐ Special
- ☐ School
- ☐ Caucus

Date of Election, Convention or Caucus
11/5/24

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

- ☐ July Quarterly
- ☐ October Quarterly

9c. ☐ Annual Statement (_____) Coverage Year

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

9e. **Dissolution of Candidate Committee**

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

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

Effective date of dissolution

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

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

Current Treasurer or Designated Record keeper: DAVID A. DENHOUTEN / [signature] Date 11/25/24
Type or Print Name / Signature

Candidate: DAVID A. DENHOUTEN / [signature] Date 11/25/24
Type or Print Name / Signature

Authority granted under P.A. 388 of 1976