MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

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: 11/26/24 to 12/31/24

1. Committee I.D. Number
202005

2. Committee Name
Committee to Keep Scott Koerner Prosecutor

4. Candidate Last Name: Koerner First Name: Scott M.I.: A.

4a. Office Sought Including District # or Community Served (If applicable)
Prosecuting Attorney

4b. County of Residence **SHIAWASSEE**

5. Committee's Mailing Address
601 Camrose Court
Laingsburg, MI 48848

Area Code and Phone 517-614-3809
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
Heather Baker
426 N. Iris Lane
Laingsburg, MI 48848

Area Code & Phone 517-712-7812

7. Treasurer's Business Address
2630 W. Howell Road
Mason, MI 48854

Area Code and Phone 517-244-1234

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

Filed
JAN 31 2025
Caroline D. Wilson
Clerk of Shiawassee Co. Michigan

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 (2024) 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: Heather Baker (Type or Print Name) / Heather Baker (Signature) Date: 1/29/25

Candidate: Scott Koerner (Type or Print Name) / Scott K (Signature) Date: 1/29/25

Authority granted under P.A. 388 of 1976

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

1. Committee I.D. Number 202005

SUMMARY PAGE
CANDIDATE COMMITTEE

2. Committee Name Committee to Keep Scott Koerner Prosecutor

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) $	0.00	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $	0.00	(18.) $ 19775.43
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) $	0.00	(19.) $ 0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) $	0.00	(20.) $ 19775.43
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) $	5696.45	(21.) $ 6739.10
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) $	0.00	(22.) $ 0.00
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) $	671.00	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) $	0.00	
c. Unitemized (less than $50.01 each - no Schedule)	(8c.) $	0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) $	671.00	(23.) $ 19656.25
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) $	0.00	
b. Unitemized (less than $50.01 each - no Schedule)	(10b.) $	0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) $	0.00	(24.) $ 0.00
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed **by** the Committee (Schedule 1E)	(12a.) $	5696.45	
b. Owed **to** the Committee (Schedule 1E)	(12b.) $	0.00	

BALANCE STATEMENT

13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) $	790.18
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + $	0.00
15. SUBTOTAL Add lines 13 and 14	(15.) = $	790.18
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $	671.00
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	119.18 *

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 202005

2. Committee Name Committee To Keep Scott Koerner Prosecutor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Robert Bowden Photography Address 7444 Dexter Ann Arbor Road, Suite B3 Dexter, MI 48130 ☐ Fund Raiser	Purpose: website campaign advertising ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	12/20/24	$ 671.00
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	671.00
Grand Total of all Schedules 1B (Complete on last page of Schedule)	671.00

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 202005

2. Committee Name Committee To Keep Scott Koerner Prosecutor

This Schedule itemizes:

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

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? [ ] Yes Owed to or by: Scott Koerner 601 Camrose Court Laingsburg, MI 48848	4. Type: loan 5. **Date Debt Was Incurred**: 12/24/24 6. **Original Amount of Debt**: $ 5696.45	$ $ $ $ $	$ 0	$ 5696.45 [ ] FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				
Debt #2 Corp? [ ] Yes Owed to or by:	4. Type: 5. **Date Debt Was Incurred**: 6. **Original Amount of Debt**: $	$ $ $ $ $	$	$ [ ] FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				
Debt #3 Corp? [ ] Yes Owed to or by:	4. Type: 5. **Date Debt Was Incurred**: 6. **Original Amount of Debt**: $	$ $ $ $ $	$	$ [ ] FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				

Page Subtotal (Outstanding debt) 5696.45

Grand Total of all Schedules 1E 5696.45
(Complete on last page of Schedule showing amounts owed by or to the committee)

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

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED IN-KIND CONTRIBUTIONS
SCHEDULE 1-IK
CANDIDATE COMMITTEE

1. Committee I. D. Number 202005

2. Committee Name Committee To Keep Scott Koerner 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: Scott Koerner 601 Camrose Court **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 political mailing 5. Date Of Receipt: 12/24/24 6. **Vendor Name & Address:** Robert Bowden Photography 7444 Dexter Ann Arbor Road, Suite B3 Dexter, MI 48130 Click for Memo Itemization Type	$ 5696.45	$ 5696.45
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	5696.45	5696.45
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	5696.45	

Enter this total on line 6 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

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
202005

2. Committee Name
Committee to Keep Scott Koerner Prosecutor

4. Candidate Last Name: Koerner First Name: Scott M.I.: A.

4a. Office Sought Including District # or Community Served (If applicable)
Prosecuting Attorney

4b. County of Residence **SHIAWASSEE**

5. Committee's Mailing Address
601 Camrose Court
Laingsburg, MI 48848

Area Code and Phone 517-614-3809
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
Heather Baker
426 N. Iris Lane
Laingsburg, MI 48848

Area Code & Phone 517-712-7812

7. Treasurer's Business Address
2630 W. Howell Road
Mason, MI 48854

Area Code and Phone 517-244-1234

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

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.

Filed
DEC 05 2024
Caroline D. Wilson
Clerk of Shiawassee Co. Michigan

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: Heather Baker (Type or Print Name) / Heather Baker (Signature) Date 12/4/24

Candidate: Scott Koerner (Type or Print Name) / Scott Koerner (Signature) Date 12/4/24

Authority granted under P.A. 388 of 1976

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

1. Committee I.D. Number 202005

SUMMARY PAGE
CANDIDATE COMMITTEE

2. Committee Name Committee to Keep Scott Koerner Prosecutor

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) $	0.00	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $	0.00	(18.) $ 19775.43
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) $	0.00	(19.) $ 0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) $	0.00	(20.) $ 19775.43
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) $	0.00	(21.) $ 1042.65
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) $	0.00	(22.) $ 0.00
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) $	0.00	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) $	0.00	
c. Unitemized (less than $50.01 each - no Schedule)	(8c.) $	0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) $	0.00	(23.) $ 18985.25
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) $	0.00	
b. Unitemized (less than $50.01 each - no Schedule)	(10b.) $	0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) $	0.00	(24.) $ 0.00
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.) $	790.18
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + $	0.00
15. SUBTOTAL Add lines 13 and 14	(15.) = $	790.18
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $	0.00
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	790.18 *

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

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
202005

2. Committee Name
Committee to Keep Scott Koerner Prosecutor

4. Candidate Last Name: Koerner First Name: Scott M.I.: A.

4a. Office Sought Including District # or Community Served (If applicable)
Prosecuting Attorney

4b. County of Residence **SHIAWASSEE**

5. Committee's Mailing Address
601 Camrose Court
Laingsburg, MI 48848

Area Code and Phone 517-614-3809
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
Heather Baker
426 N. Iris Lane
Laingsburg, MI 48848

Area Code & Phone 517-712-7812

7. Treasurer's Business Address
2630 W. Howell Road
Mason, MI 48854

Area Code and Phone 517-244-1234

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

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

Filed
OCT 25 2024
Caroline D. Wilson
Clerk of Shiawassee Co. Michigan

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: Heather Baker (Type or Print Name) / Heather Baker (Signature) Date: 10/24/24

Candidate: Scott Koerner (Type or Print Name) / Scott Koerner (Signature) Date: 10/24/24

Authority granted under P.A. 388 of 1976

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

1. Committee I.D. Number 202005

SUMMARY PAGE
CANDIDATE COMMITTEE

2. Committee Name Committee to Keep Scott Koerner Prosecutor

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) $ 0.00	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $ 0.00	(18.) $ 19775.43
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) $ 0.00	(19.) $ 0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) $ 0.00	(20.) $ 19775.43
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) $ 0.00	(21.) $ 1042.65
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) $ 0.00	(22.) $ 0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) $ 3995.81	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) $ 0.00	
c. Unitemized (less than $50.01 each - no Schedule)	(8c.) $ 0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) $ 3995.81	(23.) $ 18985.25
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) $ 0.00	
b. Unitemized (less than $50.01 each - no Schedule)	(10b.) $ 0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) $ 0.00	(24.) $ 0.00
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.) $ 4785.99
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + $ 0.00
15. SUBTOTAL Add lines 13 and 14	(15.) = $ 4785.99
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $ 3995.81
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $ 790.18 *

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 202005

2. Committee Name Committee to Keep Scott Koerner Prosecutor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Roe Strategic LLC Address 3891 Oakhills Drive Bloomfield Hills, MI 48301 ☐ Fund Raiser	Purpose: advertising ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/10/24 Date Click Here for Memo Itemization Type	$ 843.79
Expenditure #2 Name Robert Bowden Photography Address 7444 Dexter Ann Arbor Road, Suite B3 Dexter, MI 48130 ☐ Fund Raiser	Purpose: campaign signs ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/11/24 Date Click Here for Memo Itemization Type	$ 3152.02
Expenditure #3 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date 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	_____ Date 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	_____ Date Click Here for Memo Itemization Type	$ _____

Subtotal this page	3995.81
Grand Total of all Schedules 1B (Complete on last page of Schedule)	3995.81

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

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

1. Committee I.D. Number
202005

2. Committee Name
Committee to Keep Scott Koerner Prosecutor

4. Candidate Last Name: Koerner First Name: Scott M.I.: A.

4a. Office Sought Including District # or Community Served (If applicable)
Prosecuting Attorney

4b. County of Residence **SHIAWASSEE**

5. Committee's Mailing Address
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Laingsburg, MI 48848

Area Code and Phone 517-614-3809
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.

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Laingsburg, MI 48848

Area Code & Phone 517-712-7812

7. Treasurer's Business Address
2630 W. Howell Road
Mason, MI 48854

Area Code and Phone 517-244-1234

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

Filed
SEP 09 2024
Caroline D. Wilson
Clerk of Shiawassee Co. Michigan

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.

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Effective date of dissolution

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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: Heather Baker (Type or Print Name) / Heather Baker (Signature) Date 9/9/24

Candidate: Scott Koerner (Type or Print Name) / Scott K (Signature) Date 9/9/24

Authority granted under P.A. 388 of 1976

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 202005

2. Committee Name Committee to Keep Scott Koerner Prosecutor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Smalltown Values PAC Address P.O. Box 243 Morrice, MI 48857 ☐ Fund Raiser	Purpose: donation ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	7/30/24	$ 170.00
Expenditure #2 Name The Independent Address 1970 W. M-21 Owosso, MI 48867 ☐ Fund Raiser	Purpose: newspaper advertisement Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	8/6/24	$ 892.00
Expenditure #3 Name Address ☐ Fund Raiser	Purpose: Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement		$
Expenditure #4 Name Address ☐ Fund Raiser	Purpose: Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement		$
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement		$

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Clerk of Shiawassee Co. Michigan

Subtotal this page	1062.00
Grand Total of all Schedules 1B (Complete on last page of Schedule)	1062.00

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

1. Committee I.D. Number 202005

SUMMARY PAGE
CANDIDATE COMMITTEE

2. Committee Name Committee to Keep Scott Koerner Prosecutor

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) $	0.00	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $	0.00	(18.) $ 19775.43
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) $	0.00	(19.) $ 0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) $		(20.) $ 19775.43
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) $	0.00	(21.) $ 1042.65
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) $	0.00	(22.) $ 0.00
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) $	1062.00	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) $	0.00	
c. Unitemized (less than $50.01 each - no Schedule)	(8c.) $	0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) $	1062.00	(23.) $ 14989.44
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) $	0.00	
b. Unitemized (less than $50.01 each - no Schedule)	(10b.) $	0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) $	0.00	(24.) $ 0.00
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.) $	5847.99
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + $	0.00
15. SUBTOTAL Add lines 13 and 14	(15.) = $	5847.99
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $	1062.00
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	4785.99 *

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MI Shiawassee Koerner, Scott EY 2024

The remainder of the documents may be obtained at the following address:

https://app.box.com/s/dt8uxkx2sek95ffljfx5qw0h7qstjqrx