CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1	Filer ID (Ethics Commission Filers)		2 Total pages filed:	OFFICE USE ONLY		
			3			
3	CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST Marvn NICKNAME LAST Sutton	MI	Date Received	CEIVED -	
4	ORIGINAL REPORT TYPE	July 15 Exc	onoff Other (specify) ceeded \$500 limit th day after treasurer spointment (officeholder only) nal report	Date Hand-delivered of Receipt #	r Date Postmarked Amount \$	
	4 / 27 / 2017				Date Imaged	
6	6 EXPLANATION OF CORRECTION Cover Sheet Pg 2, Block 2- Calculation error. Corrected total policital contributions amount \$3,625 Cover Sheet Pg 3, Block 1- Calculation error. Corrected Scheduel A1 subtotal amount \$3,625					
7	7 AFFIDAVIT I swear, or affirm, under penalty of perjury, that this corrected report is true and correct. Check ONLY if applicable:					
	Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report. Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith. AFFIX NOTARY STAMP / SEAL ABOVE Signature of Candidate or Officeholder					
	Sworn to and subscribed before me, by the said Marvin Sutton, this the 5th day of June. 20 1, to certify which, witness my hand and seal of office. Signature of officer administering oath Admin Printed name of officer administering oath Title of officer administering oath					
	Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections					