



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FILED

13 OCT 23 AM 10:30

CANDIDATE COMMITTEE
COVER PAGE

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

CARMELLA SABAUGH
MACOMB COUNTY CLERK
MT. CLEMENS, MICHIGAN

FOR OFFICIAL USE ONLY

3. This Statement covers From: 8-27-13 to 10-20-13
Mo Day Year Mo Day Year

1. Committee I.D. Number 139040	4. Candidate Last Name Accica First Name Peter M.I. A
2. Committee Name Committee To Elect Peter Accica	4a. Office Sought Including District # or Community Served (If applicable) St Clair Shores City Council
5. Committee's Mailing Address 28005 ELBA St Clair Shores MI 48081 Area Code and Phone 586-445-8161 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.	4b. County of Residence Macomb
6. Treasurer's Name & Residential Address Denise Accica 28005 ELBA St Clair Shores Area Code & Phone 586-445-8161	
7. Treasurer's Business Address 28005 ELBA St Clair Shores MI 48081 Area Code and Phone 586-445-8161	8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) Antoinette Mocer 22431 Rosedale St Clair Shores MI 48080 Area Code and Phone 586-778-3910

9. TYPE OF STATEMENT

9a. ☐ Pre-Election

OR

9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

☐ Primary

☐ General

☐ Convention

☐ School

☐ Special

☐ Caucus

Date of Election, Convention or Caucus

11 5 2013
Month Day Year

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

Effective Date of Dissolution

Month Day Year

By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

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

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.

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 **Antoinette Mocer** **Antoinette Mocer** Date **10 23 13**
Type or Print Name Signature Mo Day Year
Candidate **Peter Accica** **Peter Accica** Date **10 21 13**
Type or Print Name Signature Mo Day Year



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**SUMMARY PAGE
CANDIDATE COMMITTEE**

1. Committee I.D. Number

139040

2. Committee Name

CTE Peter Accia

RECEIPTS

3. Contributions

a. Itemized (Schedule 1A - Column 6)

(3a.) \$

10,465

b. Unitemized (less than \$20.01 each - no Schedule)

(3b.) \$

NOT APPLICABLE

c. Subtotal of "Contributions"

(3c.) \$

4. Other Receipts (Schedule 1A -1, Column 6)

(4.) \$

5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS
(Add Line 3c + Line 4)

(5.) \$

IN-KIND CONTRIBUTIONS & EXPENDITURES

6. In-Kind Contributions (Schedule 1-IK, Column 7)

(6.) \$

225.00

7. In-Kind Expenditures (Schedule 1B-IK, Column 6)

(7.) \$

EXPENDITURES

8. Expenditures

a. Itemized (Schedule 1B, Column 6)

(8a.) \$

6100.38

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.) \$

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.) \$

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.) \$

3509.38

14. Amount received during reporting period
(Line 5, Total Contributions & Other Receipts)

(14.) + \$

10,465.00

15. SUBTOTAL Add lines 13 and 14

(15.) = \$

13,974.38

16. Amount expended during reporting period
(Add lines 9 and 11)

(16.) - \$

6,100.38

17. ENDING BALANCE

(17.) \$

7,874.00

(Subtract line 16 from line 15)

Column I
This Period

Column II
Cumulative this election cycle

(18.) \$

(19.) \$

(20.) \$

(21.) \$

(22.) \$

(23.) \$

(24.) \$



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

139040

2. Committee Name

CTE Peter Accia

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? <input checked="" type="checkbox"/> YES	4. Date of Receipt	9-16-2013
Name & Address: Bricklayers Local NO 1 Michigan Pac 21031 Ryan Road Warren MI 48091		6. Amount	\$250.00
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	9-11-13
Name & Address: Carl Colo 25884 Norwell St New Baltimore MI 48051		6. Amount	\$100.00
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	9-11-13
Name & Address: Kelly Ward 16315 Camden Wood, Hawer MI 48183		6. Amount	\$100.00
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	9-10-13
Name & Address: Charles A Kulkawka 603 N. Sixth Street St Clair MI 48079		6. Amount	\$60.00
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

510.00

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

139040

2. Committee Name

CTE Peter Accia

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)
<p>3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-16-13</u></p> <p>Name & Address: <u>Michael Condit</u> <u>12336 Moers</u> <u>Slater Heights MI 48313</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>75.00</u>	
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-8-13</u></p> <p>Name & Address: <u>Carol Weigel</u> <u>22025 Benjamin</u> <u>EC5 MI 48081</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>Teacher</u> Employer <u>Lake Shore Schools</u></p> <p>Business Address <u>Mosionie Jefferson</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>75.00</u>	
<p>3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-7-13</u></p> <p>Name & Address: <u>Fred Miller</u> <u>162 Riverside Dr</u> <u>Mount Clemens MI 48043</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>Commissioner</u> Employer <u>Macomb County</u></p> <p>Business Address <u>1 Main Mount Clemens</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	
<p>3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8-27-13</u></p> <p>Name & Address: <u>James Horvath II</u> <u>3840 West Point</u> <u>Dearborn MI 48124</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>BA</u> Employer <u>Iron workers 25</u></p> <p>Business Address <u>Transx Drive Novi MI 48376</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	

Page Subtotal

350

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

860.00

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

139040

2. Committee Name

CTE Peter Accia

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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8-27-13</u> Name & Address: <u>John Anania</u> <u>29713 Oakgrove St</u> <u>SCS MI 48082</u>		\$ <u>50.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-2-13</u> Name & Address: <u>Frank Landa</u> <u>30225 Rosebriar</u> <u>SCS MI 48082</u>		\$ <u>60.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>NONE</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-8-13</u> Name & Address: <u>Doreen Hales</u> <u>20524 Benjamin</u> <u>SCS MI 48081</u>		\$ <u>60.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-5-13</u> Name & Address: <u>Ronald Michael</u> <u>31278 Tecla Dr</u> <u>Warren MI 48088</u>		\$ <u>100.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>NONE</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

270.00

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

1130

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

139040

2. Committee Name

CTE Peter Accia

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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	8-30-13
Name & Address: Tim Ochalek 47450 Stephanie Macomb MI 48044		\$100.00	
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation BA Employer Buckley, LLC 1			
Business Address 21031 Ryan Road Warren MI 48091			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	9-10-13
Name & Address: Abigail Novack 778 Passive Drive Rochester Hills MI 48306		\$100.00	
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation Attorney Employer Nawaz Tesija			
Business Address 2000 Town Center Southfield MI 48075			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	9-11-13
Name & Address: Gerald Donnelly 24909 Staveland Dr SCS MI 48080		\$30.00	
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt	9-5-13
Name & Address: Michigan Building & Construction Trade Council Pac Account 435 S Washington Square Lansing MI 48933		\$250.00	
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

480.00

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

1610.00

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

139040

2. Committee Name

CTE Peter Accia

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

9-11-13

Name & Address:

Thomas Margitish
22739 Millerbach St
SCS MI 48081

\$ 50.00

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

9-11-13

Name & Address:

Jones Macorpi
22954 Allen Rd
SCS MI 48080

\$ 30.00

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 #3

PAC Receipt? ☐ YES

4. Date of Receipt

9-11-13

Name & Address:

Frank Belvedere
19813 Sussex Street
SCS MI 48081

\$ 30.00

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 #4

PAC Receipt? ☐ YES

4. Date of Receipt

9-11-13

Name & Address:

Tim Chalek
47450 Stephanie
Meredon MI 48044

\$ 30.00

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

140.00

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

1750.00

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

139040

2. Committee Name

CTE Peter Accica

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: Dennis Marentette 28712 Rockwood SCS MI 48081	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt 9-11-13	\$35.00	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: Ralph Con Siglip 15984 Chelmford Clinton Twp MI 48038	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt 9-11-13	\$50.00	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: Francisco Rodriguez 3512 W. H. H. Lake Waterford MI 48328	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt 9-11-13	\$40.00	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 Name & Address: Antoinette Maceo 22431 Rosedale SCS MI 48080	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt 9-11-13	\$50.00	
5. If over \$100.00 cumulative, please provide: Occupation Accountant Employer BHP CPA'S Business Address 21420 Greater Mack SCS MI 48080 Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

175.00

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

1925.00

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

139040

2. Committee Name

CTE Peter Accia

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

9-11-13

Name & Address

Pauline Accia
15440 Sherwood Lane
Frasco MI 48026

\$ 50.00

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

9-11-13

Name & Address

David Coniglio
22469 Revere Street
SCS MI 48080

\$ 50.00

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 #3 PAC Receipt? ☐ YES

4. Date of Receipt

9-11-13

Name & Address

Brook Mark Gierack
19603 St. Francis
Livonia MI 48152

\$ 30.00

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 #4 PAC Receipt? ☐ YES

4. Date of Receipt

9-11-13

Name & Address

Ada Dickie
1463 Hollywood
Grosse Pointe MI 48236

\$ 25.00

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

135.00

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

2080.00

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

139040

2. Committee Name

CTE Peter Accia

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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: Steven Fox 48436 Brittany Park Drive Macon, MI 48044			\$ 25.00
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: Joyce Lalonde 24801 Rosalind East Pointe MI 48021			\$ 30.00
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: International Union of Painters at Allied Trades District Council 14587 Bazel Ave Warren MI 48088			\$ 50.00
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: Michelle DeBeaumont 39850 Brylor Court Clinton Township MI 48038			\$ 50.00
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

355.00

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

2435.00

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

139040

2. Committee Name

CTE Peter Accia

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? <input checked="" type="checkbox"/> YES	4. Date of Receipt	
Name & Address: Michigan Roofers Local 149 PAC 1640 Porter St Detroit, MI 48216			
5. If over \$100.00 cumulative, please provide:			
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt	
Name & Address: Pipefitters Local 636 Political Action Committee 30600 Northwestern Hwy Farmington MI 48334			
5. If over \$100.00 cumulative, please provide:			
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt	
Name & Address: Plumbers Local 98 State PAC Fund 21353			
5. If over \$100.00 cumulative, please provide:			
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	
Name & Address: Asbestos Workers No 25 21353 Bridge St Southfield MI 48034			
5. If over \$100.00 cumulative, please provide:			
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

550.00

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

2485.00

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

139040

2. Committee Name

CTE Peter Accia

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

9-13-13

Name & Address:

John Tesija
733 Westview
Bloomfield Hills MI 48304

\$ 100.00 \$

5. If over \$100.00 cumulative, please provide:

Occupation

Attorney

Employer

Naver Tesija

Click Here for Memo Itemization

Business Address

2000 Town Center Southfield MI 48075

Type of Contribution:

☐ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt

9-17-13

Name & Address

Edd Bruley
38167 Redde
Clawson Township MI 48036

\$ 40.00 \$

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☐ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt

9-20-13

Name & Address:

Doug Getelson
13912 St. Margaret
SCS MI 48082

\$ 35.00 \$

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☐ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt

9-18-13

Name & Address

Charly Taramina
2030 Chalgrove Dr
Troy MI 48098

\$ 50.00 \$

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☐ Direct

☐ Loan from a person

☒ Fund Raiser

Page Subtotal

225.00

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

3210.00

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

139040

2. Committee Name

CTE Peter Accia

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? <input type="checkbox"/> YES	4. Date of Receipt	9-12-13
Name & Address: JR Keller 82-728 Detroit SCS MI 48082		\$ 50.00	\$
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	9-12-13
Name & Address: Tony Parker 17896 Groove Roseville MI 48066		\$ 50.00	\$
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation BA Employer Painter Local 1			
Business Address 14587 Barber Ave Warren MI 48088			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	9-12-13
Name & Address: George Lagree 13857 Castle Dr Warren MI 48088		\$ 50.00	\$
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation BA Employer Painter Local 1			
Business Address 14587 Barber Ave Warren MI 48088			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	9-12-13
Name & Address: Bryan Stowe 28697 Park Ct Madison Hts MI 48071		\$ 75.00	\$
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

225.00

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

343.5

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line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

139040

2. Committee Name

CTE Peter Accia

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

9-12-13

Name & Address:

Charly Colo
50238 Sprucecrest
Chesterfield Twp MI 48047

\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired

Employer NONE

Click Here for Memo Itemization

Business Address

Type of Contribution: ☐ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt

9-12-13

Name & Address

Dave Maynard
2282 Ridgeway
SCS MI 48080

\$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution: ☐ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt

9-12-13

Name & Address:

Mike Consiglio
22648 Doremus
SCS MI 48081

\$ 75.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution: ☐ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #4

PAC Receipt? ☒ YES

4. Date of Receipt

9-16-13

Name & Address

Political Action Together Political Committee
ILUP 7234 Parkway Drive
Hanover MD 21076

\$ 2500.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution: ☐ Direct

☐ Loan from a person

☒ Fund Raiser

Page Subtotal

2725.00

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

6160.00

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line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

139040

2. Committee Name

CTE Peter Accica

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

10-4-13

Name & Address:

Sheet Metal Workers
Political Action Committee
17255 W 10 mile Rd Southfield MI
48075

\$250.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☐ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #2

PAC Receipt?

☒ YES

4. Date of Receipt

9-23-13

Name & Address:

Michigan Regional Council of Carpenters
Political Action Committee
3300 Woodward Suite 1200
Detroit MI 48201

\$500.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☐ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #3

PAC Receipt?

☒ YES

4. Date of Receipt

10-3-13

Name & Address:

Friends of Macomb
2957 Parkway Church
Stearns Heights MI 48310

\$500.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☐ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #4

PAC Receipt?

☒ YES

4. Date of Receipt

10-2-13

Name & Address:

Committee for Responsible Government
5802 Vincent Trail
Shelby Township MI 48316

\$700.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution:

☐ Direct

☐ Loan from a person

☒ Fund Raiser

Page Subtotal

1950.00

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

8110.00

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

139040

2. Committee Name

CTETETER Accica

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 10-2-13

Name & Address: Sharon Michalec
31278 Tecla Dr
Warner MI 48088

\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer

Business Address

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 10-2-13

Name & Address: Ken Welsh
29824 Jefferson Ave
St Clair Shores MI 48080

\$ 75.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer

Business Address

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 10-3-13

Name & Address: Philip Waegel
22025 Benjamin
SCS MI 48081

\$ 30.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer

Business Address

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 10-3-13

Name & Address: Frank Lande
30225 Rosemar
SCS MI 48082

\$ 30.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer

Business Address

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

Click Here for Memo Itemization

Page Subtotal

235.00

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

8345.00

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

139040

2. Committee Name

CTE Peter Accica

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

10-3-13

Name & Address:

Peters Local 636
Political Action Committee
3000 Northwestern Hwy
Farmington Hills MI 48334

\$ 500.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Business Address

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

10-3-13

Name & Address:

Peter Loughney
13987 IDA West Rd
Petersburg MI 49270

\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Business Address

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

Name & Address:

\$

\$

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Business Address

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

Name & Address:

\$

\$

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Business Address

Type of Contribution:

☐ Direct

☐ Loan from a person

☐ Fund Raiser

[Click Here for Memo Itemization](#)

Page Subtotal

600.00

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

8945.00

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

139040

2. Committee Name

CTE Peter Accia

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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-13-13</u> Name & Address: <u>Mark Jarrett</u> <u>2120 Thiele Ct.</u> <u>St Clair Shores MI 48081</u>		\$ <u>30.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-7-13</u> Name & Address: <u>Joyce Janicki</u> <u>22493 Milner St</u> <u>St Clair Shores MI 48081</u>		\$ <u>50.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-7-13</u> Name & Address: <u>David Stupar</u> <u>912 F Street NW Unit 709</u> <u>Washington DC 2004</u>		\$ <u>100.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>10-7-13</u> Name & Address: <u>Bricklayer Union No 1 Missouri</u> <u>Truth Committee</u> <u>200 Market Street</u> <u>St Louis Missouri 63103</u>		\$ <u>100.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

280.00

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

9825.00

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

139040

2. Committee Name

CTE Peter Accia

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)
<p>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-7-13</u></p> <p>Name & Address: <u>Asbestos Workers Local 25</u> <u>21353 Bridge Street</u> <u>Southfield MI 48034</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ _____
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-10-13</u></p> <p>Name & Address: <u>Nelson McMath</u> <u>1685 Miller Ave</u> <u>Ann Arbor MI 48103</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>50.00</u>	\$ _____
<p>3. Contribution #3 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>10-10-13</u></p> <p>Name & Address: <u>Sheet Metal Workers Local 80</u> <u>Political Committee</u> <u>17255 W 10 Mile Southfield</u> <u>MI 48073</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ _____
<p>3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-8-13</u></p> <p>Name & Address: <u>Rich Flynn</u> <u>43225 Chardonway DR</u> <u>Stoney Heights MI 48314</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>50.00</u>	\$ _____

Page Subtotal

250.00

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

9505

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

139040

2. Committee Name

CTE Peter Accia

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? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>10-4-13</u> Name & Address: <u>Associated Administrative District Council</u> <u>660 N. Industrial Dr</u> <u>Elmhurst IL 60126</u>		\$ <u>200.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-7-13</u> Name & Address: <u>Elizabeth Pyden</u> <u>37504 Camellia Lane</u> <u>Clinton Township MI 48036</u>		\$ <u>50.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-13-13</u> Name & Address: <u>Donald Comer</u> <u>2008 Centennial</u> <u>34 Clair Shores MI 48081</u>		\$ <u>40.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-13-13</u> Name & Address: <u>Mike Boyle</u> <u>22900 E 15 mile</u> <u>Clinton Township MI 48045</u>		\$ <u>100.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

390.00
9895.00

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

139040

2. Committee Name

CTE Peter Accica

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? <input type="checkbox"/> YES	4. Date of Receipt	10-13-13
Name & Address: Tim Ochalek 47450 Stephanie Macomb MI 48044		6. Amount	\$ 300.00
5. If over \$100.00 cumulative, please provide: Occupation Organizer Employer Bricklayer Local 2 Business Address 21031 Ryan Road Warren MI 48091		Click Here for Memo Itemization	
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	10-13-13
Name & Address: Sarah Roberts 22440 Lakeland St 31400 Shores MI 48081		6. Amount	\$ 100.00
5. If over \$100.00 cumulative, please provide: Occupation State Rep Employer Michigan		Click Here for Memo Itemization	
Business Address State House Lansing			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	10-5-13
Name & Address: George Yalup 23039 Gary Ln 31400 Shores MI 48080		6. Amount	\$ 50.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	10-3-13
Name & Address: Steve Baker 10 Sunny View 31400 Shores MI 48080		6. Amount	\$ 50.00
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

230.00

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

10,125 10,125

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

139040

2. Committee Name

CTE Peter Accia

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

Oct 7-13

Name & Address:

Penny Bays
22495 Alexander Drive
St Clair Shores MI 48081

\$ 30.00

5. If over \$100.00 cumulative, please provide:

Occupation

Retired

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☐ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt

10-7-13

Name & Address

Jack Ellis
21700 Statler
St Clair Shores MI

\$ 150.00

5. If over \$100.00 cumulative, please provide:

Occupation

Retired

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☐ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt

10-7-13

Name & Address

Barbara Koehler
22523 Lake Blvd
St Clair Shores MI 48082

\$ 30.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☐ Direct

☐ Loan from a person

☒ Fund Raiser

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt

10-11-13

Name & Address

Daryl Nichols
9357 Allison Rd
Mayfield MI 48159

\$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☐ Direct

☐ Loan from a person

☒ Fund Raiser

Page Subtotal

260.00

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

10,385

10385

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 _____

2. Committee Name _____

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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: <u>Paola Accico</u> <u>15440 Sherwood Lane</u> <u>Fresno MI 48826</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-13-13</u>	\$ <u>50.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>Robert Accico</u> <u>15259 Spruce</u> <u>Macomb MI 48044</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-13-13</u>	\$ <u>30.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: _____	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____	\$ _____	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: _____	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____	\$ _____	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

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

80.00
10,465 10,465
Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number

139040

2. Committee Name

CTE Peter Accurso

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:

Antoinette Mocer
22431 Rosedale
SCS MI 48080

If over \$100.00 cumulative, please provide:

Occupation: Accountant

Employer Name & Business Address:

GHD CPAs
21420 Greater Mack
SCS MI 48080

☒ 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

Pasta, sausage, pepper, Pasta Salad,
grout

5. Date Of Receipt:

6. Vendor Name & Address:

Levents
9-11-13 + 10-13-13
\$ 100.00 75.00

Click Here for Memo Itemization

\$ 175.00

Contribution # 2 PAC Receipt? ☐ Yes

Name & Address:

Denise Accia
28005 EUBA
SCS MI 48081

If over \$100.00 cumulative, please provide:
Occupation:

Employer Name & Address:

Beaumont Hospital

☒ 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

Food- Deserts, Chees, Crack

5. Date Of Receipt:

10-13-13

6. Vendor Name & Address:

Click Here for Memo Itemization

\$ 50.00

Contribution #3 PAC Receipt? ☐ Yes

Name & Address:

Denise Accia
61323 E Rbert
SCS MI 48081

If over \$100.00 cumulative, please provide:

Occupation:

Employer Name & Address:

Buzz Bee Hardware
Detroit MI

☒ 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:

10-13-13

6. Vendor Name & Address:

Food- Mexican Dish,
Fruit.

Click Here for Memo Itemization

Page Subtotal

175.00 175.00

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

Enter this total
on line 6 of Summary
Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number

139040

2. Committee Name

CTE Peter Accica

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<p>Expenditure #1</p> <p>Name <u>Mass Marketing</u></p> <p>Address <u>35468 Mound</u> <u>Storley Heights</u> <u>MI 48310</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Meeting</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>9-27-13</u> Date</p>	<p><u>\$ 1870.24</u></p> <p>Click Here for Memo Itemization Type</p>
<p>Expenditure #2</p> <p>Name <u>Print & Market</u></p> <p>Address <u>40594 Brentwood</u> <u>Storley Heights MI</u> <u>48310</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Post Cards</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>10-06-13</u> Date</p>	<p><u>\$ 966.72</u></p> <p>Click Here for Memo Itemization Type</p>
<p>Expenditure #3</p> <p>Name <u>Print & Market</u></p> <p>Address <u>40594 Brentwood</u> <u>Storley Heights MI</u> <u>48310</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Post Cards</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>9-19-13</u> Date</p>	<p><u>\$ 249.10</u></p> <p>Click Here for Memo Itemization Type</p>
<p>Expenditure #4</p> <p>Name <u>Print & Market</u></p> <p>Address <u>40594 Brentwood</u> <u>Storley Heights MI</u> <u>48310</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Post Cards</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>10-11-13</u> Date</p>	<p><u>\$ 678.48</u></p> <p>Click Here for Memo Itemization Type</p>
<p>Expenditure #5</p> <p>Name <u>Staples</u></p> <p>Address <u>Print & Market</u> <u>Exeod Mich 48091</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>Card Stock</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>10-7-13</u> Date</p>	<p><u>\$ 50.84</u></p> <p>Click Here for Memo Itemization Type</p>

Subtotal this page

3815.38

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

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number

139040

2. Committee Name

CTE Peter Acciue

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Meijer</u> Address <u>30800 Little Mack</u> <u>Roseville MI 48066</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fund Raiser</u> <u>Food & Drink</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10-12-13</u> Date	<u>\$ 15683</u>
Expenditure #2 Name <u>St Clair Shores</u> Address <u>Post office</u> <u>St Clair Shores</u> <u>MI 48080</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> <u>Post Cards</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10-8-13</u> Date	<u>\$ 330.00</u>
Expenditure #3 Name <u>Meijer's</u> Address <u>30800 Little Mack</u> <u>Roseville MI 48066</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Phone Bank</u> <u>Snacks</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10-4-13</u> Date	<u>\$ 40.23</u>
Expenditure #4 Name <u>Kroger</u> Address <u>22332 Nine Mile</u> <u>St Clair Shores</u> <u>MI 48081</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Phone Bank</u> <u>Snacks</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10-8-13</u> Date	<u>\$ 32.65</u>
Expenditure #5 Name <u>St Clair Shores Post office</u> Address <u>9 Int'l Dr</u> <u>St Clair Shore</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> <u>Post Cards</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9-23-13</u> Date	<u>\$ 33.00</u>

Subtotal this page

592.71

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

4408.09

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139040
2. Committee Name CTE Peter Accice

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Macomb County Clerk</u> Address <u>40 North Main</u> <u>MT Clemens MI 48043</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>CRF Fine</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9-16-13</u> Date	<u>\$ 175.00</u>
Expenditure #2 Name <u>Office Max</u> Address <u>33840 Greenbriar Ave</u> <u>Clinton Twp MI 48035</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Green Paper Card Stock</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10-6-13</u> Date	<u>\$ 64.83</u>
Expenditure #3 Name <u>St Clair Shores</u> Address <u>Post office</u> <u>9 mile Q Mack</u> <u>MI 48080</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9-24-13</u> Date	<u>\$ 230.00</u>
Expenditure #4 Name <u>Roseville Post office</u> Address <u>13 mile Greenbriar</u> <u>Roseville MI 48066</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamp</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10-2-13</u> Date	<u>\$ 330.00</u>
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page

799.83

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

5207.94

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 139040
2. Committee Name CTE Peter Accia

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Post office</u> Address <u>St Clair Shores</u> <u>MI 48060</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9-12-13</u> Date	<u>\$330.00</u>
Expenditure #2 Name <u>Dolly's Pizza</u> Address <u>St Clair Shores</u> <u>MI 48210</u> <u>28210 Harper</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Food Fundraised</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9-11-13</u> Date	<u>\$116.93</u>
Expenditure #3 Name <u>Attacker Shack</u> Address <u>3 mile Harper</u> <u>St Clair Shores</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Food Fundraised</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9-11-13</u> Date	<u>\$115.53</u>
Expenditure #4 Name <u>St Clair Shores Post office</u> Address <u>9 mile Mack</u> <u>St Clair Shores</u> <u>MI 48080</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8-28-13</u> Date	<u>\$330.00</u>
Expenditure #5 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page

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

892.46
610.38

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number

139040

2. Committee Name

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held

10-13-13

4. Number of Individuals Attending
or Participating (whichever is
greater)

25

5. Type of Fund Raising Activity

Pasta & Sausage
& Hot Dogs

6. Address and Name (If any) of the
place where the activity was held.

Peter Accia's
home
☒ Private Residence

7. Total Contributions

4305⁰⁰

8. Other Receipts

175 in kind contrib

9. Gross Receipts (Add lines 7 and 8)

~~4480~~ 4305

10. Total Cost of Event

~~175~~ 331.83

(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)

Contribution Split
(%)

Expenditure Split
(%)

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-1K), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number

~~13000~~ 139040

2. Committee Name

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held

9-11-13

4. Number of Individuals Attending
or Participating (whichever is
greater)

40

5. Type of Fund Raising Activity

Chicken & Pizza

6. Address and Name (if any) of the
place where the activity was held.

Knights of Columbus
Hall



Private Residence SCSM

7. Total Contributions

6160⁰⁰

8. Other Receipts

9. Gross Receipts (Add lines 7 and 8)

6160⁰⁰

10. Total Cost of Event

~~332.46~~ 332.46

(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)

Contribution Split
(%)

Expenditure Split
(%)

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.