



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

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

1. Committee I.D. Number 139106		3. This Statement covers: from 05/05/14 to 10/19/14	
2. Committee Name Vote Vicki Selva		4. Candidate Last Name SELVA First Name Vicki M.I. 4a. Office Sought Including District # or Community Served (If applicable) MACOMB COMMUNITY COLLEGE BOARD OF TRUSTEES 4b. County of Residence MACOMB	
5. Committee's Mailing Address 55555 BROUGHTON RD. MACOMB, MI 48042 Area Code and Phone 586 588-1472 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 Vicki Selva 55555 BROUGHTON MACOMB, MI 48042 Area Code & Phone 586 588-1472	
7. Treasurer's Business Address NA Area Code and Phone		8. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper) NA Area Code and Phone	
9. TYPE OF STATEMENT 9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus Date of Election, Convention or Caucus Nov. 4, 2014		9c. <input type="checkbox"/> Annual Statement () Coverage Year 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.) 9e. Dissolution of Candidate Committee <input type="checkbox"/> 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 outstanding assets, owes no late fees or has any outstanding 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 Vicki Selva Type or Print Name		Signature [Signature] Date 10/21/14	
Candidate Vicki Selva Type or Print Name		Signature [Signature] Date 10/21/14	

FILED
14 OCT 23 PM 2:52
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MACOMB COUNTY, MICHIGAN



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 139106

2. Committee Name Vote Vicki SELVA

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>15,910.00</u>	(18.) \$ _____
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	(19.) \$ _____
c. Subtotal of "Contributions"	(3c.) \$ <u>15,910.00</u>	(20.) \$ _____
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _____	(19.) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ _____	(20.) \$ _____
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>473.62</u>	(21.) \$ _____
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ _____	(22.) \$ _____
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>11,180.96</u>	
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.) \$ <u>11,180.96</u>	(23.) \$ _____
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ _____	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ _____	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ _____	(24.) \$ _____
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>0</u>	
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.) \$ <u>0</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>15,910.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>15,910.00</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>11,180.96</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>4,729.04</u>	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139 106
2. Committee Name VOTO VICKI SELVA

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

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

Name & Address:

HARTWELL, JUDY
26271 BARBARA ST
ROSEVILLE, MI 48066

5/2/14 8/7/14
\$ 150.00 \$ 100.00
9/10/14 \$ 25.00
Click Here for Memo Itemization

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

Occupation RETIRED Employer

Business Address

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 8/7/14

Name & Address

DAVIS-KIRKSY, LINDA
1337 NORTHLAKE DR.
ROCHESTER HILLS, MI 48306

\$ 100.00 \$

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

Occupation GRANT WRITER Employer SELF-EMPLOYED

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 8/7/14

Name & Address:

ULBRICH, CASSANDRA
1890 LUDGATE LN.
ROCHESTER HILLS, MI 48309

\$ 100.00 \$

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

Occupation VICE PRESIDENT Employer MACOMB COMMUNITY COLLEGE

Business Address 16000 HALL RD. CLINTON TWP. MI 48038

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 8/7/14

Name & Address

MARHOFF, LORENZINA
14728 BON BRAG DR.
WARREN, 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

Page Subtotal

575.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139106
2. Committee Name Vote Vicki Selva

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 8/7/14

Name & Address:

WROBEL, STEVEN
14728 BON BRAC
WARREN, MI 48088

\$ 100.00 \$

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 8/7/14

Name & Address

LAMPAR, KENNETH
43304 VINSETTA
STERLING HTS., MI 48313

\$ 100.00 \$

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

Occupation DR. BUS. DEV. Employer MLREST

Business Address 20415 BRIN ROSEVILLE, MI 48066

[Click Here for Memo Itemization](#)

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

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 8/7/14

Name & Address:

CURTIS, PAUL
P.O. Box 1692
TRAY, MI 48099

\$ 100.00 \$

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

Occupation CONSULTANT Employer

Business Address P.O. Box 1692 TRAY MI 48099

[Click Here for Memo Itemization](#)

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

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 8/7/14

Name & Address

YOKICH, TRACEY
22710 GORDON SW, TCH
ST. CLAIR SHORES, MI 48081

\$ 100.00 \$

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

Occupation JUDGE Employer STATE OF MICHIGAN

Business Address 40 N. MAIN ST. MT. CLEMENS, MI 48043

[Click Here for Memo Itemization](#)

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

Page Subtotal

400.00

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 139106
2. Committee Name VOTE VICKI SELVA

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	<u>8/7/14</u>		
Name & Address: <u>CALABRO, CHARLENE</u> <u>488 TRILLIUM DR.</u> <u>TROY, MI 48098</u>				\$ <u>100.00</u>	\$
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> 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 #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	<u>8/7/14</u>		
Name & Address: <u>SIERAWSKI, ELIZABETH</u> <u>40422 WILLIAM DR.</u> <u>STERLING HTS, MI 48313</u>				\$ <u>100.00</u>	\$
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 # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt	<u>8/7/14</u>		
Name & Address: <u>SAWYER, JAMES</u> <u>53468 ANDREWS CL.</u> <u>NEW BALTIMORE, MI 48047</u>				\$ <u>100.00</u>	\$
5. If over \$100.00 cumulative, please provide: Occupation <u>PROVIST</u> Employer <u>MACOMB COMMUNITY COLLEGE</u>				Click Here for Memo Itemization	
Business Address <u>16000 HALL RD. CLINTON TWP. 48038</u>					
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	<u>8/7/14</u>		
Name & Address: <u>JACOBS, JAMES</u> <u>1017 BALFOUR</u> <u>GROSSE POINTE, MI 48230</u>				\$ <u>100.00</u>	\$
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>MACOMB COMMUNITY COLLEGE</u>				Click Here for Memo Itemization	
Business Address <u>16000 HALL RD. CLINTON TWP. MI 48038</u>					
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser					

Page Subtotal

400.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139106
2. Committee Name Vote Vicki SELVA

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>8/7/14</u>		
Name & Address: <u>ROBERTS, DAWN</u> <u>20774 HARRINGTON</u> <u>CLINTON TWP., MI 48036</u>			\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>PROFESSOR</u> Employer <u>MALCOLM COMMUNITY COLLEGE</u> Click Here for Memo Itemization Business Address <u>16000 HALL RD. CLINTON TWP., MI 48038</u> 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 <u>8/7/14</u>		
Name & Address: <u>BLAIR, CONSTANCE</u> <u>2924 IROQUIS</u> <u>DETROIT, MI 48214</u>			\$ <u>100.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>EXECUTIVE</u> Employer <u>TVI LOGISTICS</u> Click Here for Memo Itemization Business Address <u>25200 MALVINA AVE, WARREN, MI 48089</u> 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 <u>8/7/14</u>		
Name & Address: <u>BROWN, MELANIE</u> <u>14300 MANHATTEN</u> <u>OAK PARK, MI 48237</u>			\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>OFFICE WORKER</u> Employer <u>STATE OF MICHIGAN</u> 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 <u>8/7/14</u>		
Name & Address: <u>DMARIA, ROSEANNE</u> <u>23754 ROXANA</u> <u>EASTPOINTE, MI 48021</u>			\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> 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 650.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139106
2. Committee Name VOTE VICKI SELVA

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>8/7/14</u> Name & Address: <u>De VAULT, MICHAEL</u> <u>44001 GARFIELD</u> <u>CLINTON TWP. MI 48038</u>		\$ <u>100.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>DIRECTOR</u> Employer <u>MACOMB INTERMEDIATE SCHOOL DISTRICT</u> Click Here for Memo Itemization Business Address <u>44001 GARFIELD, CLINTON TWP., MI 48038</u> 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 <u>8/7/14</u> Name & Address: <u>YANEZ, HENRY</u> <u>14052 BERRY DR.</u> <u>STERLING HTS., MI 48312</u>		\$ <u>100.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>STATE REP</u> Employer <u>STATE OF MICHIGAN</u> Click Here for Memo Itemization Business Address <u>9789 HOUSE OFFICE BLDG, LANSING MI 48909</u> 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 <u>8/7/14</u> Name & Address: <u>NALLAR, Nick</u> <u>4351 BERKSHIRE DR.</u> <u>STERLING HTS., MI 48314</u>		\$ <u>100.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>REALTOR</u> Employer <u>MADISON GROUP REALTY</u> Click Here for Memo Itemization Business Address <u>415 W. 11 MILE RD., MADISON HTS., MI 48071</u> 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 <u>10/1/14</u> Name & Address: <u>LISBETTE, LISETTE</u> <u>13805 MAYWOOD</u> <u>SOUTHGATE, MI 48195</u>		\$ <u>50.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation <u>HOMEMAKER</u> Employer _____ Click Here for Memo Itemization Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 350.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139106
2. Committee Name Vote Vicki Selva

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: <u>WEND DENNIS</u> <u>1315 S. WATER ST.</u> <u>MARINE CITY, MI 48039</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/1/14</u>	\$ <u>250.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>PRESIDENT</u> Employer <u>WEND ASSOCIATES</u> Business Address <u>7205 STERLING PONDS CT, STERLING HTS. MI 48312</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>WEST, JOIG</u> <u>20752 ALDO CT.</u> <u>CLINTON TWP, MI 48038</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/8/14</u>	\$ <u>25.00</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 type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 Name & Address: <u>VERKEST, KENNETH</u> <u>39285 N. Blom DR.</u> <u>HARRISON TWP, MI 48045</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/31/14</u>	\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>SUPERVISOR</u> Employer <u>HARRISON TWP.</u> Business Address <u>38151 L'ANSE CREUSE HARRISON TWP</u> Type of Contribution: <input checked="" 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: <u>ASH, GEORGE</u> <u>ONE DETROIT CENTER</u> <u>500 WOODWARD AVE STE 2700</u> <u>DETROIT, MI 48226</u>	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/11/14</u>	\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>FOLEY LARDNER PPL</u> Business Address <u>ONE DETROIT CENTER, 500 WOODWARD STE 2700, DETROIT, MI 48226</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

425.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number

139 106

2. Committee Name

Not Vick SELVA

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

8/11/14

Name & Address:

SHEPHERD, DOUGLAS
46112 TALLY HO DR.
MACOMB, MI 48044

\$ 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 #2

PAC Receipt?

☐ YES

4. Date of Receipt

8/11/14

Name & Address

LALONDE LEO
24801 ROSALIND
EASTPOINTE, MI 48021

\$ 100.00

\$

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

8/11/14

Name & Address:

LEPLOR, BARRY
13159 NADINE
HUNTING WOODS, MI 48070

\$ 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

8/11/14

Name & Address

KELLY, JAMES
15346 VERONICA
EASTPOINTE, MI 48021

\$ 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

235.00

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

Enter this total on
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Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number

139106

2. Committee Name

Vote Vicki SELVA

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

8/12/14

Name & Address:

NOCCERINI, LISA
9212 CORIANDER WAY
BRIGHTON, MI 48116

\$ 100.00

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

Occupation VP CONSULTANT

Employer WINCHESTER CONSULTING GROUP

[Click Here for Memo Itemization](#)

Business Address 41700 W. 6 MILE STE 101 NORTHVILLE, MI 48168

Type of Contribution: ☒ Direct

☐ Loan from a person

☐ Fund Raiser

3. Contribution #2

PAC Receipt?

☐ YES

4. Date of Receipt

8/11/14

Name & Address:

ANTONE, PETER
7084 YARMOUTH
W. BLOOMFIELD, MI 48322

\$ 100.00

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

Occupation ATTORNEY

Employer ANTONE CASAGRANDE PC

[Click Here for Memo Itemization](#)

Business Address 31555 W. 14 MILE RD. #100 FARMINGTON HILLS, MI 48334

Type of Contribution: ☒ Direct

☐ Loan from a person

☐ Fund Raiser

3. Contribution # 3

PAC Receipt?

☐ YES

4. Date of Receipt

8/11/14

Name & Address:

OSMER, MICHAEL
5617 CELESTIAL CT.
SHELBY TWP, MI 48316

\$ 50.00

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct

☐ Loan from a person

☐ Fund Raiser

3. Contribution # 4

PAC Receipt?

☐ YES

4. Date of Receipt

8/22/14

Name & Address:

MILAC, ROBERT
43710 VIA ANTONIO DR.
STERLING HTS., MI 48314

\$ 50.00

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

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct

☐ Loan from a person

☐ Fund Raiser

Page Subtotal

300.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139106
2. Committee Name Vote Vicki Selva

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>8/20/14</u> Name & Address: <u>DARTER, FREDERICK</u> <u>7171 STERLING PONDS</u> <u>STERLING HTS, MI 48312</u>		\$ <u>200.00</u>	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>RAVE COMPUTERS</u> Business Address <u>7171 STERLING PONDS, STERLING HTS, MI 48312</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/27/14</u> Name & Address: <u>DEMPSY, BARBARA</u> <u>1379 KINGSLEY</u> <u>MT. CLEMENS, MI 48043</u>		\$ <u>50.00</u>	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/15/14</u> Name & Address: <u>LEVIN, CARL</u> <u>477 MICHIGAN AVE Room 1860</u> <u>DETROIT, MI 48226</u>		\$ <u>100.00</u>	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>U.S. SENATOR</u> Employer <u>U.S. SENATE</u> Business Address <u>477 MICHIGAN AVE Room 1860 DETROIT, MI 48226</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/25/14</u> Name & Address: <u>DOLAN, PATRICK</u> <u>32262 RUEHLER AVE</u> <u>WARREN, MI 48093</u>		\$ <u>100.00</u>	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 450.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139106
2. Committee Name NOT VICKI SELVA

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 Name & Address: <u>NAZRULLA ZEENATH</u> <u>29098 TESSMER CT.</u> <u>MADISON HTS., MI 48071</u>	4. Date of Receipt <u>9/20/14</u>	\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES Name & Address: <u>LEVIN, ANDREW</u> <u>6015 DARRAMOOD</u> <u>BLOOMFIELD HILLS, MI 48301</u>	4. Date of Receipt <u>9/20/14</u>	\$ <u>25.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES Name & Address: <u>LIANG, JACK</u> <u>650 WASHINGTON RD.</u> <u>GROSSE POINTE, MI 48230</u>	4. Date of Receipt <u>9/25/14</u>	\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution #4 PAC Receipt? <input checked="" type="checkbox"/> YES Name & Address: <u>CHALDEAN CHAMBER OF COMMERCE</u> <u>29850 NORTHWESTERN HWY STE 250</u> <u>SOUTHFIELD, MI 48034</u>	4. Date of Receipt <u>10/13/14</u>	\$ <u>250.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			

Page Subtotal 375.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number B9 106
2. Committee Name VOTE VICKI SBLV

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>10/14/14</u> Name & Address: <u>LYLES, DAVID</u> <u>2643 POW HATAN ST.</u> <u>ARLINGTON, VA 22207</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>RETIRED</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>100.00</u>	Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/13/14</u> Name & Address: <u>D'ANGELO, JOSEPH</u> <u>211 MERRILL #503</u> <u>BIRMINGHAM, MI 48009</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>LAND DEVELOPER</u> Employer <u>SELF-EMPLOYED</u> Business Address <u>211 MERRILL #503 BIRMINGHAM, MI 48009</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>3,000.00</u>	Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/17/14</u> Name & Address: <u>KENNEDY, RICHARD</u> <u>4195 SANDY CREEK DR.</u> <u>SHELBY TWP., MI 48316</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>50.00</u>	Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>8/11/14</u> Name & Address: <u>HEAT: FROST LOCAL 25</u> <u>21353 BRIDGE ST.</u> <u>SOUTHFIELD, MI 48033</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>100.00</u>	Click Here for Memo Itemization

Page Subtotal 3250.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number

13910C

2. Committee Name

Vote Vicki SOLVA

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 checked="" type="checkbox"/> YES Name & Address: <u>MICHIGAN DEMOCRATIC PARTY - STATE CENTRAL</u> <u>606 TOWNSEND</u> <u>LANSWING, MI 48993</u>	4. Date of Receipt <u>7/29/14</u>	\$ <u>500.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input checked="" type="checkbox"/> YES Name & Address: <u>PREPITERS LOCAL 636</u> <u>30100 NORTHWESTERN</u> <u>FARMINGTON HILLS, MI 48334</u>	4. Date of Receipt <u>8/11/14</u>	\$ <u>200.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input checked="" type="checkbox"/> YES Name & Address: <u>UAW / V-PAC</u> <u>8000 E. JEFFERSON</u> <u>DETROIT, MI 48214</u>	4. Date of Receipt <u>8/9/14</u>	\$ <u>1000.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input checked="" type="checkbox"/> YES Name & Address: <u>PLUMBERS 98</u> <u>555 HORACE BROWN</u> <u>MADISON HTS, MI 48071</u>	4. Date of Receipt <u>8/11/14</u>	\$ <u>200.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____		Click Here for Memo Itemization	

Page Subtotal

1900.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139 106
2. Committee Name VOTE VICKI SALVA

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 checked="" type="checkbox"/> YES 4. Date of Receipt <u>9/15/14</u> Name & Address: <u>MACOMB COMMUNITY COLLEGE FACULTY ORGANIZATION</u> <u>MCCFO</u> <u>14500 12 MILE RD.</u> <u>WARREN, MI 48088</u>	\$ <u>3000.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		
Click Here for Memo Itemization		
Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution #2 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>9/15/14</u> Name & Address: <u>MEA</u> <u>38550 GARFIELD ST</u> <u>CLINTON TWP, MI 48038</u>	\$ <u>300.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		
Click Here for Memo Itemization		
Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution #3 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>9/24/14</u> Name & Address: <u>LEVIN FOR CONGRESS</u> <u>P.O. Box 37</u> <u>ROSEVILLE, MI 48066</u>	\$ <u>1000.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		
Click Here for Memo Itemization		
Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		
3. Contribution #4 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>10/11/14</u> Name & Address: <u>FRIENDS OF MACOMB</u> <u>3985C BRYLOR CT.</u> <u>CLINTON TWP, MI 48038</u>	\$ <u>250.00</u>	
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		
Click Here for Memo Itemization		
Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		

Page Subtotal 4550.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139 106
2. Committee Name Vote Vicki Solva

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>10/10/14</u> Name & Address: <u>MELTON FOR MICHIGAN</u> <u>2285 SNELLBROOK</u> <u>AUBURN HILLS, MI 48326</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>1500.00</u>	Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>10/17/14</u> Name & Address: <u>UTICA PUBLIC AFFAIRS COMMITTEE</u> <u>13969 PLUMBROOK</u> <u>STERLING HTS., MI 48312</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>300.00</u>	Click Here for Memo Itemization
3. Contribution #3 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>10/12/14</u> Name & Address: <u>LTG HAROLD HUGH</u> <u>19464 CANDLELIGHT</u> <u>ROSEVILLE, MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>200.00</u>	Click Here for Memo Itemization
3. Contribution #4 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>9/9/14</u> Name & Address: <u>CHIRKUN, JOHN</u> <u>31229 MERRILY</u> <u>ROSEVILLE, MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	Click Here for Memo Itemization

Page Subtotal

2050.00

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

15,910.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number

139106

2. Committee Name

Vote Vicki Selva

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:

SELVA, Vicki
55555 Broughton
Macomb, MI 48042

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

Employer Name & Business Address:

SELVA STRATEGIES, LLC
Above

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 ITALIAN TRIBUNE AD

5. Date Of Receipt: 9/26/14

6. Vendor Name & Address:

ITALIAN TRIBUNE

Click Here for Memo Itemization

\$ 277.00

☐ Fund Raiser Contribution

Contribution #2 PAC Receipt? ☐ Yes

Name & Address:

SELVA, Vicki
55555 Broughton
Macomb, MI 48042

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

Employer Name & Address:

SELVA STRATEGIES, LLC

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 GO DADDY WEBSITE

5. Date Of Receipt: 9/10/14

6. Vendor Name & Address:

GO DADDY - ONLINE

Click Here for Memo Itemization

\$ 30.44

☐ Fund Raiser Contribution

Contribution #3 PAC Receipt? ☐ Yes

Name & Address:

HAYMAN, Florence
53540 Grace Dr.
New Baltimore, MI 48047

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

Employer Name & Address:

4. ☐ Endorsement or Guarantee of Bank Loan

☐ Goods Donated or Loaned ☐ Services Donated

☒ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description STAMPS

5. Date Of Receipt: 10/03/14

6. Vendor Name & Address:

U.S. POSTMASTER

Click Here for Memo Itemization

\$ 58.80

☐ Fund Raiser Contribution

Page Subtotal

\$ 366.24

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

\$ 366.24

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 139 106

2. Committee Name Vote Vicki SELVA

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 <u>all</u> 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)
<p>Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>SELVA, Vicki</u> <u>55555 Broughton</u> <u>Macomb, MI 48042</u> If over \$100.00 cumulative, please provide: Occupation:</p> <p>Employer Name & Business Address: <u>SELVA STRATEGIES LLC</u> <u>ABOVE</u></p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description <u>LABELS</u></p> <p>5. Date Of Receipt: <u>10/19/14</u></p> <p>6. Vendor Name & Address: <u>MEIJOR</u> <u>27255 23 mile</u> <u>CHASTERFIELD, MI 48051</u></p> <p>Click Here for Memo Itemization</p>	<p>\$ <u>31.06</u> \$</p>	
<p>Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address: <u>SELVA, Vicki</u> <u>55555 Broughton</u> <u>Macomb, MI 48042</u> If over \$100.00 cumulative, please provide: Occupation:</p> <p>Employer Name & Address:</p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description <u>PRINTING</u></p> <p>5. Date Of Receipt: <u>6/12/14</u></p> <p>6. Vendor Name & Address: <u>AMERICAN GRAPHIC PRINTING</u> <u>34895 GROESBECK HWY</u> <u>CLINTON TWP. MI 48035</u></p> <p>Click Here for Memo Itemization</p>	<p>\$ <u>76.32</u> \$</p>	
<p>Contribution #3 PAC Receipt? <input type="checkbox"/> Yes</p> <p>Name & Address:</p> <p>If over \$100.00 cumulative, please provide: Occupation:</p> <p>Employer Name & Address:</p> <p><input type="checkbox"/> Fund Raiser Contribution</p>	<p>4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN</p> <p>Description _____</p> <p>5. Date Of Receipt: _____</p> <p>6. Vendor Name & Address:</p> <p>Click Here for Memo Itemization</p>	<p>\$ _____ \$</p>	

Page Subtotal

107.38

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

473.62

Enter this total
on line 6 of Summary
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**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139106
2. Committee Name Vote Vicki SELVA

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>BUCA di BEPPO</u> Address <u>12575 HALL RD.</u> <u>UTICA, MI 48317</u> <input checked="" type="checkbox"/> Fund Raiser <u>IF</u>	Purpose: <u>FUNDRAISER / Kick off</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/7/14</u> Date	<u>\$ 1011.83</u>
Expenditure #2 Name <u>AMERICAN GRAPHICS PRINTING Co.</u> Address <u>34895 GROESBECK</u> <u>CLINTON TWP., MI 48035</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PRINTING</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/22/14</u> Date	<u>\$ 76.32</u>
Expenditure #3 Name <u>PRACTICAL POLITICAL CONSULTING</u> Address <u>920 N. WASHINGTON AVE.</u> <u>LANSING, MI 48906</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>MAIL LISTS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/19/14</u> Date	<u>\$ 200.00</u>
Expenditure #4 Name <u>FRIENDS OF HENRY YANKEZ</u> Address <u>14052 BERY</u> <u>STERLING HTS., MI 48312</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>FUNDRAISER</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/25/14</u> Date	<u>\$ 25.00</u>
Expenditure #5 Name <u>VICKI SELVA</u> Address <u>55555 BROUGHTON</u> <u>MACOMB, MI 48042</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>AD / LOAN REPAYMENT</u> <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/26/14</u> Date	<u>\$ 277.00</u>

Subtotal this page

1590.15

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 139106
2. Committee Name Vote Vicki Selva

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>CIG NEWSPAPER</u> Address <u>13650 11 MILE RD.</u> <u>WARREN, MI 48099</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>AD</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/23/14</u> Date	<u>\$ 1016.67</u>
Expenditure #2 Name <u>MASS MAILING</u> Address <u>35468 MOUND RD.</u> <u>STERLING HTS, MI 48312</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>MAILING SERVICE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/23/14</u> Date	<u>\$ 375.00</u>
Expenditure #3 Name <u>U.S. POSTMASTER</u> Address <u>STERLING HTS, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>MAIL POSTAGE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/23/14</u> Date	<u>\$ 2170.00</u>
Expenditure #4 Name <u>HARLAND CLARKE CHECKS</u> Address <u>HUNTINGTON BANK</u> <u>7755 23 MILE RD.</u> <u>SHELBY TWP, MI 48316</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>CHECK ORDER</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/30/14</u> Date	<u>\$ 29.68</u>
Expenditure #5 Name <u>HUNTINGTON BANK</u> Address <u>7755 23 MILE RD.</u> <u>SHELBY TWP, MI 48316</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>STATEMENT CHARGE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/15/14</u> Date	<u>\$ 25.00</u>

Subtotal this page 3593.85
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 139106
2. Committee Name Vote Vicki Selva

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>PAY PAL</u> Address <u>2211 N. 1ST ST.</u> <u>SAN JOSE, CA 95131</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>FEES</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/1-10/1</u> Date <u>2014</u>	\$ <u>15.73</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>AMERICAN GRAPHICS PRINTING CO.</u> Address <u>34895 GROESBECK HWY</u> <u>CLINTON TWP, MI 48035</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PRINTING</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/24/14</u> Date	\$ <u>938.69</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>AMERICAN GRAPHICS PRINTING CO.</u> Address <u>34895 GROESBECK HWY</u> <u>CLINTON TWP, MI 48035</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PRINTING</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/19/14</u> Date	\$ <u>2486.23</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>MASS MAILING</u> Address <u>35468 MOUND RD.</u> <u>STERLING HTS, MI 48312</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>MAIL SERVICE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/3/14</u> Date	\$ <u>2318.49</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>MACOMB COUNTY DEMOCRATIC CLUB</u> Address <u>136 S. MAIN</u> <u>MT. CLEMENS, MI 48043</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>MEMBERSHIP</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/17/14</u> Date	\$ <u>100.00</u> Click Here for Memo Itemization Type
Subtotal this page			<u>5859.14</u>
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 139106
2. Committee Name VOTE Vicki Selva

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ Date Click Here for Memo Itemization Type <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2 Name <u>Vicki Selva</u> Address <u>55555 BROUGHTON MACOMB, MI 48042</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>LOAN REPAYMENT</u> <u>10/19/14</u> Date Click Here for Memo Itemization Type <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement <u>1K</u>	<u>10/19/14</u>	\$ <u>31.06</u>
Expenditure #3 Name <u>Vicki Selva</u> Address <u>55555 BROUGHTON MACOMB, MI 48042</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>LOAN REPAYMENT</u> <u>10/19/14</u> Date Click Here for Memo Itemization Type <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement <u>1K</u>	<u>10/19/14</u>	\$ <u>30.44</u>
Expenditure #4 Name <u>Vicki Selva</u> Address <u>55555 BROUGHTON MACOMB, MI 48042</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>LOAN REPAYMENT</u> <u>6/12/14</u> Date Click Here for Memo Itemization Type <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/12/14</u>	\$ <u>76.32</u>
Expenditure #5 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ Date Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		

Subtotal this page

137.82

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

11,180.96

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 139106

2. Committee Name VOTE VICKI SELVA

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>8/7/14</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>29</u>	5. Type of Fund Raising Activity <u>KICK-OFF RECEPTION</u>	6. Address and Name (If any) of the place where the activity was held. <u>BUCA di BEPPO</u> <input type="checkbox"/> Private Residence
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7. Total Contributions

\$1900.00

8. Other Receipts

9. Gross Receipts (Add lines 7 and 8)

\$1900.00

10. Total Cost of Event

\$1011.83

(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.