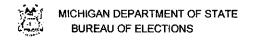


### CANDIDATE COMMITTEE

FOR OFFICIAL USE ONLY

COVER PAGE			
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and compared to the treasurer (or designated record keeper).	l signed by andidate.	3. This Statement covers:	om 05/05/14 to 10/19/14
1. Committee I.D. Number		4. Candidate Last Name	First Name M.I.
139106		SELVA	Vicki
, i		4a. Office Sought Including Dis	strict # or Community Served (If applicable)
2. Committee Name		MACOMB COMM	UNITY COLLEGE BOARD OF TRUSTED
VOTE VICKI SELVA	7	4b. County of Residence	AcomB
5. Committee's Mailing Address		6. Treasurer's Name & Reside	
55555 BROUGHTON RD.		Vicki Sou	A
MACOMB, M. 48042		VICLE SOLV 55555 BRO MACOMB, MI	T 23 P FILED FILED
Area Code and Phone 58C 588-147 If the address in this box is different from the comm	Z		· 588-1472
mailing address on the Statement of Organization, to be sent to this address by the filing official.		Area Code & Phone 556	, 588-1472
7. Treasurer's Business Address		Designated Record Keeper     Designated Record Keeper)	's Name and Mailing Address (If the committee has a
NA		NA	
Area Code and Phone		Area Code and Phone	
9. TYPE OF STATEMENT		Filed Code and Filone	9e. Dissolution of Candidate Committee
9a. Pre-Election OR 9b. Post-Election	Required ON is not on the current year:		By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here
Pre-Election or Post-Election Statement relates to:	July Quart		by discharged and forgiven and no longer collectible from the committee. The committee has no outstanding assets,
Primary		•	lowes no lates fees or has any outstanding debt.
General	October G	uarterly	Further, if the dissolution cannot be granted, that this be
Convention			considered a request for the Reporting Waiver.
Special	9c	ıl Statement ( )	
School		Coverage Year	Effective date of dissolution
Caucus	(Comp	dment to Campaign Statement plete Item 9a, 9b, 9c or 9e to te which Statement is being ded.)	Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.
Date of Election, Convention or Caucus			
Nov. 4, 2014			
, ,			
10. Verification: I\We certify that all reasonable diligony\our knowledge and belief the contents are true,			ent and attached schedules (if any) and to the best of
Current Treasurer or	,	45	, / ,
Designated Record Keeper Vick SELV Type or Print Name	<u>/A</u>	Signature	Date 10/2/14
candidate Vida Selva		138	Date 10/2/14
Type or Print Name	 I	Signature	

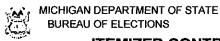


1. Committee I.D. Number

## SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name VOTE VICE SELVA

CANDIDATE COMMITTEE	2. Committee value	
RECEIPTS	Column i This Period	Column II Cumulative this election cycle
3. Contributions		Sumulative time distaller dysle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 15,910.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ 15,910.00	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES	1-5/	·
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ 473.6Z	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures	1N .CA	
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>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.) \$ 11,180.96	(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)  11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS	(10b.) \$	
(Add Line 10a + Line 10b)  DEBTS AND OBLIGATIONS	(11.) \$	(24.) \$
12. Debts and Obligations	B	
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	(13.) \$	
(Enter zero if no previous reports have been filed.)  14. Amount received during reporting period	(14)+\$ 15,910.00	
(Line 5, Total Contributions & Other Receipts)	3 9 9 9 9	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(15.) = \$	
(Add lines 9 and 11)	(16.) - \$ 11,180,96	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ 4 729.04 *	
,		

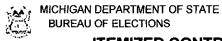


#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number 139 106
2. Committee Name NoTO Vida S&LIA

line 3a of Summary

CANDIDATE COMINITIES 2. Committee Name	10 (100)	30 2011
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)
Contribution # 1 PAC Receipt? YES 4. Date of Receipt  Name & Address:		1.
HARTWELL, JUDY 5	1-414	8/7/14
26271 BARBARA ST	4'	
ROSEVILLE, MI 480C6 5. If over \$100.00 cumulative, please provide:	9/10/14 \$	\$ 100.00 Z5.00
Occupation RETIZED Employer	Click Here to	r Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 6/7/14  Name & Address		
DAVIS-KIRKSY, LINDA		
1337 NORTHALRE DR.	\$ 100,00	\$
RocHESTER_ HILLS, MI 4830C 5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation GRANT Water Employer SELF-EMPLOYET)		
Business Address		
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:  UBRICH, CASSANDRA  1890 LUDGATE LN.  RocHester H.115, M. 48309  5. If over \$100.00 cumulative, please provide:	\$ 100 , 000 Click Here for	\$Memo Itemization
1 = PROZERENT FORMER MARGORES COMMUNITES CONTEGE	E	
Occupation VICE PRESIDENT Employer MACOMB Community Callet C.  Business Address 6000 HALL RD. CLINTON TWP. MI 48038  Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 8/7/14  Name & Address		
MARHOFF, LORENZINA 14728 BON BRAG DR. WARREN, M. 48088  5. If over \$100.00 cumulative, please provide: Occupation RETIRED Employer	\$ 100 ⋅ 0 <sup>©</sup> Click Here for	\$ Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person X Fund Raiser		
Page Subtotal	575.00	<u>-</u>
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
(Complete on last page of Scriedule)	Enter this total on	

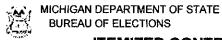


#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number 139166

2. Committee Name 10 To VICH 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		
WEBEL, STEVEN 14728 BON BLACE		
14728 BON BRAG	s 100,00	
WARREN, MI 48088	\$ 100,00	\$
5. If over \$100.00 cumulative, please provide:  Occupation (CETIRE) Employer	Click Here for	or Memo Itemization
Business Address  Type of Contribution:   Direct   Loan from a person   Fund Raiser		
Name & Address		
LAMPAR, KENNETH		
43304 VINSETTA	\$ 100.00	° \$
STEPLING HTS., MI 48313		
5. If over \$100.00 cumulative, please provide:	Click Here to	r Memo Itemization
Occupation Din. Bus, DEV. Employer MCREST		
Business Address 20415 BRIN ROSEVILLE, MI 48066		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8/7//		
CURTIS, PAUL	. 100 00	
P.O. Box 169 C	\$ 00.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation CONSULTANT Employer		
Business Address P.O. Box 1692 TRay MI 48099		
Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 8/7/14  Name & Address		
YOKICH, TRACEY 22710 GORDON SWITCH		
22710 GORDON SWILH	\$ 100.00	\$
37. CLAR SHORES, M1 48081 5. If over \$100.00 cumulative, please provide:		
1 1	Click Here for	r Memo Itemization
Occupation JUDGE Employer STATE OF MICHIGAN  Business Address HON. MAIN ST. MT. CLEMENS, MI 4804	13	
Business Address 40 N. MAIN ST. MT. CLEMENS, MI 4804	43	
Type of Contribution: Direct Loan from a person X Fund Raiser	<del></del>	
Page Subtotal	400.00	9
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on line 3a of Summary	,
Page 2 of 14	Page.	



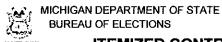
1. Committee I.D. Number 139 06

CANDIDATE COMMITTEE 2. Committee Name 10	to 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 6/7/14  Name & Address:		
CALABRO, CHARLENG 488 TRILLIUM DE.	s 100,00	\$
TROY, MI 48098 5. If over \$100.00 cumulative, please provide:		
Occupation RETIRED Employer	Click Here to	r Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt \$\frac{5}{7}\left(\frac{7}{4}\right)\$		
SIEDANSKI, ELIZABETH		
SIEDAWSKI, ELIZABETH HOYZE WILLIAM DR.	\$ 100,00	\$
STERCLING HT3 MI H8313 5. If over \$100.00 cumulative, please provide:	Click Here fo	r 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 8/7/14  Name & Address:		
SAWYER, JAMES 53468 ANDROWS CL.	\$ 100.00	œ.
NEW BALTIMORE, MI 48047		Ф
5. If over \$100.00 cumulative, please provide;	••	Memo Itemization
Occupation PROVIST Employer MACOMB COMMUNITY COLLEGE Business Address 16000 HALL RD. CLINTON TWP. 48038 The office of Contribution Direct Disperse process To Superior Disperse Dispers	É	
Business Address 16000 HALL RD. CLINTON TWF. 48038		
Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 8/7/14  Name & Address		
JACOBS, JAMESS 1017 BALFOND GROSSE POINTE, MI 48230	\$ 100,00	\$
5. If over \$100.00 cumulative, please provide:		
5. If over \$100.00 cumulative, please provide:  Occupation RESIDENT Employer MACOMB COMMUNITY COLLEGE  Business Address 16000 HALL RD. CLINTON TWO, MI 4803  Type of Contribution: Direct Loan from a person Fund Raiser	Click Here for	Memo Itemization
Business Address 16000 HALL RD. CLINTON TWP. MI 4803	8	
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	400.00	
Grand Total of All Schedules 1A		

Page 3 of 14

(Complete on last page of Schedule) [

Enter this total on line 3a of Summary Page.

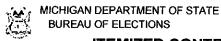


1. Committee I.D. Number	139	710	4		
1.		1	1	55110	

CANDIDATE COMMITTEE 2. Committee Name 4	218 VICICI	OBLUM
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 87 14 Name & Address:  Roberts Dawn  Lotty Harring Ton  CLINTON TWP., MI 4803 C  5. If over \$100.00 cumulative, please provide:  Occupation PROPESSOR Employer MALONB Community Cole  Business Address 16000 Hall RD. CLINTON TWP., MI 48	\$ 100,00 GE Click Here for	
	- J 6	
Type of Contribution:   Direct   Loan from a person   Fund Raiser  3. Contribution #2 PAC Receipt?   YES   4. Date of Receipt   S/7/// Name & Address		
BLAIN CONSTANCE  2924 IROQUIS  DETROIT, MI 48214  5. If over \$100.00 cumulative, please provide:  Occupation EXECUTIVE Employer TVI LOGISTICS  Business Address 25208 MALVINA AVB, WARREN, MI 480	Click Here fo	s 250.00 pr 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:  BROWN, MELANICS 14300 MANHATTEN OAK PARK, MI 48237  5. If over \$100.00 cumulative, please provide:  Occupation OFFICE WOLLER Employer STATE OF MICHICAN  Business Address	\$ 100.00	ser 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  DMARLA, ROSEANNE 23754 ROXANA  PASTROINTE, M. Y802/ 5. If over \$100.00 cumulative, please provide: Occupation RETINED Employer  Business Address  Type of Contribution: Direct Loan from a person X Fund Raiser	\$ <i> 00・6</i> ご Click Here fo	ser Memo Itemization
Page Subto	tal 650.0	۵
Grand Total of All Schedules 1	А	

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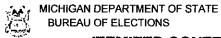
Enter this total on line 3a of Summary Page.



#### CANDIDATE COMMITTEE

1. Committee I.D. Number 39106
2. Committee Name VOTS 1/1041 SELVA

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 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 \$\frac{\frac{7}{1}}{1}\$	<u> </u>	,
DAVAULT, MICHAEL		
LINTON TWP. M. 48038 5. If over \$100.00 cumulative, please provide:	\$ 100.00	\$
	( Click Here fo	r Memo Itemization
Occupation DINECTOR Employer MACONB INTERMEDIATE SCI		ica
Business Address 44001 GARFIELD, CLINTON TWP. MI 480	38	
Type of Contribution: Direct Loan from a person Fund Raiser	<del> </del>	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7 1 Name & Address		
YANEZ HENRY 14052 BERZY DR.		
14052 BETZY DR.	\$ 100.00	\$
57272LING HTS MI 4831Z  5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation STATE REP Employer STATE OF MICHIGAN		
Occupation STATE PEP Employer STATE OF Muchican Business Address \$ 789 House Offile BLDG, LANSING HILE	909	
Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 8/7/14		
NAMAR, NICK 4351 BERKSHIREDR.	\$ 100.00	\$
57872LNG H73, M148314 5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation REALTOR Employer MADISON GROUP REALTOR Business Address 415 W. I MILE RD., MADISON 473, MI 4	7	
Business Address 415 W. IlMILE RD., MADISON HT3, MIY	15081	
Type of Contribution:   Direct   Loan from a person   Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/1/14  Name & Address		
LISETTE, LISETTE 13805 MAY WOOD SOUTHGATE, MI 48195		
13805 MAY WOOD	\$ 50.00	\$
5. If over \$100.00 cumulative, please provide:		
Occupation Home MAKER Employer	Click Here for	Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	350.00	<u> </u>
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
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Page $\frac{5}{14}$ of $\frac{14}{14}$	Page.	



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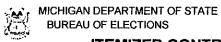
## ITEMIZED CONTRIBUTIONS SCHEDULE 1A

#### **CANDIDATE COMMITTEE**

1. Committee I.D. Nu	$\frac{39}{100}$	100	
2. Committee Name	Vola	Vide	SELVA

line 3a of Summary

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 8/1/14  Name & Address:	•	
WEND, DENNIS 1315 S. WATER ST. MARINE CITY, MI 48039	\$ 250.00	\$\$
5. If over \$100.00 cumulative, please provide:  Occupation PRG5/DENT Employer WEND! ASSOCIATES	• •	or Memo Itemization
Business Address '7205 STERLING PONDS CT., STERLING P	475. M. 4	5312
Type of Contribution: Direct Loan from a person Fund Raiser  3. Contribution #2 PAC Receipt? YES 4. Date of Receipt \$\[ \begin{align*}		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 8/8/14  Name & Address		
WEST, JOIE	s 25.00	) ¢
20752 ALDO CT. CLINTON TWP. MI 48038	` <u></u>	
5. If over \$100.00 cumulativé, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Type of Contribution:   Direct   Loan from a person   Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 7/3/// Name & Address:		
VERKEST, KENNETH	\$ 50.00	
39285 N. Blom DR. HARRISON TOP, M. 45045 5. If over \$100.00 cumulative, please provide:		• Memo Itemization
Occupation SUPERIVISOR Employer HARRISON TOUP.		
Business Address 38151 L'ANSE CREUSE HARRISON TUF  Type of Contribution: X Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt S////// Name & Address		
ASA GEORGE		
DETROIT, M. 48226	\$ 100.00	\$
5. If over \$100.00 cumulative, please provide:  Occupation ATTORNEY Employer FOLEY: LARDWONERL	Click Here for	Memo Itemization
	-	
Business Address ONE, DOTROIT CENTER, SOO WOODWARD STE 2700; A	DETROIT, MI	48226
Business Address ONE DOTTOIT CONTRIL SOO WOODWARD STE 2700; A  Type of Contribution: Loan from a person Fund Raiser		
Business Address ONE DOTROIT CENTER, SOO WOODWARD STE 2700;	DETROIT, MI 425,00	



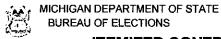
1. Committee I.D. Number 139 106

CANDIDATE COMMITTEE 2. Committee Name 10	to Vidu	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 S/11 U lame & Address:		
SHEPHERD, DOUGLAS  HUIZ TALLY HODR.  MA COMB, M. 48044  If over \$100.00 cumulative, please provide:	\$ 50.00	\$or Memo Itemization
Occupation Employer		
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt \( \frac{5}{1/1} \) //L/		
LALONDO LEO		
24801 ROSALIND	s 100.00	\$
BASTPOINTE, M. 48021		
i. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation NGTINGO Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Contribution #3 PAC Receipt? YES 4. Date of Receipt S/////		
EPLOR BARRY		
EPLOR, BARRY 13159 NADING HUNTING WOODS, MI ASOTO	\$ 35.0	フ \$
HUNTING WOODS, MI HSOTO	Click Horo for	. Mana Itaminatian
5. If over \$100.00 cumulative, please provide:	Click Here to	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
All Contribution #4 PAC Receipt? YES 4. Date of Receipt 11/14		
KELLY, JAMES 5346 VETRONICA EASTPOINTE, MI 48021	5 mm (2) - 2 mm	
13346 VGRONICH	\$ 50.0C	\$
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here for	r Memo Itemization
Purinans Address		
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	235.0	ø
Grand Total of All Schedules 1A		-

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

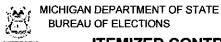
Enter this total on line 3a of Summary Page.



#### **CANDIDATE COMMITTEE**

Committee I.D. Number	139104	
2. Committee Name	Voto Vicker	SELVA

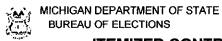
CANDIDATE COMMITTEE 2. Committee Name	VOTO VICICI SELVA
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 8 12 1	
NOCERINI, LISA	
BRIGHTON, M. 48116	\$ 100.00 \$
Occupation VP KONSULTANT Employer WINCHESTER GNSULTING G	Slick Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:  Occupation UP KONSULTANT Employer WINCHESTER GNSULTING G  Business Address 41700 W. L. MILE STE 101 NORTHVILLE, W.	1,48168
Type of Contribution: Direct Loan from a person Fund Raiser,	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt S///	
ANTONE, PETER	
7084 YARMOUTH	\$ 100.00 s
W. Bloomfiold, M. 48322	
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation ATDRNBY Employer AWTOND! CASAGRANDE PC Business Address 21555 W. 14 MILE RD, #100 FARMING	11/2 11/2/2011
Business Address 21555 W. 14 MILE RD. 7100 FARMING	TON HILLS, MI 48334
Type of Contribution: Direct Loan from a person Fund Raiser	·
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt S/11/14  Name & Address:	
OSATR, MICHAGE	<i></i>
5617 CELESTIAL CT.	\$ 50.00 \$
SHELBY TUP., M. 48316	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:	
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt S ZZ/14  Name & Address	
MIJAC, ROBERT	
43710 VIA ANTONIO DR.	\$ 50.00 s
43710 VIA ANTONIO DR. STERUNG HTS., Mr. 48314 5. If over \$100.00 cumulative, please provide:	*
5. If over \$100.00 cumulativé, please provide:	Click Here for Memo Itemization
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
Page 8 of 14	line 3a of Summary Page.



1. Committee I.D. Number 139106

2. Committee Name NOTE Nick Sal-VA

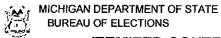
CANDIDATE COMMITTEE	2. Committee Name	19 MICE	281-11
Enter contributor's name and address. If contribution is from an individual, middle initial. Check box to indicate if contribution is from a Political Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? YES 4. Date of Receipt Address:	S/20/14		
DARTER, FREDERICK			
DARTER FREDERICK 171 STERLING PONDS STERLING HTS, MI 48312— 5. If over \$100.00 cumulative, please provide:		\$ 200,00	3 \$
Occupation OWNER Employer LANE	JonfuTBRS		r Memo Itemization
Business Address 7/1/ STETELING PONDS, STORE	CLING 1475, MI 48	312	
Type of Contribution: Direct Loan from a person	Fund Raişer		
Contribution #2 PAC Receipt? YES 4. Date of Receipt YES  Address	sipt 8/27/14		
DEMPSEY, BARISHA 1379 KINGSLEY MT. CLEMENS, M. 48043		s 50.00	\$
MT. CLEMENS, M. 48043			
5. If over \$100.00 cumulative, please provide:		Click Here fo	r Memo Itemization
Occupation Employer			
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		<u> </u>
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt PAC Receipt?	eipt <u>9/15</u> -/14		
HTT MICHIGAN ANTE ROOM 1860		\$ 100.00	\$
DETROIT, M. 48226 5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation U.S. SENATOR Employer U.S. So	NATO		
Business Address 477 MichiGAN AUT Room 18	60 DETROIT, MI Y	1822C	
Type of Contribution: Direct Loan from a person	Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt?  Name & Address	ceipt 8/25/14		,
DOLAN, PATRICK 32262 RUEHLE ACE WARREN, MI 48093		\$ 100.00	s
5. If over \$100.00 cumulative, please provide:		Click Hara for	Memo Itemization
Occupation PETINGO Employer	the state of the s	Click Hele to	Memo Remization
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
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	Grand Total of All Schedules 1A		
Page 9 of 14		Enter this total on line 3a of Summary Page.	
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#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number	139106	5	_
2. Committee Name	ord Vicki	SELVA	

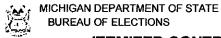
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Contribution # 1 PAC Receipt? Name & Address:	YES 4. Date of Rec	eipt 9/70/14		
NAZQULLA, ZEENATH				
29098 TESSMER CT			75 A	250
MADISON HTS, MI 480 5. If over \$100.00 cumulative, please prov	71		\$ 25.00	\$ 25.00
5. If over \$100.00 cumulative, please prov	ide:		Click Here fo	or Memo Itemization
Occupation	Employer		CHOK HEIE I	of Memo Remization
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? Name & Address	YES 4. Date of Reco	eipt g/re/14		
LEVIN ANDREW				
LEVIN ANDREW 6015 DARRAMOOR	£ m		s 25-0	Ø s
BLOOMFIEZD HILLS, M	48301			
5. If over \$100.00 cumulative, please provi			Click Here fo	r Memo Itemization
Occupation	Employer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? Name & Address:	YES 4. Date of Rec	ceipt 9/25/14		
LIANG, JACK				
(50 WASHINGTON RD	•		s 70.00	\$
GROSSE POINTE, MI	48230		Click Horo fo	r Memo Itemization
5. If over \$100.00 cumulative, please prov	ide:		Click Hete IO	i Memo itemization
Occupation	Employer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser	<del></del>	
NI O Adduses	YES 4. Date of Re			
: CHALDEAN CHAMB 29850 NORTHWES	OR OF COMME	CLE		
29850 NORTHWES	STERN HWY	518 250	\$ 250.00	7)
2 SOUTHARDD, MIN	8034		\$ -000.	\$
5. If over \$100.00 cumulative, please prov	lde:	,	Click Horo fo	r Memo Itemization
Occupation	Employer		· A Click rele to	i Metho itentization
		/		
Business Address			,	*
Type of Contribution: \( \forall \) Direct	Loan from a person	Fund Raiser		
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		Grand Total of All Schedules 1A		
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#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number 39 106
2. Committee Name VOTO VICE SBLVA

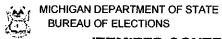
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Contribution # 1 PAC Receipt?  Name & Address:	YES 4. Date of Rece	eipt 10/14/14		
Ly LOS DAVID  2643 POW HATAN ST.  ARLINGTON, VA 2226  5. If over \$100.00 cumulative, please pro-	57 vide:	,	\$ 100.00	
Occupation RETINED	_ Employer		Click Here to	or Memo Itemization
Business Address				
Type of Contribution: X Direct	Loan from a person	Fund Raiser		
Contribution #2 PAC Receipt? [ Name & Address	YES 4. Date of Rece	ipt 10 13 N		
D'ANGELO, JOSEPH 211 MERRICL #50. BIRMINGHAM, AIY	3 8009		\$ 7,000.0	
5. If over \$100.00 cumulative, please prov		Mr. A		r Memo Itemization
Occupation AND DEVELOPER  Business Address 211 MERRIL	Employer SEF-CMI	MAGBO	_	
Business Address 21/ MBRALL	1 4 203 BIRMIN	19 HAM, MI 4800)	Í	
Type of Contribution: Direct	Loan from a person	Fund Raiser		
Contribution # 3 PAC Receipt?  Name & Address:	YES 4. Date of Reco	eipt 10/17/14		
KENNEDY, RICHARD 4195 SANDY CREEK. SHELBY TENP., MIY	DR. 8316		\$ 50.00	\$ • Memo Itemization
5. If over \$100.00 cumulative, please pro-				
Occupation	Employer			
Business Address  Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 PAC Receipt?		<u> </u>		
Name & Address	ت	0/// //4		
HEAT: FROST LOCAL				
21353 BRIDGE ST			\$ 100.00	\$
SOUTHE IELD, Mr 4803 5. If over \$100.00 cumulative, please pro				
J. II Over \$100.00 cumulative, please pro	*1401		Click Here for	Memo Itemization
Occupation	_ Employer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
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#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_

O/All	1010/112			2. Committee Name	· · · · · · · · · · · · · · · · · · ·	
	o indicate if contr	ntribution is from an individu ibution is from a Political Cor egardless of amount.		,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:  MICHIGAN DET  LOUG TOWNSEN  LANSING, MI  5. If over \$100.00 cumula	) 48993	PARTY-STATE			\$ 500.00	\$
Occupation		Employer			Click Here to	or Memo Itemization
Business Address	Direct	Loan from a person		Fund Raiser		
3. Contribution #2 Name & Address PIPEFITEES	PAC Receipt?	<b></b>	eceip	ot 8/11/14		
30100 NORTH	I WOSTER	البرج			\$ 700.0	70 <sub>\$</sub>
FARMINGTSN 5. If over \$100.00 cumular	•	- /			Click Here fo	or Memo Itemization
Occupation					Short Hold to	THOME ROTHLESS
Business Address						
Type of Contribution:	Direct	Loan from a person	$\overline{\Box}$	Fund Raiser		
3. Contribution #3 Name & Address:  VAW /V- PAC  SECO E. JEFF  DETROIT MI  5. If over \$100.00 cumula	GERSON 48214		ecei	m <u>8/9//-4</u>	\$ /ood, oo	sr Memo Itemization
Occupation		Employer				
Business Address Type of Contribution: X	Direct	Loan from a person		Fund Raiser		
Contribution # 4     Name & Address	PAC Receipt?	YES 4. Date of F	Rece	sipt 8/11/14		
PLUMBETES 555 HORACE MADISON HT 5. If over \$100.00 cumula	98 Blown 5, MI 4 tive, please pro	     SOD     vide:			\$ 200,0	\$r Memo Itemization
Occupation		_ Employer			011010110101010	momo nomeation
Business Address						
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
Page 12 of 14		(Co		Page Subtotal and Total of All Schedules 1A lete on last page of Schedule)	Enter this total on line 3a of Summary Page.	
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#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number 139 106

2. Committee Name	OTA VIC	KI SELVA
ter last name, first name	6 Amount	7 Cumulative for

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 9/15/14 Name & Address:  MALOMIS COMMUNITY GOLDS FACULTY ORGAN  MCCFO 14500 12 MILE RD.  WARREN, MI 48088  5. If over \$100.00 cumulative, please provide:		ン §or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? XYES 4. Date of Receipt 9/5//4  Name & Address  (M&A)		
38550 GARFIELD STEB CLINTON TUP., MI HO38	\$ 300.00	» <sub>\$</sub>
5. If over \$100.00 cumulative, please provide:	Click Here fo	r 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 9/24/14  Name & Address:		
LEVIN FOR CONGRESS P.D. BOX 37 ROSEVILLE, MI 4806 C 5. If over \$100.00 cumulative, please provide:	\$ /000.0	%
Occupation Employer		
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? X YES 4. Date of Receipt 10 11		
FRIENDS OF MACONB 3985C BRY LOR CT: CLINTON TEXP. MI 48038  5. If over \$100.00 cumulative, please provide:	\$ 250.0	φ
Occupation Employer	Click Here to	Memo Itemization
Occupation		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	<i>i   por ser-</i> a	
Page Subtotal  Grand Total of All Schedules 1A (Complete on last page of Schedule)  Page 13 of 14	Enter this total on line 3a of Summary Page.	

#### **CANDIDATE COMMITTEE**

Page.

Enter contributor's name and address. If contribution is from an individual, enter last name, middle initial. Check box to indicate if contribution is from a Political Committee or an Indep Committee (PAC) Report <u>all</u> contributions regardless of amount.	first name, 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 /10	0/14
MELTON FOR MICHIGAN	
2285 SNELLBROOK AUBURN HILLS, MI 4832C	\$ 1500.00 \$
	\$
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 10/17 Name & Address	7/14
UTICA PUBLIC AFFAIRS COMMITIES	
13969 PLUMBROOK	s 3w.oo s
STERCING 1473, MI 48312	
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	·
	- Leel
<ol> <li>Contribution #3 PAC Receipt? YES 4. Date of Receipt /0 /12</li> <li>Name &amp; Address:</li> </ol>	114
CTG HAROLD HUGH	
19464 CANDLELIGHT WILL RETURN	\$ 200.00 s
RUSEVILLE, MI 48066 EXCESS \$ 100	Click Horo for Mama Itamiration
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 9/9	14
CHIRKUN, LOHN	
31229 MERRILY	50,00
DeSEVIII MI 48066 5. If over \$100.00 cumulative, please provide:	<u>v 5</u>
Occupation Employer	Click Here for Memo Itemization
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Type of Contribution: Direct Loan from a person Fund Raiser	<del></del>
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	Page Subtotal 2050, 00
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	line 3a of Summary

Page 1 of 14

### ITEMIZED IN-KIND CONTRIBUTIONS

#### **SCHEDULE 1-IK**

1. Committee I. D. Number \_\_\_\_\_\_13916

CANDIDATE COMM	NTTEE 2. Committee Name Votto Vic	KI SELVA
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 apprehased	vere  7. Amount or Fair Market For Election Cycle (Through date in Item 5)
Contribution #1 PAC Receipt? Yes Name & Address:  SELVA, VICLU  55555 BLOUGHTON  MACING, M. 48047  If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Business Address:  SELVA STRATEGIES LLC  ATOME	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 ☐ Description ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	\$ 277.00 \$  DAN  Click Here for Memo Itemization
Fund Raiser Contribution  Contribution #2 PAC Receipt? Yes Name & Address  SELVA, VICKI  SSSS BROUGHTON  WACON B MI +8042  If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Address:  STLVA 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-L Description GO DADY WEBS, 735  5. Date Of Receipt: 9 10 14  6. Vendor Name & Address: GO DADDY - ON LINE	\$ 30;44 \$  OAN  Click Here for Memo Itemization
Fund Raiser Contribution  Contribution #3 PAC Receipt? Yes Name & Address:  HAY MAN, FIGRENCE  53540 GRACE De.  NEW BALTI MORE, M. 4804 of 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-LO Description  The PS  5. Date Of Receipt: 10 03 14  6. Vendor Name & Address: U.S. POSTMASTER	\$_58,80 \$
Fund Raiser Contribution	Page S  Grand Total of all Schedul	es 1-IK \$ 2// 7/

Enter this total on line 6 of Summary Page



### ITEMIZED IN-KIND CONTRIBUTIONS

#### SCHEDULE 1-IK

1. Committee I. D. Number 139 106

CANDIDATE COMM	IITTEE 2. Committee Name Vo To VICICI	SELVA	<u> </u>
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:  SEZVA, VICKI  55555 BROUG HTDI  H over \$100.00 currullative, please provide: Occupation:  Employer Name & Business Address:  SEZVA STRATEGIES LLL.  Fixed Paiser Contribution	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN  Description	s 31.04 s	nization
Fund Raiser Contribution  Contribution #2 PAC Receipt? Yes Name & Address  Stalva, Vicla  SSSS Bloug 470  Wacon B M, 48042  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 PRINTING  5. Date Of Receipt: 6 12 14  6. Vendor Name & Address:	76,32 \$	emization
Fund Raiser Contribution  Contribution #3 PAC Receipt? Yes Name & Address:  If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4.	\$ Click Here for Memo Ite	emization
Fund Raiser Contribution	Page Subto Grand Total of all Schedules (Complete on last page of Sched	1-IK //-77 / 2	

Enter this total on line 6 of Summary Page



## SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 139106

2. Committee Name 1016 1/100 551 1/4

2. 0	ommittee Name 1818 110101	JELVA
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date 6. Amount
Expenditure #1		1/
Name BUCA di BEPPO		8/7/14 \$ 1011.83
Address 12575 HALL RD.	Purpose: FUNDRAISER/KICK O	F-Date
UTICA, MI 48317	Click I	Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	
Expenditure #2  Name American GRAPHICS PRINTING Co.	Purpose: PRINTING	8 78.32 Date 78.32
CLINTON TWP., M. 48035	•	Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	
Expenditure #3		1
Name PRACTICAL POLITICAL CONSHITY		9/19/14 \$ 200.00
Address 920 N. WASHINGTON AUG.	Purpose: MAIL LISTS	Date
LANSING, MI 48906	Click to Check box if this expenditure is payment of debt or obligation reported on previous	Here for Memo Itemization Type
Fund Raiser	statement	
Expenditure #4  Name FRIDNDS OF HONRY YANGE		8/25/14 \$ 25,00
Address 14052 BERRY	Purpose: FUNDRAISER	24.0
STERLING HTS, HI 48312	Click	Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	
Expenditure #5		1
Name Vicky SELVA		9/20/14 \$ 277 m
Address 55555 BROUGHTUN MACOMB, M. (80.42	Purpose AD HOAN KET ATIVE	5 Date
MACOMB, Mr. MODIT	I	Here for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	K
	Subt	total this page 1590.15
	Grand Total of all (Complete on last pag	Schedules 1B

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## SCHEDULE 1B

1. Com	mittee	e I. D.	Number _	139	7106		
	***		11."	170	Nicks	5511/A	

CANDIDATE COMMITTEE 2, C	ommittee Name <u>Volla Vicinia .</u>	- J J J	
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		1/1	1
Name CIG NOWSPAPERZ		9/23/14	\$ 1016.67
Address 13650 11 Milt RD.	Purpose: AD	Date	amiumtian Typo
WARREN, M. 48089	Click	Here for Memo It	emzadon rype
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2		. / / ,	
Name MASS MAILING	Purpose: MAILING SERVICES	9/23/14 Date	\$ 375.00
Address 35468 MOUND RD.	Purpose: 1 (W/C/)		
Grending HTS, MI 48312	gartellaring	Here for Memo I	emization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	f	
Expenditure #3		, 1	
Name U.S. POSTMASTER		9/23/14	f \$ 2170.00
Address 578 RUNG 1773, M.	Purpose: MAIL POSTAGE	Date	
	Click	Here for Memo I	emization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous	Ť	
	statement	. /	/
Expenditure #4  Name HARLAND CLARKE CHECKS		7/30/14	\$ <u>29.68</u>
Address HUNTINGTON BANK	Purpose: CHECKORDER	Date	
7755 23 MIG RD	Click	Here for Memo l	temization Type
SHETBY TWP., M. 48316	Check box if this expenditure is payment of debt or obligation reported on previous	of	
Fund Raiser	statement		
Expenditure #5		1 /	
Name HUNTINGTON BANK	211.011	8/15/14	\$ 25 do
Address 7755 23 mile RD.	Purpose: STATEMENT CHARCE		
Address 7755 23 milt RD. SHEZBY TWP., MI 48316	Click Check box if this expenditure is payment of	k Here for Memo of	Itemization Type
Fund Raiser	debt or obligation reported on previous statement		
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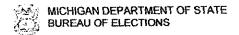
# SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 13910C

CANDIDATE COMMITTEE 2. Co	ommittee Name VolG V: C(C)	JELVA	
Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		-/-/	
Name PAY PAL		7/1-10/1	/\$ <u>15.73</u>
Address 2211 N. 18757.	Purpose: FGG S	Here for Memo I	•
SAN Jose, (A 95131	<b></b>		
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2		-1//	
Name AMERICAN GRAPHICS PRINTING CO.	Purpose: TRINTING	9/24/14 Date	s <u>938, 6</u> 9
Address 34895 GROESBECK Hwy		Here for Memo I	temization Type
CLINTON TOUP., MI 48035	printer,	_	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	f	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Expenditure #3		, /	,
Name AMERICAN GRAPHICS PRINTING G.		10/19/14	\$ 2486.23
Address 311895 GRUESBEEL HWY	Purpose: PRINTING	Date	
CLINTON TWP., MI 48035	l —	Here for Memo	temization Type
Fund Raiser	L. Check box if this expenditure is payment of debt or obligation reported on previous statement	f	
Expenditure #4		1/	
Name MASS MAILING		10/3/14	\$ 2318.4
Address 35468 Mound RD.	Purpose: MAIL SGRVICE	Date	
STEPPLING HTS, MI 48312	Click		Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	of	
Expenditure #5		, }	
Name MACOMB COUNTY DEMOCRATIC CLUB Address BG S. MAIN MT. CLEMENS, M. 48043	Purpose: MtmBBBBSHIP	10 17 Date	4 \$ 100.00
Address 136 S. MAIN		k Hara for Maren	Itemization Type
MT. CLEMENS, M. 48043	Check box if this expenditure is payment debt or obligation reported on previous		Remization Typo
Fund Raiser	statement	htatal this page	-a-0 11
		btotal this page	5857.1
	Grand Total of a (Complete on last pa	all Schedules 1B age of Schedule)	

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# SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 139166

2. Committee Name VOTE VICE Selva

de a	
Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. Date 6. Amount
Expenditure #1	
Name	, \$
Address	Purpose: Date
	Click Here for Memo Itemization Type
<b></b>	Check box if this expenditure is payment of debt or obligation reported on previous
Fund Raiser	statement
Expenditure #2	
Name VICLI SELVA	10/19/14 \$ 31.06
Artifrace CT 20 cc (1754)	Purpose: LOAN REPAYMENT Date    Date
Address 55555 BROUGHTON	いどりerz Click Here for Memo Itemization Type
MACOMB, M1, 48042	Slick Field for Method Rectification 1795
1000	Check box if this expenditure is payment of debt or obligation reported on previous
Fund Raiser	statement
Expenditure #3	
Name Vidu SOLVA	10/19/14 : 30.44
Address 55555 BOZOUGHTO	10/19/14 \$ 30.44  Purpose: LOAN REPAYMENT Date
Address \$5555 Webber 115	,
MACOMB, M. 48042	Click Here for Memo Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous
Fund Raiser	statement
Expenditure #4	I = I
Name Ville SELVA	4/12/14 s 76:32
• -	Purpose: LOAN REPAYMENT Date \$ 7632
Address 55555 Brang HTOW	Purpose: Lorio CG 10: [1-35-1
MACOMB, M. 48042	Click Here for Memo Itemization Type
,	Check box if this expenditure is payment of
Fund Raiser	debt or obligation reported on previous statement
Expenditure #5	
Name	
	\$
Address	Purpose:
	Click Here for Memo Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous
Fund Raiser	statement
	Subtotal this page 137.82

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

Enter this total on line 8a of Summary Page

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## **FUND RAISER SCHEDULE 1F**

FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE		1. Committee I.D. Number 139106				
		2. Committee Name	2. Committee Name VOTE VICLI SELVA			
	- USE A SEPARATE SHEET FOR EACH EVENT -					
3. Date Event Was Held	Number of Individuals or Participating (whichev greater)	er is	d Raising Activity	6. Address and Name (If any) of the place where the activity was held.		
8/7/14	- 29	KICK- RECT F	770~	BUCA ON BEPPO  Private Residence		
7. Total Contributions	\$190	00.00				
8. Other Receipts	<del></del>	<u> </u>	<del></del>			
9. Gross Receipts (Add line	es 7 and 8) 4 190	00.00				
10. Total Cost of Event (Total Cost includes In-Kine	d Contributions and All Ex	1110	e Event)			
11. Check if event was	a joint fund raiser and co	mplete the following:				
Co-Sponsor(s)	Cor	ntribution Split (%)		Expenditure Split (%)		
		- All Alle Andrews				
	<u></u>			· · · · · · · · · · · · · · · · · · ·		
•						
	<del></del>					
<u></u>	<del></del>					
period covered by	required to file a separate the Campaign Statement.					
Schedule (1A), Ite	enditures listed on a Fund mized In-Kind Contribution	Raiser Schedule must ans Schedule (1-IK), Item	ilso be reported on ized Expenditures	the Itemized Contributions Schedule (1B) and the		
Summary Page.  • Each committee the	nat participated in a joint fu	nd raiser must file a Fur	nd Raiser Schedule	for the event.		
Page of						