



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 <div style="font-size: 1.5em; font-family: cursive;">137681</div>		3. This Statement covers From: <u>1-1-15</u> to <u>10-18-15</u>	
2. Committee Name <div style="font-size: 1.5em; font-family: cursive;">CTE ROBERT R. TAYLOR</div>		4. Candidate Last Name <u>Taylor</u> First Name <u>ROBERT</u> <span style="float: right;">M.I. <u>R.</u></span> 4a. Office sought Including District # or Community Served (If applicable) <div style="font-size: 1.5em; font-family: cursive;">MAYOR</div> 4b. County of Residence <u>MACOMB</u>	
5. Committee's Mailing Address <div style="font-size: 1.5em; font-family: cursive;">18303 HAZELWOOD ROSEVILLE, MI 48066</div> Area Code and Phone <u>586-943-4324</u> <small>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.</small>		6. Treasurer's Name & Residential Address <div style="font-size: 1.5em; font-family: cursive;">ROBERT R. TAYLOR 18303 HAZELWOOD ROSEVILLE, MI 48066</div> Area Code & Phone <u>586-943-4324</u>	
7. Treasurer's Business Address <div style="font-size: 2em; font-family: cursive;">N/A</div> Area Code and Phone _____		8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) <div style="font-size: 2em; font-family: cursive;">N/A</div> Area Code and Phone _____	

FILED  
15 OCT 20 PM 2:16  
MACOMB COUNTY CLERK  
MT. CLEMENS, MICHIGAN

<b>9. TYPE OF STATEMENT</b> 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 <div style="font-size: 1.5em; font-family: cursive;">NOV 3, 2015</div>	Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input checked="" type="checkbox"/> October Quarterly  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.)	<b>9e. Dissolution of Candidate Committee</b> <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.
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**10. Verification:** I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Record keeper	ROBERT R. TAYLOR	Signature	[Signature]	Date	10/20/15
Candidate	ROBERT R. TAYLOR	Signature	[Signature]	Date	10/20/15



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

1. Committee I.D. Number

137681

2. Committee Name

CTE ROBERT R. TAYLOR

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>5365</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>5365</u>	(18.) \$ <u>5365</u>
<b>4. Other Receipts (Schedule 1A -1, Column 6)</b>			
	(4.) \$	<u>—</u>	(19.) \$ <u>—</u>
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$	<u>5365</u>	(20.) \$ <u>5365</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>			
<b>6. In-Kind Contributions (Schedule 1-IK, Column 7)</b>			
	(6.) \$	<u>—</u>	(21.) \$ <u>—</u>
<b>7. In-Kind Expenditures (Schedule 1B-IK, Column 6)</b>			
	(7.) \$	<u>—</u>	(22.) \$ <u>—</u>
<b>EXPENDITURES</b>			
<b>8. Expenditures</b>			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>2054.49</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>—</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>—</u>	
<b>9. TOTAL EXPENDITURES</b> (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>2054.49</u>	(23.) \$ <u>2054.49</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)			
<b>10. Disbursements</b>			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>—</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>—</u>	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$	<u>—</u>	(24.) \$ <u>—</u>
<b>DEBTS AND OBLIGATIONS</b>			
<b>12. Debts and Obligations</b>			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>—</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u>—</u>	
<b>BALANCE STATEMENT</b>			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>95268</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>5365</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>631768</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>2054.49</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>426319</u>	



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 137681  
2. Committee Name CTE ROBERT R. TAYLOR

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)
<p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9-23-15</u></p> <p>Name &amp; Address: <u>GREG SCOTT</u> <u>87836 KAUFMAN</u> <u>ROSEVILLE, MI 48066</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>20</u>	\$ <u>20</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9-23-15</u></p> <p>Name &amp; Address: <u>ALFREDO FRANCESCONI</u> <u>16444 BOWMAN</u> <u>ROSEVILLE, MI 48066</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>20</u>	\$ <u>20</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9-23-15</u></p> <p>Name &amp; Address: <u>SCOTT ARNOLD</u> <u>27243 PINELWOOD</u> <u>ROSEVILLE, MI 48066</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>50</u>	\$ <u>50</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>9-23-15</u></p> <p>Name &amp; Address: <u>RICHARD EUBANKS</u> <u>25276 COLLINGWOOD</u> <u>ROSEVILLE, MI 48066</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>50</u>	\$ <u>50</u>
		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal

140

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 137681  
2. Committee Name CTE ROBERT R. TAYLOR

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>9-23-15</u>	
Name & Address: <u>KYLE SEIDEL</u> <u>3535 ANVIL DR</u> <u>TROY, MI 48083</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-23-15</u>	
Name & Address: <u>GARY TAYLOR</u> <u>633B LOZON</u> <u>COTTERVILLE TWP, MI 48039</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-23-15</u>	
Name & Address: <u>ROBERT FROMMATH</u> <u>29450 GROESBECK</u> <u>ROSELLE, MI 48066</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation <u>OWNER</u> Employer <u>VANS TOWING</u>			
Business Address <u>29450 GROESBECK</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>9-23-15</u>	
Name & Address: <u>DAVID WINDFIELD</u> <u>2168 COVE</u> <u>WALES, MI 48027</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

400

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 137681  
2. Committee Name CTE ROBERT R. TAYLOR

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>9-23-15</u>	
Name & Address: <u>KEVIN SWITANOWSKI</u> <u>29256 COMMONWEALTH</u> <u>ROSEVILLE, MI 48066</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-23-15</u>	
Name & Address: <u>GARY KIESGEN</u> <u>39401 CYPRESS</u> <u>CLINTON TWP, MI 48036</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-23-15</u>	
Name & Address: <u>MARK DOUGLAS</u> <u>1920 LINCOLNSHIRE</u> <u>DETROIT, MI 48203-1415</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-23-15</u>	
Name & Address: <u>MARCO SANTIA</u> <u>33540 HAYES</u> <u>FRASER, MI 48226-3542</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

\$200.00

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 137681  
2. Committee Name CTE ROBERT R. TAYLOR

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>9-23-15</u>	
Name & Address: <u>DOUGLAS PINNICK</u> <u>3770 LAKE FOREST</u> <u>STERLING HEIGHTS, MI 48314-4313</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-23-15</u>	
Name & Address: <u>SHARON MAAS</u> <u>5222 S MARCELLO</u> <u>MALOMB TWP, MI 48042</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>9-23-15</u>	
Name & Address: <u>HAROLD HAUETT LEADERSHIP FUND</u> <u>19464 CANDLELIGHT</u> <u>ROSEVILLE, MI 48066</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-23-15</u>	
Name & Address: <u>GREGORY BISCHER</u> <u>20417 WINDHAM</u> <u>MALOMB TWP, MI 48044</u>		\$ <u>75</u>	\$ <u>75</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

\$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 137681  
2. Committee Name CTE ROBERT R. TAYLOR

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-23-15</u></p> <p>Name &amp; Address: <u>ILENE BISCHER</u> <u>8047 WINDHAM DR</u> <u>MALOMB TWP, MI 48044</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>75</u>	\$ <u>75</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-23-15</u></p> <p>Name &amp; Address: <u>FRANK MAISANO</u> <u>86740 BARBARA</u> <u>ROSEVILLE, MI 48066</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>100</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #3 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>9-23-15</u></p> <p>Name &amp; Address: <u>CTE JOHN CHIRKUN STATE REP</u> <u>31229 MEARLY</u> <u>ROSEVILLE, MI 48066</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>100</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-23-15</u></p> <p>Name &amp; Address: <u>ROY ROSE</u> <u>5560 WOODRIDGE</u> <u>SHELBY TWP, MI 48316</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>100</u>
		<a href="#">Click Here for Memo Itemization</a>	

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 137681  
2. Committee Name CTE ROBERT R. TAYLOR

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)
<p>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-23-15</u></p> <p>Name &amp; Address: <u>SCOTT LORKWOOD</u> <u>950 SOUTHDOWN</u> <u>BLOOMFIELD MI 48304</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>100</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-23-15</u></p> <p>Name &amp; Address: <u>THERESA GENEST</u> <u>16631 WATERMAN</u> <u>ROSEVILLE, MI 48066</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>50</u>	\$ <u>50</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-23-15</u></p> <p>Name &amp; Address: <u>PHILIP LONGUEUIL</u> <u>17975 COMMON</u> <u>ROSEVILLE, MI 48066</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>50</u>	\$ <u>50</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-23-15</u></p> <p>Name &amp; Address: <u>JOHN YEE</u> <u>26467 ELM</u> <u>ROSEVILLE, MI 48066</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>100</u>
		<a href="#">Click Here for Memo Itemization</a>	

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.





MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 137681  
2. Committee Name CTE ROBERT R. TAYLOR

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>9-23-15</u> Name & Address: <u>CTE STEVE BIEDA SENATOR</u> <u>P.O. BOX 1311</u> <u>WARREN, MI 48090</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-23-15</u> Name & Address: <u>DENNIS MORIER</u> <u>23636 W. LAKE CIR.</u> <u>BROWNSTOWN TWP, MI 48183-2977</u>		\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>SELF</u> Employer <u>RESULTS MARKETING</u> Business Address <u>28 W. ADAMS #300 DETROIT, MI 48228</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-23-15</u> Name & Address: <u>DIANA MAGNOLI</u> <u>6402 BAYPOINT DR</u> <u>WASHINGTON, MI 48094</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-23-15</u> Name & Address: <u>LISA MANCINI</u> <u>30078 SCHOENHERR STE 300</u> <u>WARREN, MI 48088</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

\$700

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 137681  
2. Committee Name CTE ROBERT R. TAYLOR

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>9-23-15</u>	
Name & Address: <u>JOSEPH MUNEM</u> <u>6200 ELMRIDGE</u> <u>STERLING HEIGHTS, MI 48313</u>		\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>VICE PRES</u> Employer <u>RIZZ ENVIRONMENTAL</u> Business Address <u>6200 ELMRIDGE STERLING HGT'S 48313</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-23-15</u>	
Name & Address: <u>BAY JARBOU</u> <u>28420 GROESBECK</u> <u>ROSEVILLE, MI 48066</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-23-15</u>	
Name & Address: <u>MATT RICHTER</u> <u>701 E. FARNUM</u> <u>ROYAL OAK, MI</u>		\$ <u>50</u>	\$ <u>50</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 # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-23-15</u>	
Name & Address: <u>TIMOTHY MCGILLEN</u> <u>27830 GRATIOT</u> <u>ROSEVILLE, MI 48066</u>		\$ <u>50</u>	\$ <u>50</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	

Page Subtotal

\$650.00

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

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line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 137681  
2. Committee Name CTE ROBERT R. TAYLOR

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>10-2-15</u>	
Name & Address: <u>MICHAEL BATKE</u> <u>19090 ROSEGARDEN</u> <u>ROSEVILLE, MI 48066</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>25.00</u>	\$ <u>25.00</u>
		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-1-15</u>	
Name & Address: <u>TONY GALLO</u> <u>6303 26 MILE</u> <u>WASHINGTON TWP, MI 48094</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>50</u>	\$ <u>50</u>
		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-5-15</u>	
Name & Address: <u>STEPHEN SAPH JR</u> <u>44 MACOMB PL</u> <u>P.O. BOX 46907</u> <u>MT CLEMENS, MI 48046-6907</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>INSURANCE AGENT</u> Employer <u>SELF</u> Business Address <u>44 MACOMB PL MT CLEMENS, MI 48046</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>250</u>	\$ <u>250</u>
		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-25-15</u>	
Name & Address: <u>ALMA JAMBUS</u> <u>27354 DEMRIK</u> <u>ROSEVILLE, MI 48066</u>			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>25</u>	\$ <u>25</u>
		Click Here for Memo Itemization	

Page Subtotal

\$350.00

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

Enter this total on  
line 3a of Summary  
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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 137681  
2. Committee Name CTE ROBERT R. TAYLOR.

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>9-25-15</u>	
Name & Address: <u>DEAN ALAN</u> <u>1 S MAIN 3RD FLOOR</u> <u>MTCLEMENS</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-23-15</u>	
Name & Address: <u>JOSEPH BOEDEKER</u> <u>29777 GRATIOT</u> <u>ROSEVILLE, MI 48066</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-24-15</u>	
Name & Address: <u>ROBERT ZERAFKA</u> <u>12223 EAST RIDGE</u> <u>BRUCE TWP, MI 48065</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>9-28-15</u>	
Name & Address: <u>PIPEFITTERS LOCAL 636</u> <u>POLITICAL ACTION COMMITTEE</u> <u>30100 NORTHWESTERN HIGHWAY</u> <u>FARMINGTON HILLS, MI 48334</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

\$300.00

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

Enter this total on  
line 3a of Summary  
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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 137681  
2. Committee Name CTE ROBERT R. TAYLOR

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>9-23-15</u>	
Name & Address: <u>JOE ORAM</u> <u>4585 ARLINE</u> <u>WEST BLOOMFIELD, MI 48323-2503</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>VIP MEDIA INC</u> Business Address <u>27551 GREENFIELD SUITE 219 SOUTHFIELD MI 48076</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-23-15</u>	
Name & Address: <u>JOHN BURKE</u> <u>48210 LAKE VALLEY</u> <u>SHELBY TWP, MI 48317</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-23-15</u>	
Name & Address: <u>TIMOTHY TOMLINSON</u> <u>42850 GARFIELD STE 101</u> <u>CLINTON TWP, MI 48038</u>		\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>YORK, DOLAN &amp; TOMLINSON P.C.</u> Business Address <u>42850 GARFIELD STE 101 CLINTON TWP, MI 48038</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-23-15</u>	
Name & Address: <u>JOHN DOLAN</u> <u>42850 GARFIELD STE 101</u> <u>CLINTON TWP, MI 48038</u>		\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>ATTORNEY</u> Employer <u>YORK, DOLAN &amp; TOMLINSON P.C.</u> Business Address <u>42850 GARFIELD STE 101 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		Click Here for Memo Itemization	

Page Subtotal

\$1300

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

Enter this total on  
line 3a of Summary  
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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 137681  
2. Committee Name CTE ROBERT R. TAYLOR

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>9-23-15</u>	
Name & Address: <u>SUZANNE PIXLEY</u> <u>24305 GROVE</u> <u>EASTPOINTE, MI 48021</u>		\$ <u>25</u>	\$ <u>25</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-23-15</u>	
Name & Address: <u>RUTH GREEN</u> <u>17812 OAKDALE</u> <u>ROSEVILLE, MI 48066</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-23-15</u>	
Name & Address: <u>JAMES ZELMANSKI</u> <u>28211 COLE</u> <u>ROSEVILLE, MI 48066</u>		\$ <u>100</u>	\$ <u>100</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 # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-23-15</u>	
Name & Address: <u>MICHAEL BUSCH</u> <u>20021 WALLACE</u> <u>ROSEVILLE, MI 48066</u>		\$ <u>50</u>	\$ <u>50</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

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

\$225.00  
\$5365

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 137681  
2. Committee Name CTE ROBERT R. TAYLOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<p>Expenditure #1</p> <p>Name <u>SAWICKI &amp; SONS</u></p> <p>Address <u>1521 W. LAFAYETTE</u> <u>DETROIT, MI 48216</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>YARD SIGNS</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<u>5-28-15</u>	<u>\$ 355<sup>10</sup></u>
<p>Expenditure #2</p> <p>Name <u>SIGNS BY TOMORROW</u></p> <p>Address <u>33251 GRATIOT</u> <u>CLINTON TWP, MI 48035</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>PARADE SIGNS</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<u>5-29-15</u>	<u>\$ 68<sup>90</sup></u>
<p>Expenditure #3</p> <p>Name <u>OFFICE DEPOT</u></p> <p>Address <u>33840 GRATIOT</u> <u>CLINTON TWP, MI 48035</u></p> <p><input checked="" type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>MAILING SUPPLIES</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<u>9-11-15</u>	<u>\$ 41<sup>86</sup></u>
<p>Expenditure #4</p> <p>Name <u>ROSEVILLE P.O.</u></p> <p>Address <u>30550 GRATIOT</u> <u>ROSEVILLE, MI 48066</u></p> <p><input checked="" type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>STAMPS</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<u>9-15-15</u>	<u>\$ 98<sup>00</sup></u>
<p>Expenditure #5</p> <p>Name <u>CTG NEWSPAPER</u></p> <p>Address <u>13650 11 MILE</u> <u>WARREN, MI 48089</u></p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: <u>ADS</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<u>10-15-15</u>	<u>\$ 258<sup>00</sup></u>

Subtotal this page

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

821<sup>86</sup>

Enter this total  
on line 8a of  
Summary Page



ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE

1. Committee I. D. Number 137681  
2. Committee Name CTE ROBERT A. TAYLOR

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>AMERICAN GRAPHIS PRINTING CO.</u> Address <u>34895 GROESBECK CLINTON Twp, MI 48035</u> <input checked="" type="checkbox"/> Fund Raiser	FLYERS/TICKETS FOR FUNDRAISER Purpose: <u>FUNDRAISER</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9-14-15</u> Date	<u>\$ 151<sup>58</sup></u>
Expenditure #2 Name <u>LOGANS</u> Address <u>30751 GRATIOT ROSEVILLE, MI 48066</u> <input checked="" type="checkbox"/> Fund Raiser	FUNRAISER EVENT Purpose: <u>FUNRAISER EVENT</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9-23-15</u> Date	<u>\$ 673<sup>02</sup></u>
Expenditure #3 Name <u>C+G NEWSPAPER</u> Address <u>13650 11 MILE WARREN, MI 48089</u> <input type="checkbox"/> Fund Raiser	ADS Purpose: <u>ADS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9-28-15</u> Date	<u>\$ 258<sup>00</sup></u>
Expenditure #4 Name <u>CTE TIMOTHY HOSTE</u> Address <u>15435 CHESTNUT ROSEVILLE, MI 48066</u> <input checked="" type="checkbox"/> Fund Raiser	DONATION Purpose: <u>DONATION</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9-23-15</u> Date	<u>\$ 50<sup>00</sup></u>
Expenditure #5 Name <u>RCSSF</u> Address <u>18975 CHURCH ROSEVILLE, MI 48066</u> <input type="checkbox"/> Fund Raiser	HOLE SPONSER DONATION Purpose: <u>DONATION</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9-19-15</u> Date	<u>\$ 100<sup>00</sup></u>

Subtotal this page

1232<sup>63</sup>

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

2054<sup>49</sup>

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 137681  
2. Committee Name CTE ROBERT R-Taylor

**- USE A SEPARATE SHEET FOR EACH EVENT -**

3. Date Event Was Held <u>Sept 23, 2015</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>50</u>	5. Type of Fund Raising Activity <u>MEET &amp; GREET</u> <u>MAYOR of ROSENCE</u>	6. Address and Name (If any) of the place where the activity was held. <u>LOGAN'S ROADHOUSE</u> <u>30151 GRATIOT,</u> <u>ROSENCE, MI 48066</u> <input type="checkbox"/> Private Residence
--	---	--	--

7. Total Contributions 5365  
8. Other Receipts —  
9. Gross Receipts (Add lines 7 and 8) 5365  
10. Total Cost of Event 96449  
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

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

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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