

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

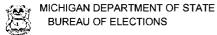
| the treasurer (or designated record keeper) and ca | signed by andidate. | 3. This Statement covers From | ^{n:} 01/01/15 to | 10/18/15 |
|--|----------------------------------|---|-------------------------------|--|
| 1. Committee I.D. Number | | 4. Candidate Last Name | First Name | M.I. |
| 138477 | | Taylor | Michael | С |
| 0.0000000000000000000000000000000000000 | | 4a. Office Sought Including Dis | strict # or Community Served | f (If applicable) |
| 2. Committee Name | | Sterling Heights Mayo | or | |
| CTE Michael C. Taylor | | 4b. County of Residence MA | СОМВ | |
| 5. Committee's Mailing Address | | 6. Treasurer's Name & Reside | ential Address | |
| 10 S. Main Street, Suite 401 | | Michael C. Taylor | | |
| Mt. Clemens, MI 48043 | | 10 S. Main Street, Suite 401 | | |
| | | Mt. Clemens, MI 48043 | | |
| (500) 000 0500 | | | | 1 23 FIL |
| Area Code and Phone (586) 822-3500 If the address in this box is different from the comm | ittee | | | নে গাট্ |
| mailing address on the Statement of Organization, r be sent to this address by the filing official. | | Area Code & Phone (586) 82 | 22-3500 | |
| 7. Treasurer's Business Address | | 8. Designated Record keeper | | ss (If the sommittee Ras a |
| 10 S. Main Street, Suite 401 | | Designated Record keeper) | o ramo ana mamig raaroo | 84 SH SH SH SH SH SH SH SH SH SH SH SH SH |
| Mt. Clemens, MI 48043 | | Nicolas Taylor | | 2 5 |
| INIT. CICINGIIS, WII 40040 | | 52440 Cheswick | | |
| | | Shelby Township, M | 11 48315 | |
| | | | | |
| Area Code and Phone (586) 822-3500 | | (586 | 3) 822-3500 | |
| | _ | Area Code and Phone (300 | 9e. Dissolution of Candi | idate Committee |
| 9. TYPE OF STATEMENT | | NLY if candidate | | |
| 9a. Pre-Election OR 9b. Post-Election | is not on the current year: | ballot for the | by the committee to the ca | I/We certify any outstanding debt andidate or his or her spouse is here |
| Pre-Election or Post-Election Statement relates to: | | | | n, and no longer collectible from hittee has no oustanding assets, |
| Primary | July Quart | terly | owes no lates fees or has a | |
| ▼ General | October Q | Quarterly | Further if the dissolution of | annot be granted, that this be |
| Convention | | | considered a request for th | |
| Special | 9c | al Statement () | | |
| School | Aiiiua | Coverage Year | Effective date of | dissolution |
| Caucus | 9d. Amen | ndment to Campaign Statement | | |
| | , , , | plete Item 9a, 9b, 9c or 9e to te which Statement is being | | esidual funds must be reported on |
| | amend | | Schedule 1B and the Sum | mary Page. |
| Date of Election, Convention or Caucus | | | | |
| 11/03/15 | | | | |
| | | | | |
| | | | | |
| 10. Verification: I\We certify that all reasonable dilige my\our knowledge and belief the contents are true, a | ence was used accurate and co | in the preparation of this statem omplete. | nent and attached schedules | (if any) and to the best of |
| Current Treasurer or Michael C. Ta | vlor | MODI | 1 | 10/23/15 |
| Designated Record keeper Type or Print Name | ., | Signature (| Date | 10/20/10 |
| Type of Fint Name | | 1-1- | | |
| Candidate Michael C. Taylor | | While c. I | Date | 10/23/15 |
| Type or Print Name | | Signature | | |

1. Committee I.D. Number 138477

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name CTE Michael C. Taylor

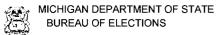
| CANDIDATE COMMITTEE | Column I | Column II |
|--|--|--------------------------------|
| RECEIPTS | This Period | Cumulative this election cycle |
| 3. Contributions | (3a.) \$ 66,490.00 | |
| a. Itemized (Schedule 1A - Column 6) | | |
| b. Unitemized (less than \$20.01 each - no Schedule) | (3b.) \$ NOT APPLICABLE | \$66,400,00 |
| c. Subtotal of "Contributions" | (3c.) \$_\$66,490.00 | (18.) \$ \$66,490.00 |
| 4. Other Receipts (Schedule 1A -1, Column 6) | (4.) \$ _\$0.00 | (19.) \$ \$0.00 |
| 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) | (5.) \$ _\$66,490.00 | (20.) \$ \$66,490.00 |
| IN-KIND CONTRIBUTIONS & EXPENDITURES | | |
| 6. In-Kind Contributions (Schedule 1-IK, Column 7) | (6.) \$ \$321.48 | (21.) \$ \$321.48 |
| 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) | (7.) \$ \$0.00 | (22.) \$ \$0.00 |
| EXPENDITURES | | |
| 8. Expenditures | | |
| a. Itemized (Schedule 1B, Column 6) | (8a.) \$ <u>\$42,269.58</u> | |
| b. Itemized Get-Out-the-Vote (Schedule 1B-G) | (8b.) \$ _\$0.00 | |
| c. Unitemized (less than \$50.01 each - no Schedule) | (8c.) \$ <u>\$0.00</u> | |
| 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) | (9.) \$ \$42,269.58 | (23.) \$ \$42,269.58 |
| INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) | | |
| Disbursements a. Itemized (Schedule 1C, Column 6) | (10a.) \$ \$0.00 | |
| b. Unitemized (less than \$50.01 each - no Schedule) | (10b.) \$ \$0.00 | |
| 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) | (11.) \$ \$0.00 | (24.) \$ \$0.00 |
| DEBTS AND OBLIGATIONS 12. Debts and Obligations | | |
| a. Owed by the Committee (Schedule 1E) | (12a.) \$ _\$4,526.84 | |
| b. Owed to the Committee (Schedule 1E) | (12b.) \$ \$0.00 | |
| 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15) | BALANCE STATEMENT (13.) \$ \$2,729.76 (14.) + \$ \$66,490.00 (15.) = \$ \$69,219.76 (16.) - \$ \$42,269.58 (17.) \$ \$26,950.18 | - |



CANDIDATE COMMITTEE

1. Committee I.D. Number _____138477

| Enter contributor's name and address. If contribution is from an individual, enter last name, first middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount. | · · · · · · · · · · · · · · · · · · · |
|--|--|
| 3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 05/26/15 Name & Address: | |
| Raymond A. Confer 12119 Forest Glen Ln Shelby Township, MI 48315 | _{\$} 1000 _{\$} 1000 |
| 5. If over \$100.00 cumulative, please provide: | Click Here for Memo Itemization |
| Occupation Self Employed Employer C&J Servics | Click Here for Metho Remization |
| Business Address 2200 E. 10 Mile Rd., Warren MI 48091 | |
| Type of Contribution: Direct Loan from a person Fund Raiser | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/26/15 Name & Address | |
| Philip P. Ruggeri 55764 St. Regis Shelby Township, MI 48315 | _{\$} 1000 _{\$} 1000 |
| 5. If over \$100.00 cumulative, please provide: | Click Here for Memo Itemization |
| Occupation Attorney Employer Philip P. Ruggeri & Associates, | PC |
| Business Address 43231 Schoenherr Rd, Sterling Heights, MI 48313 | |
| Type of Contribution: Direct Loan from a person Fund Raiser | |
| 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/26/15 Name & Address: | |
| Rizzo Environmental Services PAC 6200 Elmridge | \$ 1000 \$ 1000 |
| Sterling Heights, MI 48313 | 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 05/26/15 Name & Address | |
| Salvatore LaGrasso 53920 Dominique Ct. Shelby Township, MI 48315 | _{\$} 200 |
| 5. If over \$100.00 cumulative, please provide: | Click Here for Memo Itemization |
| Occupation Self-Employed Employer United Lawnscape | Click Fiere for Memoritanization |
| Business Address 62170 Van Dyke, Washington, MI 48094 | |
| Type of Contribution: Direct Loan from a person Fund Raiser | |
| Pa | ige Subtotal \$3,200.00 |
| Grand Total of All Sci (Complete on last page of | of Schedule) |
| Page 1 of <u>37</u> | Enter this total on line 3a of Summary Page. |



1. Committee I.D. Number ______138477

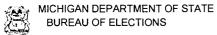
Page.

CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Michael C. 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? YES 4. Date of Receipt 05/27/15 Name & Address: | | |
| Vincent M. Lucido | | |
| 42825 Schoenherr | 200 | <u>,</u> 200 |
| Sterling Heights, MI 48313 | _{\$} 200 | <u>\$ 200</u> |
| 5. If over \$100.00 cumulative, please provide: | | |
| Occupation Self-Employed Employer Lucido Fine Jewelry | Click Here fo | r Memo Itemization |
| Business Address 42825 Schoenherr, Sterling Heights, MI 48313 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/27/15 Name & Address | | |
| Dr. James Cho 3759 Red Maple Ct. | _s 200 | _s 200 |
| Oakland, MI 48363 | Y | Ψ |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | r Memo Itemization |
| Occupation Doctor Employer Cornerstone Health | | |
| Business Address 42645 Garfield Rd, Clinton Township,MI 48038 | | |
| Type of Contribution: ☐ Direct | | |
| 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/27/15 Name & Address: | | |
| Cy M. Abdo | _s 500 | 500 |
| 2719 Hawthorne Dr S | \$ 500 | _{\$} 500 |
| Shelby Township, MI 48316 | Oliak Hana fam | Mama Haminatian |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| Occupation Attorney Employer Abdo & Abdo | | |
| Business Address 42550 Carfield Rd, Suite 104A, Clinton Twp, MI 48038 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 05/27/15 Name & Address | | |
| Paul F. Zalenski 21425 Clayton Dr | _{\$} 200 | _{\$} 200 |
| Macomb, MI 48044 | | |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| Occupation Court Officer Employer City of Warren | | |
| Business Address One City Square, Warren, MI 48093 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| Page Subtotal | \$1,100.00 | |
| Grand Total of All Schedules 1A (Complete on last page of Schedule) | | |
| 2 20 | Enter this total on line 3a of Summary | |

Page 2 of 37



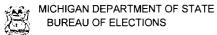
CANDIDATE COMMITTEE 2. Committee Na

2. Committee Name Committee to Elect Michael C. 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? YES 4. Date of Receipt 05/27/15 Name & Address: | | |
| Pashko Ujkic 38346 Phyllis Ct Sterling Heights, MI 48312 | _{\$} 500 | _{\$} 500 |
| 5. If over \$100.00 cumulative, please provide: | Click Hore f | for Memo Itemization |
| Occupation Self-Employed Employer Dodge Park Coney Island | Click Hele i | or Memo nemization |
| Business Address 35252 Dodge Park, Sterling Heights, MI 48312 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/28/15 Name & Address | | |
| Martin J. Brown 14300 15 Mile Rd Sterling Heights, MI 48312 | _{\$} 100 | ş 100 |
| 5. If over \$100.00 cumulative, please provide: | Click Here f | or 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 05/28/15 Name & Address: | | |
| Walter Alix 3233 N. Elder West Bloomfield, MI 48324 | _{\$} 400 | <u>\$ 400 </u> |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | or Memo Itemization |
| Occupation Engineer Employer HRC | | |
| Business Address 555 Hulet Dr., Bloomfield Hills, MI 48302 Type of Contribution: Loan from a person Fund Raiser | | |
| | | |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/27/15 Name & Address | | |
| Brian Kern 54482 Ridgeview Dr. Shelby Township, MI 48316 | _{\$} 500 | _{\$} 500 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | or Memo Itemization |
| Occupation Self Employed Employer JG Kern Enterprises, Inc. | 3.3K 11010 K | oomo nomeano. |
| Business Address 44044 Merrill Rd, Sterling Heights, MI 48314 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| Page Subtota | \$1,500.00 | _ |
| Grand Total of All Schedules 1A (Complete on last page of Schedule |) | |
| | Enter this total on | n. |

Page.

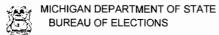
 $_{\text{Page}}\underline{3}_{\text{of}}\underline{37}$



CANDIDATE COMMITTEE

1. Committee I.D. Number ______138477

| 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 05/28/15 Name & Address: | | |
| Thomas Fabbri 4285 18 1/2 Mile Rd Sterling Heights, MI 48314 5. If over \$100.00 cumulative, please provide: | _{\$} 100 | _{\$} 100 |
| Occupation Employer | Click Here | for Memo Itemization |
| Business Address Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/28/15 Name & Address | | |
| Sterling Heights Fire Fighters Union Local 1557 38911 Van Dyke Ave Sterling Heights, MI 48312 | _{\$} 1000 | _{\$} 1000 |
| 5. If over \$100.00 cumulative, please provide: | Click Here t | for Memo Itemization |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: | | |
| 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/28/15 Name & Address: | | |
| Thomas Guastello 34120 Woodward Birmingham, MI 48009 | § 200 | _{\$} 200 |
| 5. If over \$100.00 cumulative, please provide: | Click Here to | or Memo Itemization |
| Occupation Developer Employer Center Management | | |
| Business Address 34120 Woodward, Birmingham, MI 48009 Type of Contribution: | | |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/28/15 Name & Address | | |
| Wayne Oehmke 17610 21 Mile Rd Macomb, MI 48044 | _{\$} 100 | <u>\$ 100</u> |
| 5. If over \$100.00 cumulative, please provide: | Click Here f | or Memo Itemization |
| Occupation Employer | | |
| Business Address | | |
| Jest Direct | 04 400 00 | 7 |
| Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 4 of 37 | 41,100.00 | |

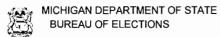


CANDIDATE COMMITTEE

1. Committee I.D. Number _____138477

2. Committee Name Committee to Elect Michael C. Taylor

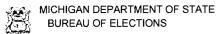
| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount. | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|--|-----------------------------|--|
| 3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 05/28/15 | | |
| Arno Rabin | | |
| 3346 Saint George Ct | 5 00 | 500 |
| Oakland Township, MI 48306 | _{\$} 500 | _{\$} 500 |
| 5. If over \$100.00 cumulative, please provide: | Click Hore fo | r Mama Itamization |
| Occupation Self Employed Employer HTI Cybernetics | Click Here to | r Memo Itemization |
| Business Address 6701 Center Dr., Sterling Heights, MI 48312 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/01/15 Name & Address | | |
| Kevin Denha | F00 | 500 |
| 40700 Woodward Ave, Suite 250 | _{\$} 500 | _{\$} 500 |
| Bloomfield Hills, MI 48304 | | |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | r Memo Itemization |
| Occupation Self Employed Employer Denha Properties | | |
| Business Address 40700 Woodward Ave, Suite 250, Bloomfield Hills, MI 48304 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/01/15 Name & Address: | | |
| John H. Bologna, Jr. | 500 | |
| 19135 Saxon Dr. | _{\$} 500 | _{\$} 500 |
| Beverly Hills, MI 48025 | | |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| Occupation Self Employed Employer Big Lots - Family Plaza | | |
| Business Address 33100 Schoenherr Rd, Sterling Heights, MI 48312 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/02/15 Name & Address | | |
| Anthony Rubino | | |
| 43054 W. Kirkwood | <u>,</u> 100 | . 100 |
| Clinton Township, MI 48038 | \$ | \$ |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| Occupation Employer | Olick Field for | Wello Remization |
| Business Address/ | | |
| Type of Contribution: ☐ Direct | | |
| Page Subtotal | \$1,600.00 | |
| Grand Total of All Schedules 1A | | - |
| (Complete on last page of Schedule) | Enter this total on | J |
| Page_5_of_37_ | line 3a of Summary Page. | |



1. Committee I.D. Number _____138477

CANDIDATE COMMITTEE

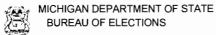
| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|-----------------------------|--|
| 3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 06/02/15 Name & Address: | | |
| Shirley Grenat 36464 Saddlebred Ct Clinton Township, MI 48035 | _{\$} 250 | _{\$} 250 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | or Memo Itemization |
| Occupation Retired Employer | | |
| Business Address | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/02/15 Name & Address | | |
| Independent Voters PAC P.O. Box 665 Mount Clemens, MI 48046 | _{\$} 100 | _{\$} 100 |
| 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 06/02/15 | | |
| Keith Milliken 67 Scenic Oaks Drive S Bloomfield Hills, MI 48304 | \$ 200 | \$ 200 |
| 5. If over \$100.00 cumulative, please provide: | Click Here los | Wemo itemization |
| Occupation Self Employed Employer Milliken Millwork, Inc. | | |
| Business Address 6361 Sterling Dr. N, Sterling Heights, MI 48312 | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/02/15 Name & Address | | |
| Jonathan R. Crane 493 Ridgewood Dr Rochester, MI 48306 | _{\$} 200 | _{\$_} 200 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | r Memo Itemization |
| Occupation Attorney Employer Self Employed | | |
| Business Address 1126 N. Main, Rochester, MI 48307 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| Page Subtotal | \$750.00 | |
| Grand Total of All Schedules 1A (Complete on last page of Schedule) | Enter this total on | |
| Page 6 of 31 | line 3a of Summary Page. | |



1. Committee I.D. Number _____138477

CANDIDATE COMMITTEE

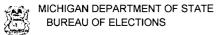
| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount. | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|---------------------------------------|--|
| 3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/02/15 Name & Address: | | |
| Albert Papa 101 W. Big Beaver Rd, Suite 600 Troy, MI 48084 | _{\$} 1000 | _{\$} 1000 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | or Memo Itemization |
| Occupation Self Employed Employer Cambridge Consultants | Ollok Flere ic | of Wichio Remization |
| Business Address 101 W. Big Beaver Rd, Suite 600, Troy, MI 48084 | | |
| Type of Contribution: | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/02/15 Name & Address | | |
| Alan B. Casmere 33400 Maple Lane Dr. Sterling Heights, MI 48312 | _{\$} _400 | _{\$} 400 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | or Memo Itemization |
| Occupation Self Employed Employer Friendly Storage | | |
| Business Address 33400 Maple Lane Dr., Sterling Heights, MI 48312 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/02/15 Name & Address: | | |
| Michael Mihalich 3549 Mann Rd Clarkston, MI 48346 | _{\$} 500 | _{\$} 500 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | r Memo Itemization |
| Occupation Owner Employer MJR Theatres | | ! |
| Business Address 41000 Woodward Ave, Suite 135E, Bloomfield Hills, MI 48304 | | |
| Type of Contribution: | | |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/09/15 Name & Address | | |
| Oras F. Zuhair 42280 Locklin Dr. Sterling Heights, MI 48314 | _{\$} 1000 | _{\$} _1000 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | r Memo Itemization |
| Occupation Owner Employer Dream Market | | |
| Business Address 3815 15 Mile Rd, Sterling Heights, MI 48310 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | · · · · · · · · · · · · · · · · · · · | |
| Page Subtotal | \$2,900.00 | |
| Grand Total of All Schedules 1A (Complete on last page of Schedule) | Enter this total on | |
| Page 7 of 31 | line 3a of Summary Page. | 1 |



CANDIDATE COMMITTEE

1. Committee I.D. Number _____138477

| 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 06/06/15 Name & Address: | | |
| Raymond A. Bianchini 50413 Central Industrial Dr. Shelby Township, MI 48315 | _{\$} 200 | _{\$} 200 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | r Memo Itemization |
| Occupation Self Employed Employer Sterling Contractors | Short Hold It | |
| Business Address 50413 Central Industrial Dr., Shelby Township, MI 48315 | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/03/15 Name & Address | | |
| Armenag Kalaydjian 845 Orchard Ridge Rd Bloomfield, MI 48304 | _{\$} 500 | _s 500 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | r Memo Itemization |
| Occupation Owner Employer Liberty Park | | |
| Business Address 33600 Mound Rd, Sterling Heights, MI 48310 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/12/15 Name & Address: | | |
| James George 19634 Westchester | _{\$} 1000 | _{\$} 1000 |
| Clinton Township, MI 48038 | Clink Hara fa- | Momo Itomization |
| 5. If over \$100.00 cumulative, please provide: | Click Here to | Memo Itemization |
| Occupation Self Employed Employer Zenith Industrial Corp | | |
| Business Address 15260 Common Rd., Roseville, MI 48066 | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/05/15 Name & Address | | |
| Larry Scott 12900 Hall Rd, Suite 350 Sterling Heights, MI 48313 | _{\$} 100 | _{\$} 100 |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | r Memo Itemization |
| Occupation Employer | 2 | |
| Business Address | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | , | · |
| Page Subtotal | \$1,800.00 | |
| Grand Total of All Schedules 1A (Complete on last page of Schedule) | Enter this total | |
| Page 8 of 37 | Enter this total on line 3a of Summary Page. | |



CANDIDATE COMMITTEE

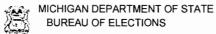
1. Committee I.D. Number _____138477

Page.

2. Committee Name Committee to Elect Michael C. Taylor

| Enter contributor's name and address. If contribution is from an individual, enter last name, first 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 06/05/15 Name & Address: | | | |
| Roy Rose | | | |
| 55620 Woodridge Dr. | | 200 | 200 |
| Shelby Township, MI 48316 | | <u>\$ 200</u> | _{\$} 200 |
| 5. If over \$100.00 cumulative, please provide: | | Oliali Hana fa | - Maria Itamiration |
| Occupation Engineer Employer Anderson, Eckstein & Westrick | k | Click Here to | r Memo Itemization |
| Business Address 51301 Schoenherr Rd, Shelby Twp, MI 48315 | | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/03/15 Name & Address | | | |
| Ivan Kurtenbach 6305 Wall St. | | _{\$} 100 | _{\$} 100 |
| STerling Heights, MI 48312 | | | |
| 5. If over \$100.00 cumulative, please provide: | | Click Here fo | r Memo Itemization |
| Occupation Employer | <u> </u> | | |
| Business Address | | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | | |
| 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/01/15 Name & Address: | | | |
| Gebran Anton | | _s 100 | ຸ 100 |
| 79 Macomb Place Mt. Clemens, MI 48043 | | | 5 |
| 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 | | | |
| Contribution # 4 PAC Receipt? YES 4. Date of Receipt Name & Address | | | |
| M.J. Moroun 12225 Stephens Rd | | _{\$} 300 | _{\$} _300 |
| Warren, MI 48089 5. If over \$100.00 cumulative, please provide: | | | |
| Occupation Self Employed Employer Central Transport | | Click Here for | Memo Itemization |
| Business Address 12225 Stephens Rd, Warren, MI 48089 | _ | | |
| | | | |
|), production of the productio | ge Subtotal s | 700.00 | |
| · | ` <u>`</u> | \$700.00 | -[|
| Grand Total of All Sche (Complete on last page of | | | _ |
| 0 01 | | Enter this total on line 3a of Summary | |

Page 9 of 37



1. Committee I.D. Number _____138477

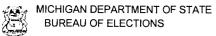
CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Michael C. 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? YES 4. Date of Receipt 06/08/15 Name & Address: | | |
| Michael D'Agostini | | |
| 17565 Augusta Dr. | _s 200 | 200 |
| Macomb, MI 48042 | <u>\$_</u> 200 | \$ 200 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | or Memo Itemization |
| Occupation Developer Employer Self Employed | | |
| Business Address 17565 Augusta Dr, Macomb, MI 48042 | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/05/15 Name & Address | | |
| Ford Motor Company Civic Action Fund - Michigan PAC | 100 | 400 |
| The American Road | _{\$} 100 | _{\$} 100 |
| Dearborn, MI 48121 | | |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | or 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 06/08/15 Name & Address: | | |
| Fazlullah Khan | _s 200 | 200 |
| 5238 Windmill Dr. | \$ 200 | _{\$} 200 |
| Troy, MI 48085 | Click Here fo | r Memo Itemization |
| 5. If over \$100.00 cumulative, please provide: | | |
| Occupation Self Employed Employer Fazal Khan & Associates | | |
| Business Address 43279 Schoenherr Rd, Sterling Heights, MI 48313 | | |
| Type of Contribution: | | |
| 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 06/09/15 Name & Address | | |
| Elmer W Roland 100 Delta Rd Algonac, MI 48001 | _{\$} 200 | _{\$_} 200 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | r Memo Itemization |
| Occupation Owner Employer NBC Truck Equipment | | |
| Business Address 38130 Groesbeck Hwy, Roseville, MI 48066 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| Page Subtota | \$700.00 | |
| Grand Total of All Schedules 1A | 47 00.00 | - |
| (Complete on last page of Schedule | 1 | |
| 40 27 | line 3a of Summary | 1 |

Page 10 of 37

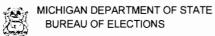
Page.



1. Committee I.D. Number _____138477

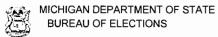
CANDIDATE COMMITTEE

| 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 06/10/15 | | |
| Mark Weatherly | | |
| 54172 Overbrook Court | 200 | 200 |
| Shelby Township, MI 48316 | _{\$} 200 | <u> </u> |
| 5. If over \$100.00 cumulative, please provide: | Click Here t | for Memo Itemization |
| Occupation Self Employed Employer Raven | | .s. wome normanion |
| Business Address 6931 23 Mile Rd, Shelby Twp, MI 48316 | | ! |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/12/15 Name & Address | | |
| Chris Peyerk 12955 23 Mile Rd Shelby Township, MI 48316 | _{\$} 1000 | _{\$} 1000 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | or Memo Itemization |
| Occupation Self Employed Employer Dan's Excavating | Short Hole II | o. Mono Romization |
| Business Address 12955 23 Mile Rd, Shelby Twp, MI 48316 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | İ |
| 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/11/15 Name & Address: | | |
| Ken Wink | 150 | 150 |
| 48675 Lorenzo | _{\$} 150 | _{- §} 150 |
| Macomb Twp, MI 48044 | Click Here fo | or Memo Itemization |
| 5. If over \$100.00 cumulative, please provide: | 2.1011 1010 10 | |
| Occupation Self Employed Employer Summit Financial Consulting | | |
| Business Address 43409 Schoenherr Rd, Sterling Heights, MI 48313 | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/15/15 Name & Address | | |
| Jeffrey Bahorski 3210 Farmdale Sterling Heights, MI 48314 | _{\$} 100 | _{\$_} 100 |
| 5. If over \$100.00 cumulative, please provide: | | |
| Occupation Employer | Click Here fo | or Memo Itemization |
| Business Address | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| Page Subtotal | \$1,450.00 | ' |
| Grand Total of All Schedules 1A (Complete on last page of Schedule) | | |
| Page 11 of 37 | Enter this total on line 3a of Summary Page. | y |



1. Committee I.D. Number ______138477

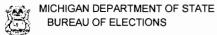
| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount. | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|--|-----------------------------|--|
| 3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/15/15 Name & Address: | | |
| Clark Andrews | | |
| 53985 Sutherland Ln | _{\$} 100 | <u>,</u> 100 |
| Shelby Township, MI 48316 | \$ | § 100 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | or 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 06/16/15 Name & Address | | |
| Marc Kaszubski | 100 | 100 |
| 1096 Brompton Road | _{\$} _100 | _{\$_} 100 |
| Rochester Hills, MI 48309 | | |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | or Memo Itemization |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/16/15 Name & Address: | | |
| John Nitz | ° 100 | 100 |
| 57477 Willow Way Court | \$ 100 | _{\$} 100 |
| Washington, MI 48094 | Click Here fo | r Memo Itemization |
| 5. If over \$100.00 cumulative, please provide: | Onoic Front To | Womo nomzadon |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: | | |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/15/15 Name & Address | | |
| Donald P. Denault | 100 | 100 |
| 15731 Marcie | _{\$} 100 | _{\$_} 100 |
| Fraser, MI 48026 5. If over \$100.00 cumulative, please provide: | | |
| 5. Il Over \$100.00 cumulative, piease provide. | Click Here fo | r Memo Itemization |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| Page Subtota | \$400.00 | |
| Grand Total of All Schedules 1A | | |
| (Complete on last page of Schedule | | |
| Page 12 of 37 | line 3a of Summary Page. | / |



1. Committee I.D. Number _____

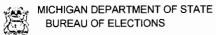
2 Committee Name Committee to Elect Michael C. Taylor

| CANDIDATE COMMITTEE 2. Committee Nam | ie | |
|---|---------------------------------------|---|
| Enter contributor's name and address. If contribution is from an individual, enter last name, first r middle initial. Check box to indicate if contribution is from a Political Committee or an Independer Committee (PAC) Report all contributions regardless of amount. | | |
| 3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 06/16/15 | | |
| Name & Address: | | |
| Charles Turnbull 53957 Sutherland | 100 | |
| Shelby Township, MI 48316 | _{\$} 100 _{\$} 100 | |
| 5. If over \$100.00 cumulative, please provide: | | |
| Occupation Employer | Click Here for Memo Itemization | ו |
| Business Address | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/16/15 Name & Address | | |
| Lloyd Brown | 1000 1000 | |
| 841 Quarry | _{\$} 1000 _{\$} 1000 | |
| Rochester Hills, MI 48306 | | |
| 5. If over \$100.00 cumulative, please provide: | Click Here for Memo Itemization | 1 |
| Occupation CEO Employer Waltonen Engineering | _ | |
| Business Address 31330 Mound Rd, Warren, MI 48092 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/16/15 Name & Address: | | |
| Brad Horton | 1000 | |
| 26918 Koerber | _{\$} 1000 _{\$} 1000 | |
| St. Clair Shores, MI 48081 | Click Here for Memo Itemization | |
| 5. If over \$100.00 cumulative, please provide: | Click Here for Memo Remization | |
| Occupation Owner Employer US Auto Parts | | |
| Business Address 7575 18 1/2 Mile Rd, Sterling Heights, MI 48314 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/15/15 Name & Address | | |
| Shant Shirinian | | |
| 23670 Ryan Rd | ្ធ1000 ្ខ 1000 | |
| Warren, MI 48091 | Ψ | |
| 5. If over \$100.00 cumulative, please provide: | Click Here for Memo Itemization | |
| Occupation Owner Employer Van-8 Collision | | |
| Business Address 23670 Ryan Rd, Warren, MI 48091 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| Page | Subtotal \$3,100.00 | |
| Grand Total of All Scheo | dules 1A | |
| (Complete on last page of S | | |
| Page 13 of 37 | line 3a of Summary Page. | |



1. Committee I.D. Number _____138477

| 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 06/11/15 Name & Address: | | |
| Anthony Mancini 11050 Walnut Ln Sterling Heights, MI 48313 | _s 1000 | _{\$} 1000 |
| 5. If over \$100.00 cumulative, please provide: | Click Horo f | or Memo Itemization |
| Occupation Owner Employer Man-Con | Click Here I | or wemo nemization |
| Business Address 5225 22 Mile Rd, Shelby Township, MI 48317 | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/15/15 Name & Address | | |
| Nicholas Aiuto 41100 Conger Bay Dr Harrison Township, MI 48045 | _{\$} 1000 | _{\$} 1000 |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | or Memo Itemization |
| Occupation Owner Employer King's Towing | | |
| Business Address 35090 Harper Ave, Clinton Township, MI 48035 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/16/15 Name & Address: | | |
| Victor Cretu 37831 Villa Mar Harrison Township, MI 48045 | _{\$} 1000 | _{\$} 1000 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | or Memo Itemization |
| Occupation Owner Employer US Auto Parts | | |
| Business Address 7575 18 1/2 Mile Rd, Sterling Heights, MI 48314 | | |
| Type of Contribution: Direct Loan from a person V Fund Raiser | | |
| 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 06/11/15 Name & Address | | |
| Steven Silk 5757 W. Maple, Suite 800 W. Bloomfield, MI 48322 | _{\$} 100 | _{\$} _100 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | or Memo Itemization |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| Page Subtotal | \$3,100.00 | |
| Grand Total of All Schedules 1A (Complete on last page of Schedule) | Enter this total on | |
| Page 14 of 37 | line 3a of Summar Page. | у |



CANDIDATE COMMITTEE

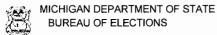
1. Committee I.D. Number ____138477

2. Committee Name Committee to Elect Michael C. 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? YES 4. Date of Receipt 06/15/15 Name & Address: | | |
| Tony Gallo 6303 26 Mile Rd Washington, MI 48094 | _{\$} 200 | _{\$} 200 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | or Memo Itemization |
| Occupation Owner Employer Gallo Companies | CHOK FIGHER | A Monto nomization |
| Business Address 6303 26 Mile Rd, Washington, MI 48094 | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | · · · · · · · · · · · · · · · · · · · | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/14/15 Name & Address | | |
| Michael I. Gilson 37308 Van Dyke Ave Sterling Heights, MI 48312 | _{\$} 200 | _{\$} 200 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | or Memo Itemization |
| Occupation Owner Employer Crossroads Plaza | | |
| Business Address 37308 Van Dyke Ave, Sterling Heights, MI 48312 | | |
| Type of Contribution: | | |
| 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/15/15 Name & Address: | | |
| George Parker 13899 Brougham Dr Sterling Heights, MI 48312 5. If over \$100.00 cumulative, please provide: | \$ 65 Click Here fo | s 65 r 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 06/14/15 Name & Address | | |
| Kevin Hamming 37756 Lakeshore Drive Harrison Township, MI 48045 | _{\$} 100 | _{\$} 100 |
| 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 | | |
| | | |
| Page Subtotal | \$565.00 | |

Page.

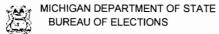
Page 15 of 31



1. Committee I.D. Number _____138477

CANDIDATE COMMITTEE

| 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 06/02/15 Name & Address: | | |
| Dominic Moceri | | |
| 2540 Silverbell | 1000 | 1000 |
| Oakland Township, MI 48306 | _{\$} 1000 | \$ 1000 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | or Memo Itemization |
| Occupation Owner Employer Moceri Companies | 23.(1.0.3) | |
| Business Address 3005 University Dr., Auburn Hills, MI 48326 | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/12/15 Name & Address | | |
| Andrew Buss | 100 | 100 |
| 38133 Woodcrest | _{\$} 100 | _{\$} 100 |
| Clinton Township, MI 48036 | | |
| 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 06/17/15 Name & Address: | | |
| Cheryl Rohrkemper | _{\$} 100 | 100 |
| 16924 Franziska Ct | \$ 100 | _{\$_} 100 |
| Macomb, MI 48044 | Click Here for | Memo Itemization |
| 5. If over \$100.00 cumulative, please provide: | | |
| Occupation Employer | | |
| Business Address Type of Contribution: Direct Lean from a porcen. The property of Contribution: The property of Contribution of Contrib | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/15/15 Name & Address | | |
| Mark Andrews | _s 250 | 250 |
| 5105 Sandhill Rd Almont, MI 48003 | <u>\$</u> 230 | \$ 200 |
| 5. If over \$100.00 cumulative, please provide: | . | |
| Occupation Owner Employer Wyatt Services | Click Here for | Memo Itemization |
| Business Address 6425 Sims Dr., Sterling Heights, MI 48313 | | |
| Type of Contribution: | | |
| Page Subtotal | \$1,450.00 | |
| Grand Total of All Schedules 1A | | |
| (Complete on last page of Schedule) | Enter this total on | _ |
| Page 16 of 37 | line 3a of Summary Page. | |



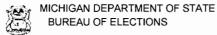
CANDIDATE COMMITTEE

1. Committee I.D. Number _____138477

2. Committee Name Committee to Elect Michael C. 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? YES 4. Date of Receipt 06/16/15 | | |
| Michael Boguth | | |
| 38431 River Park Dr | _{\$} 500 | ° 500 |
| Sterling Heights, MI 48313 | <u>\$ 300</u> | § 000 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | r Memo Itemization |
| Occupation Owner Employer Hamilton Chevrolet | | |
| Business Address 5800 14 Mile Rd, Warren, MI 48092 | | |
| Type of Contribution: 🗸 Direct Loan from a person 🗸 Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/20/15 Name & Address | | |
| Walter Cueter | 200 | 200 |
| 43181 Schoenherr | _{\$} 200 | _{\$} _200 |
| Sterling Heights, MI 48313 | | |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | r Memo Itemization |
| Occupation Owner Employer Cueter Properties | | |
| Business Address 43181 Schoenherr Rd, Sterling Heights, MI 48313 | | |
| Type of Contribution: | | |
| 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/08/15 Name & Address: | | |
| Joseph Lucido | ° 100 | 100 |
| 39999 Garfield Rd | \$ 100 | _{\$} |
| Clinton Township, MI 48083 | Click Here for | Memo Itemization |
| 5. If over \$100.00 cumulative, please provide: | | momo nomeanon |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/17/15 Name & Address | | |
| Michael C. Taylor | 2000 | 2000 |
| 52440 Cheswick Ct Shelby Township, MI 48315 | _{\$} 2000 | _{\$_} 2000 |
| Shelby Township, MI 48315 5. If over \$100.00 cumulative, please provide: | | |
| | Click Here for | Memo Itemization |
| | | |
| Business Address 28007 Hoover Rd, Warren, MI 48093 | | |
| Type of Contribution: | | |
| Page Subtotal | \$2,800.00 | |
| Grand Total of All Schedules 1A | | |
| (Complete on last page of Schedule) | Enter this total on | _ |
| 17 21 | line 3a of Summary | |

Page 17 of 51



CANDIDATE COMMITTEE

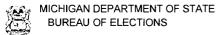
1. Committee I.D. Number _____138477

2. Committee Name Committee to Elect Michael C. 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? YES 4. Date of Receipt 06/15/15 Name & Address: | | |
| Daniel Temrowski 646 Washington Rd Grosse Pointe, MI 48230 | _{\$} 100 | _{\$} 100 |
| 5. If over \$100.00 cumulative, please provide: | Click Here | for Memo Itemization |
| Occupation Employer | Ollok From | ioi mome nomization |
| Business Address | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/17/15 Name & Address | | |
| Robert Tisdelle 1137 Meadowbrook Warren, MI 48093 | _{\$} 150 | _{\$} 150 |
| 5. If over \$100.00 cumulative, please provide: | Click Here | for Memo Itemization |
| Occupation Real Estate Agent Employer Keller Williams | | |
| Business Address 45609 Village Blvd, Shelby Twp, MI 48315 | | |
| Type of Contribution: 🗸 Direct Loan from a person 📝 Fund Raiser | | |
| 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/20/15 Name & Address: | - | |
| Daniel Cornwell 675 N. Williamsbury Rd Bloomfield Village, MI 48301 | \$ 200 | s 200 for Memo Itemization |
| 5. If over \$100.00 cumulative, please provide: | Click Here | ioi iviemo itemization |
| Occupation Owner Employer Cambridge Consultants | | |
| Business Address 101 W. Big Beaver Rd, Suite 600, Troy, MI Type of Contribution: | | |
| 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 06/20/15 | | |
| Name & Address | | |
| Gary Kotlarz 23456 Liberty St. Clair Shores, MI 48080 | _{\$} 200 | _{\$} 200 |
| 5. If over \$100.00 cumulative, please provide: | Click Here | for Memo Itemization |
| Occupation Owner Employer Rogers Roost | | |
| Business Address 33626 Schoenherr Sterling Heights, MI 48312 | | |
| Type of Contribution: | | |
| Page Subtota | \$650.00 | |
| Grand Total of All Schedules 1A (Complete on last page of Schedule | . | |
| (Complete on last page of ochedule | Enter this total or | n |

Page 18 of 37

Enter this total on line 3a of Summary Page.



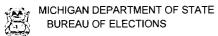
1. Committee I.D. Number _____138477

2. Committee Name Committee to Elect Michael C. Taylor

| Enter contributor's name and ac middle initial. Check box to indi Committee (PAC) Report <u>all</u> con | cate if contrib | ution is from a Political Co | | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---|-----------------|------------------------------|--------------|------------------------------|---------------------|--|
| Contribution # 1 PAC Name & Address: | Receipt? | YES 4. Date of F | Receipt | 06/16/15 | | |
| Timothy O'Brien | | | | | | |
| 52719 Florence | | | | | _s 1000 | <u>,</u> 1000 |
| Shelby Township, MI 4 | 48315 | | | | \$ | \$ 1000 |
| 5. If over \$100.00 cumulative, | please provi | | _ | | Click Here f | or Memo Itemization |
| Occupation Owner | | Employer O'Brien Co | onstru | iction | 0 | |
| Business Address 966 Liverr | nois, Troy, | MI 48083 | | | | |
| Type of Contribution: V Direct | ct | Loan from a person | √ | Fund Raiser | , | |
| 3. Contribution #2 PAC Name & Address | Receipt? | YES 4. Date of F | Receipt | 06/18/15 | | |
| Colleen A. O'Brien 6481 Enclave Dr. Clarkston, MI 48348 | | | | | _{\$} _100 | _{\$} 100 |
| 5. If over \$100.00 cumulative, | please provid | de: | | | Click Here for | or Memo Itemization |
| Occupation | E | Employer | | | | |
| Business Address | | | | | | |
| Type of Contribution: Direct | t [| Loan from a person | \checkmark | Fund Raiser | | |
| 3. Contribution # 3 PAC Name & Address: | Receipt? | YES 4. Date of | Receip | t 06/19/15 | | |
| David Magliulo 42222 Willsharon | | | | | _{\$} 100 | _s 100 |
| Sterling Heights, MI 48 | 3314 | | | | | |
| 5. If over \$100.00 cumulative, | | de: | | | Click Here fo | or Memo Itemization |
| Occupation | | Employer | | | | |
| Business Address | | | | | | |
| Type of Contribution: V Direct | et | Loan from a person | √ | Fund Raiser | - | |
| Contribution # 4 PAC Name & Address | Receipt? | YES 4. Date of | Recei | ot 06/19/15 | | |
| Donna Magliulo 42222 Willsharon | | | | | _{\$} 100 | _{\$} 100 |
| Sterling Heights, MI 48 | | | | | | |
| 5. If over \$100.00 cumulative, | please provi | de: | | | Click Here fo | or Memo Itemization |
| Occupation | | Employer | | | | |
| Business Address | | | | | | |
| Type of Contribution: 📝 Dire | ect | Loan from a person | ✓ | Fund Raiser | | |
| | | | | Page Subtotal | \$1,300.00 | |
| | | | | nd Total of All Schedules 1A | | |
| | | (0 | Comple | te on last page of Schedule) | Estas this total on | J |

Page 19 of 37

Enter this total on line 3a of Summary Page.



SCHEDULE 1A

1. Committee I.D. Number 138477

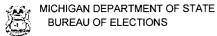
CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Michael C. Taylor

Page.

| 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 06/22/15 | | |
| Name & Address: Leigh H. Savage | | |
| 1044 Marian Court | <u>,</u> 200 | 200 |
| Grosse Pointe, MI 48236 | \$ | \$ |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| Occupation Attorney Employer Self-Employed | | |
| Business Address 10 S. Main, Suite 401, Mt. Clemens, MI 48043 | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address | | 1 |
| Michael Lombardini | _s 100 | ູ 100 |
| 5056 Jessop Ct | \$ | \$ |
| Sterling Heights, MI 48310 | Cliek Hara for | Memo Itemization |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Wemo 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 06/22/15 Name & Address: | | |
| Gasper Fiore | ° 1000 | _e 1000 |
| 699 Lakeshore | 9 | \$ |
| Grosse Pointe, MI 48236 | Click Here for | Memo Itemization |
| 5. If over \$100.00 cumulative, please provide: Occupation Owner Employer Fiore's Concrete | | |
| | | |
| Business Address 33200 Mound Rd, Sterling Heights, MI 48310 Type of Contribution: Loan from a person Fund Raiser | | |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/24/15 | | |
| Name & Address | | |
| Jason Corty | 4000 | 4000 |
| 7750 23 Mile Rd | _{\$} 1000 | _{\$_} 1000 |
| Shelby Twp, MI 48316 | | |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| Occupation Owner Employer Mechanic Services | | |
| Business Address 7750 23 Mile Rd, Shelby Township,, MI 48316 | | |
| Type of Contribution: | | |
| Page Subtotal | \$2,300.00 | |
| Grand Total of All Schedules 1A | | |
| (Complete on last page of Schedule) | Enter this total on | J |

Page 20 of 37



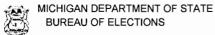
CANDIDATE COMMITTEE

1. Committee I.D. Number _____138477

2. Committee Name Committee to Elect Michael C. 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. | e, 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|--|--------------------|--|
| Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address: | | |
| Carl Dallo 3905 17 Mile Rd Sterling Heights, MI 48310 | _{\$} 1000 | _{\$} 1000 |
| 5. If over \$100.00 cumulative, please provide: | | |
| Occupation Restaurant Owner Employer Self Employed | Click Here for | or Memo Itemization |
| Business Address 3905 17 Mile Rd Sterling Heights, MI 48310 | _ | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address | | |
| Anthony Viviano 4751 Lockwood Washington Township, MI 48094 | _{\$} 100 | _{\$} 100 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | or Memo Itemization |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: | | |
| 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/23/15 Name & Address: | | |
| Jeffrey Stearns 2979 Cedar Key Dr Lake Orion, MI 48360 | _{\$} 200 | _{\$} 200 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | r Memo Itemization |
| Occupation Attorney Employer Self Employed | | |
| Business Address 2979 Cedar Key Dr, Lake Orion, MI 48360 | | |
| Type of Contribution: | | |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address | | |
| Farrington Leadership Fund 8830 Summers Ct Utica, MI 48317 | _{\$} 200 | <u>\$</u> 200 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | or Memo Itemization |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: | | |
| Page Sub | stotal \$1,500.00 | |
| Grand Total of All Schedules (Complete on last page of Schedules) | | |
| Page 21 of 31 | Page. | - |

Page 21 of 37



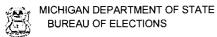
1. Committee I.D. Number _____138477

2. Committee Name Committee to Elect Michael C. 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? YES 4. Date of Receipt 06/24/15 | | |
| Name & Address: Denise Scally | | |
| 32051 Newcastle Dr | 100 | . 100 |
| Warren, MI 48093 | _{\$} 100 | \$ 100 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | r Memo Itemization |
| Occupation Employer | - | i Wellio iternization |
| Business Address | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/04/15 Name & Address | _ | |
| Sherman Abdo | 200 | 200 |
| 2533 Regency Hills Dr Shelby Township, MI 48316 | _{\$} 200 | _{\$} 200 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | r Memo Itemization |
| Occupation Attorney Employer Self Employed | | |
| Business Address 2533 Regency Hills, Shelby Township, MI 48316 | | |
| Type of Contribution: | | |
| 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address: | | |
| Dane Slater | _s 100 | 100 |
| 40 Telford Dr | \$ 100 | _{\$} 100 |
| Troy, MI 48085 | 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 06/24/15 Name & Address | | |
| Denise Greenway | 4.0.5 | |
| 54646 Avondale Drive | _{\$} 100 | _s 100 |
| New Baltimore, MI 48047 | | 7 |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| Occupation Employer | _ | |
| Business Address | | |
| Type of Contribution: V Direct Loan from a person V Fund Raiser | | |
| Page Subi | total \$500.00 | |
| Grand Total of All Schedules | 1A | |
| (Complete on last page of Sched | ule) Enter this total on | _ |
| aa 11 | line 3a of Summary | |

Page.

Page 22 of 31



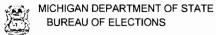
1. Committee I.D. Number ____

CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Michael C. 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? YES 4. Date of Receipt 06/24/15 Name & Address: | | |
| Jennifer J. Wiegand Klieman 13400 30 Mile Rd Washington, MI 48095 | _{\$} 300 | _{\$} 300 |
| 5. If over \$100.00 cumulative, please provide: | Oliale I laws for | . Mama Itaminatian |
| Occupation Owner Employer Wiegand Mack | Click Here to | r Memo Itemization |
| Business Address 37580 Mound Rd, Sterling Heights, MI 48310 | | |
| Type of Contribution: | | |
| Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address | | |
| Sheri Crifasi 54274 Longneedle Dr Shelby Township, MI 48315 | _{\$} 100 | _{\$} 100 |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: Loan from a person Fund Raiser | | |
| 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/04/15 Name & Address: | | |
| Joseph Rossell 14641 Barton Dr. Washington, MI 48004 | <u>\$ 100</u> | _{\$} 100 |
| Washington, MI 48094 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| Forder | | |
| Occupation Employer | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address | | |
| Jeffrey Miller 17932 Viola Ln Clinton Township, MI 48036 | _{\$} 100 | _{\$_} 100 |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| Occupation Employer | • | |
| Business Address | | |
| Type of Contribution: | | · · · · · · · · · · · · · · · · · · · |
| Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 23 of 37 | \$600.00 Enter this total on line 3a of Summary Page. | - |

Page 23 of 37



1. Committee I.D. Number _____138477

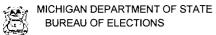
CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Michael C. 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? YES 4. Date of Receipt 06/24/15 Name & Address: | | |
| Robert Sfire 22 Forsyth Ln 48236 Grosse Pointe, \$8236 | _{\$_} 100 | _{\$} 100 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | or Memo Itemization |
| Occupation Employer | 5.10.7.1.0.0 | |
| Business Address Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/25/15 Name & Address | | |
| Michael Rea 43601 Scaup Lane Clinton Township, MI 48038 | _{\$} _100 | <u>\$</u> 100 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | r Memo Itemization |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: Loan from a person Fund Raiser | | |
| 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address: | | |
| Jon Paul Rea 57594 Suffield Drive Washington Twp, MI 48094 | \$ 100 | \$ 100 Memo Itemization |
| 5. If over \$100.00 cumulative, please provide: | Click Here lo | wemo 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 06/24/15 Name & Address | | |
| Ralph Maccarone 13921 Basilisco Chase Dr Shelby Township, MI 48315 | _{\$} 100 | _{\$} 100 |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| Occupation Employer | | |
| Business Address | | |
| Page Subtotal | \$400.00 | |
| Grand Total of All Schedules 1A (Complete on last page of Schedule) | Enter this total on | |

Page 24 of 37

Page.



1. Committee I.D. Number _____138477

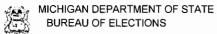
CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Michael C. 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? YES 4. Date of Receipt 06/24/15 Name & Address: | _ | |
| Daniel Taylor | | |
| 101 W. Big Beaver Rd, Suite 600 | 050 | 250 |
| Troy, MI 48084 | _{\$} 250 | _{\$} 250 |
| 5. If over \$100.00 cumulative, please provide: | Cliek Horo | for Memo Itemization |
| Occupation Manager Employer Cambridge Consulting | Click Here | for Memo Remization |
| Business Address 101 W. Big Beaver Rd, Suite 600, Troy, MI 48084 | | |
| Type of Contribution: V Direct Loan from a person V Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address | | |
| Thomas E.F. Fabbri 4285 18 1/2 Mile Rd Sterling Heights, MI 48314 | _{\$} 250 | _{\$} 250 |
| 5. If over \$100.00 cumulative, please provide: | Click Here | for Memo Itemization |
| Occupation Attorney Employer Clark Hill, P.C. | • | |
| Business Address 151 S. Old Woodward, #200, Birmingham, MI 48009 | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/06/15 | | |
| Name & Address: | _ | |
| Dominic Tringali 37266 Jefferson Ave | _{\$} 100 | _ _{\$_} 100 |
| Harrison Township, MI 48045 | Click Here | for Memo Itemization |
| 5. If over \$100.00 cumulative, please provide: | Onoix 17010 | ior mome nomization |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/06/15 Name & Address | | |
| Denise Tringali 37266 Jefferson Harrison Township, MI 48045 | _{\$} 100 | _ \$ 100 |
| 5. If over \$100.00 cumulative, please provide: | | |
| | Click Here | for Memo Itemization |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| Page Subtota | al \$700.00 | |
| Grand Total of All Schedules 1A | Α | |
| (Complete on last page of Schedule | Enter this total or | J n |

Page 25 of 37

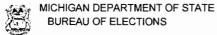
line 3a of Summary Page.



1. Committee I.D. Number _____138477

CANDIDATE COMMITTEE

| 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 06/24/15 Name & Address: | | |
| William Papa | | |
| 7025 Oakhurst Ridge | 400 | 100 |
| Clarkston, MI 48348 | _{\$} 100 | _{\$} 100 |
| 5. If over \$100.00 cumulative, please provide: | Olista I Isaas fa | |
| Occupation Employer | Click Here to | or Memo Itemization |
| Business Address | | |
| Type of Contribution: Loan from a person Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address | | |
| Terrence Hamilton | 100 | 400 |
| 5622 Springbrook | _{\$} 100 | _{\$} 100 |
| Troy, MI 48098 | Olista I Issuer f | A4 |
| 5. If over \$100.00 cumulative, please provide: | Click Here to | 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 06/24/15 Name & Address: | | |
| Samuel Wilson | _{\$} 100 | 100 |
| 11361 Gates | \$ 100 | _{\$} 100 |
| Romeo, MI 48065 | Click Here for | Memo Itemization |
| 5. If over \$100.00 cumulative, please provide: | Ollok Field to | Womo Romization |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address | | |
| Dino Juncevic | 4000 | 4000 |
| 43500 Utica Rd | _{\$} 1000 | _{\$} 1000 |
| Sterling Heights, MI 48314 5. If over \$100.00 cumulative, please provide: | | |
| · | Click Here for | Memo Itemization |
| Occupation Owner Employer Utica Van Dyke Towing | | |
| Business Address 43500 Utica Rd, Sterling Heights, MI 48314 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| Page Subtotal | \$1,300.00 | |
| Grand Total of All Schedules 1A | | |
| (Complete on last page of Schedule) | Enter this total on | _ |
| Page 26 of 37 | line 3a of Summary Page. | |



CANDIDATE COMMITTEE

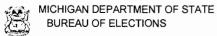
2. Committee Name Committee to Elect Michael C. Taylor

line 3a of Summary

Page.

| 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 06/24/15 Name & Address: | | |
| Mark Hurst | | |
| 54290 Bryce Canyon Trail | 200 | ູ 200 |
| Macomb Twp, MI 48042 | _{\$} 200 | \$ 2 00 |
| 5. If over \$100.00 cumulative, please provide: | Click Horo fe | or Memo Itemization |
| Occupation CPA Employer Plante Moran | Click Here it | or Memo Remization |
| Business Address 19176 Hall Rd, Suite 300, Clinton Township, MI 48038 | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address | | |
| Michael Ferlito | 200 | 000 |
| 430 Park Ave | _{\$} 200 | _{\$} 200 |
| Royal Oak, MI 48067 | | |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | or Memo Itemization |
| Occupation Construction Developer Employer Ferlito Construction | | |
| Business Address 51410 Milano Dr., Macomb, MI 48042 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address: | | |
| Anthony Rubino | _s 500 | _s 500 |
| 38880 Sahr Ct | <u> </u> | \$ 000 |
| Clinton Township, MI 48038 | Click Here fo | r Memo Itemization |
| 5. If over \$100.00 cumulative, please provide: | | |
| Occupation Owner Employer Proforma Marketplace | | |
| Business Address 29165 Calahan Rd, Roseville, MI 48066 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser Contribution # 4 | | |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address | | |
| Nick Najjar | | |
| 4351 Berkshire Dr | ¸ 200 | ° 200 |
| Sterling Heights, MI 48314 | Ψ | 5 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | r Memo Itemization |
| Occupation Real Estate Agent Employer Self Employed | Ollok Flore to | Wellie Remization |
| Business Address 41511 W. 11 Mild Rd, Madison Heights, MI 48071 | | |
| Type of Contribution: | | - Line |
| Page Subtotal | \$1,100.00 | |
| Grand Total of All Schedules 1A | | |
| (Complete on last page of Schedule) | Enter this total on | |

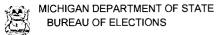
Page 27 of 37



1. Committee I.D. Number _____138477

CANDIDATE COMMITTEE

| 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 06/24/15 | | |
| Gary Roncelli | | |
| 69900 Hicks | 200 | 200 |
| Armada Twp, MI 48005 | _{\$} 200 | <u>\$ 200</u> |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | or Memo Itemization |
| Occupation Owner Employer Roncelli, Inc. | Click Fiele ic | n Memo Remization |
| Business Address 6471 Metro Pkwy, Sterling Heights, MI 48312 | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address | | |
| Hank Riberas | 200 | 000 |
| 6471 Metro Pkwy, | _{\$} _200 | _{\$} 200 |
| Sterling Heights, MI 48312 | | |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | r Memo Itemization |
| Occupation Construction Employer Roncelli, Inc. | | |
| Business Address 6471 Metro Pkwy, Sterling Heights, MI 48312 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address: | | |
| Rick Flynn | 100 | 400 |
| 43255 Chardonnay Dr | _{\$} 100 | _{\$} 100 |
| Sterling Heights, MI 48314 | Click Here for | Memo Itemization |
| 5. If over \$100.00 cumulative, please provide: | Ollok Fiere for | Wichio Remization |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address | | |
| Robert Wink | 400 | 400 |
| 17843 Costell | _{\$} 100 | _{\$} 100 |
| Clinton Township, MI 48038 | | |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| Page Subtotal | \$600.00 | |
| Grand Total of All Schedules 1A | | |
| (Complete on last page of Schedule) | Enter this total on | _ |
| Page 28 of 31 | line 3a of Summary Page. | |



1. Committee I.D. Number ______138477

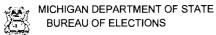
CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Michael C. 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? YES 4. Date of Receipt 06/24/15 Name & Address: Athony Penna 38600 Ven Dyke Suite 300 | | 500 |
| 38600 Van Dyke, Suite 300 Sterling Heights, MI 48312 | _{\$} 500 | _{\$} 500 |
| 5. If over \$100.00 cumulative, please provide: | 0 | |
| Occupation Attorney Employer Moore Penna | Click Here | for Memo Itemization |
| Business Address 38600 Van Dyke Rd, Suite 300, Sterling Heights, MI 48312 | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address | | |
| Justin Riberas 2899 E. Big Beaver, Suite 189 Troy, MI 48083 | _{\$} 200 | _{\$} 200 |
| 5. If over \$100.00 cumulative, please provide: | Click Here | for Memo Itemization |
| Occupation CEO Employer JR Services Group, LLC | | |
| Business Address 2899 E. Big Beaver, Suite 189, Troy, MI 48083 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address: | | |
| Leroy Karvola 24480 Rosemont Dr. | _{\$} 100 | _{\$} 100 |
| South Lyon, MI 48178 | 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 06/24/15 Name & Address | | |
| Art DeCook 49500 Wayburn Dr Macomb, MI 48042 | _{\$} 100 | _{\$} 100 |
| 5. If over \$100.00 cumulative, please provide: | Click Here | for Memo Itemization |
| Occupation Employer | | TOT WOTTO ROTTLEGROTT |
| Business Address | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| Page Sub | total \$900.00 | |
| Grand Total of All Schedules (Complete on last page of Sched | lule) | |
| (200,4000 000000 000000000000000000000000 | Enter this total of | n |

Page 29 of 31

Enter this total on line 3a of Summary Page.



1. Committee I.D. Number _____138477

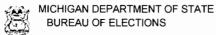
CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Michael C. 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? YES 4. Date of Receipt 06/24/15 | | |
| Thomas Slowik 15201 Peggy Ct Sterling Heights, MI 48312 | _{\$} 200 | _{\$} 200 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | r Memo Itemization |
| Occupation Owner Employer AshCon | | |
| Business Address 37600 Utica Rd, Sterling Heights, MI 48312 | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address | | |
| William Chope 39 Waverly Grosse Pointe, MI 48236 | _{\$} _500 | _{\$} 500 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | r Memo Itemization |
| Occupation Owner Employer Crest Lincoln | | |
| Business Address 36200 Van Dyke, Sterling Heights, MI 48312 | | |
| Type of Contribution: | | |
| 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address: | | |
| Benjamin Aloia 48 Main Mt. Clemens, MI 48043 | _{\$} 150 | _{\$} 150 |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| Occupation Attorney Employer Aloia & Associates | | |
| Business Address 48 Main, Mt. Clemens, MI 48043 | | |
| Type of Contribution: | | |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address | | |
| Jeffrey Ewert 4733 North Grand Oaks Warren, MI 48092 | _{\$} 100 | _{\$} _100 |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | r Memo Itemization |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: | | ■ |
| Page Subtotal | \$950.00 | _ |
| Grand Total of All Schedules 1A (Complete on last page of Schedule) | | |
| 22 27 | Enter this total on line 3a of Summary | |

Page 30 of 31

Page.

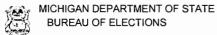


CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Michael C. 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? YES 4. Date of Receipt 06/24/15 | | |
| James D. Wink | | |
| 11827 Shetland Ct | 150 | <u>,</u> 150 |
| Sterling Heights, MI 48313 | _{\$} 150 | \$ 130 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | or Memo Itemization |
| Occupation Owner Employer Summit Financial Consulting | Ollok Flore k | or worns normanie |
| Business Address 43409 Schoenherr, Sterling Heights, MI 48313 | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address | | |
| Yvonne Kniaz | 5 0 | F0 |
| 14016 Pernell | _{\$} _50 | _{\$} 50 |
| Sterling Heights, MI 48313 | | |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | or Memo Itemization |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: | | |
| 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address: | | |
| Doug Skrzyniarz | _s 50 | _s 50 |
| 14469 Maisano Dr. | \$ 00 | \$ 30 |
| Sterling Heights, MI 48312 | Click Here fo | r 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 06/24/15 Name & Address | - | |
| Thomas Difilippo | | |
| 11192 Mandle Dr. | _s 100 | ູ 100 |
| Sterling Heights, MI 48312 | ¥ | Ψ |
| 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 | | |
| Page Subtota | \$350.00 | |
| Grand Total of All Schedules 1A | V | - |
| (Complete on last page of Schedule | 1 | J |
| 04 12 | line 3a of Summary | , |

Page 31 of 51



1. Committee I.D. Number _____138477

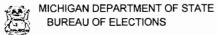
Page.

CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Michael C. 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? YES 4. Date of Receipt 06/24/15 Name & Address: | | |
| Vince Ciraulo | | |
| 7670 19 Mile Rd | 500 | _s 500 |
| Sterling Heights, MI 48314 | _{\$} 500 | <u>\$ 000</u> |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | r Memo Itemization |
| Occupation Owner Employer Square Deal Building Supply | | Mono Romzadon |
| Business Address 7670 19 Mile Rd, Sterling Heights, MI 48314 | | |
| Type of Contribution: V Direct Loan from a person V Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address | | |
| Karl Oskoian | 100 | 100 |
| 78 Vistaview Ct | _{\$} 100 | _{\$} 100 |
| Rochester Hills, MI 48306 | | |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: | | |
| 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address: | | |
| Michael Shea 289 Merriweather Grosse Pointe Farms, 48236 | _{\$} 225 | _{\$} 225 |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| | | |
| Occupation Banker Employer Comerica Bank Business Address 1717 Main Street, Dallas, TX 75201 | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address | | |
| Rudolph Lipski 54335 Michele Ln | <u>,</u> 100 | . 100 |
| Shelby Township, MI 48315 | \$ 100 | \$ |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| OccupationEmployer | CHCK FIELD IOI | Wemo temzaton |
| Puningga Address | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| Page Subtotal | \$925.00 | |
| • | | |
| Grand Total of All Schedules 1A (Complete on last page of Schedule) | Enter this total as |] |
| 00 | Enter this total on | |

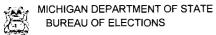
Page 32 of 37



SCHEDULE 1A

CANDIDATE COMMITTEE 2. Committee

| 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 06/24/15 | | |
| Friends of Macomb 39856 Brylor Court Clinton Township, MI 48038 5. If over \$100.00 cumulative, please provide: | _{\$} 250 | _{\$} 250 |
| Occupation Employer | Click Here for | or Memo Itemization |
| Business Address Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address | | |
| Bob Kirk 19500 Hall Rd, Suite 100 Clinton Township, MI 48038 | _{\$} 300 | ş 300 |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | or Memo Itemization |
| Occupation Attorney Employer Kirk Huth Lange | | |
| Business Address 19500 Hall Rd, Suite 100 Clinton Township, MI 48038 | | |
| Type of Contribution: | | |
| 3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address: | | |
| Brian Walker P.O. Box 157 Washington, MI 48094 | \$ 200 | \$ 200 |
| 5. If over \$100.00 cumulative, please provide: | Click Here to | r Memo Itemization |
| Occupation Owner Employer Universal Ambulance | | |
| Business Address 47583 Mound Rd, Sterling Heights, MI 48310 Type of Contribution: Loan from a person Fund Raiser | | |
| 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 06/24/15 Name & Address | | |
| Tim Dinan 14950 Jefferson Ave, #170 Grosse Pointe, MI 48230 | _{\$} 100 | _{s_} 100 |
| 5. If over \$100.00 cumulative, please provide: | Click Here fo | r Memo Itemization |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: | | |
| Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 33 of 37 | ψοσοίσο | |



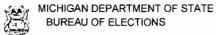
1. Committee I.D. Number ____138477

2. Committee Name Committee to Elect Michael C. Taylor

| | ox to indicate if con | contribution is from an indiviribution is from a Political (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 | Receip | t 06/30/15 | | |
| Name & Address: James P. Brenr | nan | | | | | |
| 10 S. Main Suite | | | | | <u>,</u> 100 | <u>,</u> 100 |
| Mt. Clemens, M | I 48043 | | | | \$ <u>100</u> | \$ 100 |
| 5. If over \$100.00 cur | nulative, please pro | ovide: | | | Click Here fo | or Memo Itemization |
| Occupation | | Employer | | | | |
| Business Address | | | | | | |
| Type of Contribution: | ✓ Direct | Loan from a person | ✓ | Fund Raiser | | |
| 3. Contribution #2 Name & Address | PAC Receipt? | YES 4. Date of | Receip | t <u>06/30/15</u> | | |
| Vito S. Solitro | | | | | <u>,</u> 250 | ° 250 |
| 40327 Aynesley | | | | | <u>\$ 200</u> | <u>\$</u> |
| Clinton Townsh | • | | | | Click Hose fo | or Memo Itemization |
| 5. If over \$100.00 cun | | Barack Ferrazz | ano Kirso | chbaum & Nagelberg LLP | Click Here IC | I WELLO RELLIZATION |
| Occupation Attorney | 0.144 15 15 16 | _ Employer | | | | |
| | | Suite 3900, Chicago, | IL 606 | | | |
| Type of Contribution: | ✓ Direct | Loan from a person | | Fund Raiser | | |
| 3. Contribution # 3 Name & Address: | PAC Receipt? | YES 4. Date of | of Receip | ot 07/01/15 | | |
| James Andary | | | | | _s 100 | ° 100 |
| 14211 Timberw | • | | | | T | . 3 |
| Shelby Townsh 5. If over \$100.00 cur | • | ovide: | | | Click Here fo | r Memo Itemization |
| | matary, prodoc pr | | | | | |
| Occupation | | Employer | | | | |
| Business Address Type of Contribution: | ✓ Direct | Loan from a person | V | Fund Raiser | | |
| Contribution # 4 Name & Address | PAC Receipt? | YES 4. Date | of Rece | ipt 06/24/15 | | |
| | | ees Better Goveri Vixom, MI 48393 | nmen | t Fund of Michigan | _{\$} 500 | _{\$_} 500 |
| 5. If over \$100.00 cur | mulative, please pr | ovide: | | | Click Here fo | r Memo Itemization |
| Occupation | | Employer | | | | |
| Business Address | | | | | | |
| Type of Contribution: | Direct | Loan from a person | V | Fund Raiser | | |
| | | | السناء | Page Subtotal | \$950.00 | |
| | | | Gra | and Total of All Schedules 1A | | |
| | | | | lete on last page of Schedule) | Enter this total on | _ |
| 0. 20 | 1 | | | | line 3a of Summar | v |

Page.

Page 34 of 37



ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

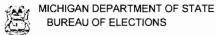
1. Committee I.D. Number _____138477

2. Committee Name Committee to Elect Michael C. 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? YES 4. Date of Receipt 07/05/15 | | |
| Name & Address: ——————————————————————————————————— | | |
| 2956 Belcher Dr. | 50 | ₂ 50 |
| Sterling Heights, MI 48310 | _{\$} 50 | \$ JU |
| 5. If over \$100.00 cumulative, please provide: | Click Here f | or Memo Itemization |
| Occupation Employer | Ollok Flore | or wome normzanom |
| Business Address | | |
| Type of Contribution: ✓ Direct Loan from a person Fund Raiser | | |
| Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/29/15 Name & Address | | |
| John Nix 43818 Mallard Ln | _{\$} 100 | _{\$} 100 |
| Clinton Township, MI 48038 | Click Horo f | or Memo Itemization |
| 5. If over \$100.00 cumulative, please provide: | Click here is | or 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 06/24/15 Name & Address: | _ | |
| Joseph Grima 5785 Crystal Creek Ln | _{\$} 100 | _{\$} 100 |
| Washington Township, MI 48094 | Click Here fo | or Memo Itemization |
| 5. If over \$100.00 cumulative, please provide: | Click Here it | i Wellio Remization |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/14/15 Name & Address | - | |
| Philip McKenna | 100 | 100 |
| 235 E. Main St Northville, MI 48167 | _{\$} 100 | _{\$_} 100 |
| 5. If over \$100.00 cumulative, please provide: | | |
| | Click Here fo | or Memo Itemization |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: | | |
| Page Subtot | al \$350.00 | |
| Grand Total of All Schedules 1, | I | |
| (Complete on last page of Schedul | Enter this total on | _ |

Page_35 of_37

line 3a of Summary Page.



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

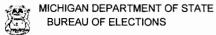
CANDIDATE COMMITTEE

1. Committee I.D. Number _____

| 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 07/10/15 Name & Address: | | |
| John Dinka 37279 Fiore Trail Clinton Township, MI 48036 | _{\$} 500 | _{\$} 500 |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | r Memo Itemization |
| Occupation Dentist Employer Dinka Dental | Ollok Field to | World Romization |
| Business Address 35100 Tiffany Dr., #101 Sterling Heights, MI 48312 | | |
| Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/17/15 Name & Address | | |
| Robert Mijac 43710 Via Antonio Sterling Heights, MI 48314 | _{\$} 50 | _{\$} 50 |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: | | |
| 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/10/15 Name & Address: | | |
| Waste Management Employees Better Government Fund of Michigan 48797 Alpha Drive, Suite 100 Wixom, MI 48393 | _{\$} 250 | _{\$} 750 |
| 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 07/28/15 Name & Address | | |
| Barbara Rossman 54311 Queensborough Dr. Shelby Township, Ml 48315 | _{\$} 250 | _{\$_} 250 |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| Occupation CEO Employer Henry Ford Macomb Health | | |
| Business Address 15855 19 Mile Rd, Clinton Township, MI 48038 | | |
| Type of Contribution: | | |
| Page Subtotal | \$1,050.00 | |
| Grand Total of All Schedules 1A (Complete on last page of Schedule) | Enter this total on | |

Page 36 of 37

Page.



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 138477

2 Committee Name

Committee to Elect Michael C. 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? ✓ YES 4. Date of Receipt 08/18/15 | | |
| Name & Address: Mitten Leadership Fund | | |
| 971 Dressler | 20000 | 20000 |
| Rochester Hills, MI 48307 | _{\$} 20000 | \$ 20000 |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | r Memo Itemization |
| Occupation Employer | Office To | Wemo temzation |
| Business Address | | |
| Type of Contribution: | | |
| 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/09/15 Name & Address | | |
| Padraic Mullin 2956 Belcher | _{\$} 50 | _{\$} 100 |
| Sterling Heights, MI 48310 | | |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| Occupation Employer | | |
| Business Address | | |
| Type of Contribution: Direct Loan from a person Fund Raiser | | |
| 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/09/15 Name & Address: | | |
| Joseph Oram 2187 Orchard Lake Rd, Suite 102 | _{\$} 500 | _{\$} 500 |
| West Bloomfield, MI 48320 | Oli - la 11 f | Name the male attent |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| Occupation Owner Employer 5 Star Outdoor, LLC | | |
| Business Address 2187 Orchard Lake, Suite 102 West Bloomfield, MI 48320 | | |
| Type of Contribution: | | |
| 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/09/15 Name & Address | | |
| Amira Bajoka 34528 Dequindre Rd. | _{\$} 150 | ູ 150 |
| Sterling Heights, MI 48310 | | Ψ |
| 5. If over \$100.00 cumulative, please provide: | Click Here for | Memo Itemization |
| Occupation Owner Employer Rena Travel | | |
| Business Address 34528 Dequindre Rd., Sterling Heights, MI 48310 | | |
| Type of Contribution: Virect Loan from a person Virect Fund Raiser | | |
| Page Subtotal | \$20,700.00 | |
| Grand Total of All Schedules 1A | \$66,490.00 | |
| (Complete on last page of Schedule) | , | J |

Page 37 of 37



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number <u>138477</u>

| CAN | VDID | ATE | CON | ΙМΙ | TTEE |
|-----|-------------|-----|-----|-----|------|
| | | | | | |

Committee to Elect Michael C. Taylor

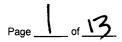
| CANDIDATE COMM | IITTEE 2. Committee Name | | |
|---|--|--------------------------------------|--|
| 3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both 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: Rizzo Environmental Services PAC 6200 Elmridge Sterling Heights, MI 48313 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address: | Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description Paczki Day Party 5. Date Of Receipt: 02/12/15 6. Vendor Name & Address: | 250 g | 250 |
| Fund Raiser Contribution | | | |
| Contribution # 2 PAC Receipt? Yes Name & Address Sterling Heights Fire Fighters Union 38911 Van Dyke Ave Sterling Heights, MI 48310 | 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 | 71.48 \$ | 71.48 |
| If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: | Description Paczki Day Party 5. Date Of Receipt: 6. Vendor Name & Address: | | |
| | C | lick Here for Memo It | emization |
| Fund Raiser Contribution Contribution #3 PAC Receipt? Yes | Endorsement or Guarantee of Bank Loan | | <u> </u> |
| Name & Address: | Goods Donated or Loaned Services Donated \$ Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN | \$ | |
| If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: | Description 5. Date Of Receipt: 6. Vendor Name & Address: | Click Here for Memo It | emization |
| Fund Raiser Contribution | Page Subtot | al \$321.40 | \$321.48 |
| | r age Subton | ^{al} \$321.48 | φ321.40 |
| | Grand Total of all Schedules 1- (Complete on last page of Schedul | 1.70.77 1 440 1 | |



Committee L.D. Number 138477

| 1. Committee I. D. Number | 100-111 |
|---------------------------|-----------------------------------|
| 2 Committee Name Con | mittee to Elect Michael C. Taylor |

| | on the contract of the contrac | T 6 D | C. Amarina |
|---|--|-----------------|---|
| Name and address of person or vendor to whom paid | Purpose (Required Information) | 5. Date | 6. Amount |
| Expenditure #1 | | | |
| Name Harland Clarke | | 01/28/15 | \$ 35.50 |
| Address | Purpose: Checkbooks | Date | |
| 15955 La Cantera Pkwy | Click H | lere for Memo I | temization Type |
| San Antonio, TX 78256 | | | - · |
| Fund Raiser | Check box if this expenditure is payment of debt or obligation reported on previous statement | | |
| Expenditure #2 | | | |
| Name Doug Skrzyniarz | | 02/04/15 | . # 400 |
| Doug Skizyillaiz | | Date | \$ <u>\$190 </u> |
| Address | Purpose: Paczki Day Event | Dale | |
| 14469 Maisano Dr. | Click I | Here for Memo I | temization Type |
| Sterling Heights, MI 48312 | | | |
| | Check box if this expenditure is payment of debt or obligation reported on previous | | |
| Fund Raiser | statement | | |
| Expenditure #3 | | | |
| Name Macomb County Clerk | | 02/09/15 | a 400 |
| | Lata Faca | Date | \$ <u>100</u> |
| Address | Purpose: Late Fees | Dale | |
| 40 N. Main | Click H | lere for Memo I | temization Type |
| Mt. Clemens, MI 48043 | _[-] | | |
| | Check box if this expenditure is payment of debt or obligation reported on previous | | |
| Fund Raiser | statement | | |
| Expenditure #4 | | | |
| Name Macomb GOP | | 03/27/15 | . 00 |
| | Lineale Diego Tielest | Date | \$ <u>60</u> |
| Address | Purpose: Lincoln Dinner Ticket | | |
| 48711 Van Dyke | Ottob I | Joro for Mome I | temization Type |
| Shelby Twp, MI 48317 | | | теппианоп туре |
| | Check box if this expenditure is payment of | | |
| Fund Raiser | debt or obligation reported on previous statement | | |
| Expenditure #5 | | | |
| Name M. Beshara, Inc. | | 04/30/15 | |
| | Purpose: Letterhead/Envelopes | Date | \$ <u>294.90</u> |
| Address | Purpose: | | |
| 10020 Capital St. | Click | Here for Memo | Itemization Type |
| Oak Park, MI 48237 | Check box if this expenditure is payment of | | |
| Fund Raiser | debt or obligation reported on previous statement | | |
| Fullu Raisei | | otal this page | \$680.40 |
| | oubl | | φυου.40 |
| | Grand Total of all | | |
| | (Complete on last pag | e of Schedule) | |





1. Committee I. D. Number 138477

2. Committee Name Committee to Eket Michael C. Taylor

| Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
|--|---|--------------------------|------------------|
| Expenditure #1 Name Meijer | | 05/22/15 | \$ 245 |
| Address 36600 Van Dyke Sterling Heights, MI 48312 | Check box if this expenditure is payment of | Date Here for Memo It | emization Type |
| Fund Raiser | debt or obligation reported on previous statement | | |
| Expenditure #2 Name M. Beshara, Inc. | Purpose: Fundraiser Tickets | 05/28/15 Date | \$ <u>127.89</u> |
| Address 10020 Capital Oak Park, MI 48237 Fund Raiser | | Here for Memo It | emization Type |
| Expenditure #3 Name Office Depot Address | Purpose: Fundraiser Poster | 06/23/15 Date | \$ 37.09 |
| 37600 Van Dyke Sterling Heights, MI 48312 | Click I Check box if this expenditure is payment of debt or obligation reported on previous statement | Here for Memo II | lemization Type |
| Expenditure #4 Name Sam's Club Address | Purpose: Fundraiser Cake/Cookies | 06/24/15 Date | \$ 59.69 |
| 45600 Utica Park Blvd Utica, MI 48315 | Click Check box if this expenditure is payment of debt or obligation reported on previous statement | Here for Memo I | temization Type |
| Expenditure #5 Name Meijer Address 36600 Van Dyke Sterling Heights, MI 48312 | Check box if this expenditure is payment of | | \$ 44.45 |
| Fund Raiser | debt or obligation reported on previous statement | atal this acce | 0544.40 |
| | Subt Grand Total of all (Complete on last pag | | \$514.12 |



| 1. Committee I. D. Number | 138477 | |
|---------------------------|------------------------------------|--|
| | | |
| 2 Committee Name Cor | nmittee to Elect Michael C. Taylor | |

| 2.0 | ommittee Name | | |
|--|---|--------------------------|-----------------------|
| 3. Name and address of person or vendor to whom paid | Purpose (Required Information) | 5. Date | 6. Amount |
| Expenditure #1 | | | |
| Name Brian Ivan | | 06/24/15 | \$ 1000 |
| Address | Purpose: Fundraiser Entertainment | Date | |
| 34086 Inverarry Court | Click | Here for Memo I | emization Type |
| Sterling Heights, MI 48312 | | | |
| / | Check box if this expenditure is payment of | | |
| Fund Raiser | debt or obligation reported on previous statement | | |
| Expenditure #2 | | | |
| Name Target | | 06/29/15 | \$ 52.90 |
| · · | Purpose: Thank You Cards | Date | |
| Address | Purpose: Trank 154 Cards | | |
| 35700 Van Dyke | Click I | Here for Memo I | temization Type |
| Sterling Heights, MI 48312 | | | |
| | Check box if this expenditure is payment of debt or obligation reported on previous | | |
| Fund Raiser | statement | | |
| Expenditure #3 | | | |
| | | 07/00/45 | |
| Name American Polish Century Club | | 07/02/15 | \$ <u>150</u> |
| Address | Purpose: Polish Festival Banner | Date | |
| 33204 Maple Lane | | Here for Memo I | temization Type |
| Sterling Heights, MI 48312 | | | ternization Type |
| Coming Florgrito, in 100 in | Check box if this expenditure is payment of | | |
| Fund Raiser | debt or obligation reported on previous statement | | |
| Expenditure #4 | | | |
| Name Swing Fore The Cure | | 07/02/15 | |
| Swing Fore The Odie | | Date | \$ <u>215</u> |
| Address | Purpose: Hole Sponsorship | Date | - |
| 38445 River Park Dr. | | | |
| Sterling Heights, MI 48313 | Click | Here for Memo | Itemization Type |
| | Check box if this expenditure is payment of | F | |
| Fund Raiser | debt or obligation reported on previous statement | | |
| | Statement | · = v · · | |
| Expenditure #5 | | | |
| Name Sawicki & Sons | | 07/17/15 | \$ 5,575.60 |
| Address | Purpose: Yard Signs | Date | - 0,010.00 |
| | | 11 fo - 14 | Itamination Trans |
| 1521 W. Lafayette Blvd | | | Itemization Type |
| Detroit, MI 48216 | Check box if this expenditure is payment of debt or obligation reported on previous | I | |
| Fund Raiser | statement | | |
| | Subt | total this page | \$6,993.50 |
| | Od T-t-l -f ol | I Cabadulas 1D | |
| | Grand Total of al (Complete on last pag | | |
| | (Complete of last pag | J -: -: -: -: -: -: -: / | |



| 84 | 7 | 7 |
|----|----|------------------|
| Į | J+ | J + 1 |

2. Committee Name

Committee to Elect Michael C. Taylor

| | 1 Description (Description) | I E Doto | 6 Amount |
|---|---|------------------|-----------------|
| Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
| Expenditure #1 | | | |
| ^{Name} Huntington Bank | | 07/15/15 | \$ 20 |
| Address | Purpose: Checking Acct Fee | Date | |
| 35653 Dodge Park | Click H | lere for Memo It | emization Type |
| Sterling Heights, MI 48312 | Check box if this expenditure is payment of | | - · |
| Fund Raiser | debt or obligation reported on previous statement | | |
| Expenditure #2 | | | |
| Name Speedway | | 07/17/15 | s 25 |
| | Purpose: Gas | Date | |
| Address | Purpose: | | |
| 3875 15 Mile Rd | Click F | lere for Memo It | temization Type |
| Sterling Heights, MI 48312 | Check box if this expenditure is payment of | | |
| Fund Raiser | debt or obligation reported on previous statement | | |
| Expenditure #3 | | | |
| Name Home Depot | | 07/23/15 | |
| Поше Берог | 0: 5 1- | | \$ <u>71.31</u> |
| Address | Purpose: Sign Posts | Date | |
| 37000 Van Dyke | Click H | lere for Memo It | emization Type |
| Sterling Heights, MI 48312 | Check box if this expenditure is payment of | | |
| Fund Raiser | debt or obligation reported on previous | | |
| | statement | | |
| Expenditure #4 | | | |
| Name Italian American Cultural Center | | 07/24/15 | \$ 100 |
| Address | Purpose: Festival Banner | Date | |
| 43843 Romeo Plank | | | |
| Clinton Township, MI 48038 | Click H | lere for Memo I | temization Type |
| | Check box if this expenditure is payment of | | |
| Fund Raiser | debt or obligation reported on previous statement | | |
| Expenditure #5 | | | |
| Name CTE Kenneth Verkest | | 07/25/15 | |
| Address | Purpose: Fundraiser Ticket | Date | \$ <u>100</u> |
| 39285 N. Blom | | | – |
| Harrison Township, MI 48045 | | Here for Memo I | temization Type |
| Hamson Township, wii 40040 | Check box if this expenditure is payment of debt or obligation reported on previous | | |
| Fund Raiser | statement | | |
| | Subto | otal this page | \$316.31 |
| | Grand Total of all | | |
| | (Complete on last page | e of Schedule) | |



| ommittee I. D. Number | 138477 |
|-----------------------|--------|
|-----------------------|--------|

| 1. Committee I. D. N | umber |
|----------------------|--------------------------------------|
| 2 Committee Name | Committee to Elect Michael C. Taylor |

| | (D | E Data | 6 Amount |
|---|---|------------------|------------------|
| Name and address of person or vendor to whom paid | Purpose (Required Information) | 5. Date | 6. Amount |
| Expenditure #1 | | | |
| Name Home Depot | | 08/03/15 | \$ 43.93 |
| Address | Purpose: Sign Posts | Date | |
| 37000 Van Dyke | | lere for Memo It | emization Type |
| Sterling Heights, MI 48312 | | | |
| | Check box if this expenditure is payment of debt or obligation reported on previous | | |
| Fund Raiser | statement | | |
| Expenditure #2 | | | |
| Name M. Beshara, Inc. | | 08/05/15 | \$ 427.87 |
| | Purpose: Flyers | Date | |
| Address | r ui pose | | |
| 10020 Capital | Click H | Here for Memo It | emization Type |
| Oak Park, MI 48237 | Check box if this expenditure is payment of | | |
| Fund Raiser | debt or obligation reported on previous | | |
| Expenditure #3 | statement | | |
| Experiature #3 | | | |
| Name Home Depot | | 08/17/15 | \$ 154.27 |
| Address | _{Purpose:} Sign Posts | Date | |
| 37000 Van Dyke | | Here for Memo It | emization Type |
| Sterling Heights, MI 48312 | | TETE TOT METHOR | emzauon type |
| | Check box if this expenditure is payment of debt or obligation reported on previous | | |
| Fund Raiser | statement | | |
| Expenditure #4 | | | |
| Name Penna's | | 08/19/15 | . 0.000 |
| . 3 | Fundroiser Hell | Date | \$ <u>2,600</u> |
| Address | Purpose: Fundraiser Hall | | |
| 38400 Van Dyke | Click | Here for Memo I | temization Type |
| Sterling Heights, MI 48312 | | | |
| Ħ | Check box if this expenditure is payment of debt or obligation reported on previous | | |
| Fund Raiser | statement | | |
| Expenditure #5 | | | |
| Name Manhattan Mailers | | 08/21/15 | * 0.4C 00 |
| Address | Purpose: Spaghetti Dinner Mailing | Date | \$ <u>246.82</u> |
| | | | |
| 51132 Milano Dr. | I | | temization Type |
| Macomb, MI 48042 | Check box if this expenditure is payment of debt or obligation reported on previous | | |
| Fund Raiser | statement | | |
| - | Subt | otal this page | \$3,472.89 |
| | Grand Total of all | | |
| | (Complete on last pag | ge of Schedule) | |



ommittee L.D. Number 138477

| Committee I. D. Number | | - |
|--|------------------------------------|---|
| 2 Committee Name COI | nmittee to Elect Michael C. Taylor | |

| Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
|---|---|------------------|------------------|
| Expenditure #1 | | | |
| Name Home Depot | | 08/21/15 | \$ 52.99 |
| Address | Purpose: Sign Posts | Date | |
| 37000 Van Dyke | | loro for M " | tomization Turns |
| Sterling Heights, MI 48312 | Click F | tere for Memo II | temization Type |
| | Check box if this expenditure is payment of debt or obligation reported on previous | | |
| Fund Raiser | statement | | |
| Expenditure #2 | | | |
| Name Home Depot | | 08/24/15 | \$ 229.30 |
| | Purpose: Sign Posts | Date | |
| Address | ruipose | | |
| 37000 Van Dyke | Click H | Here for Memo I | temization Type |
| Sterling Heights, MI 48312 | Check box if this expenditure is payment of | | |
| Fund Raiser | debt or obligation reported on previous statement | | |
| Expenditure #3 | | | |
| Name American Graphics Printing Co. | | 08/24/15 | |
| American Graphics Filling Co. | On and atti Diaman Elecan | | \$ <u>169.60</u> |
| Address | Purpose: Spaghetti Dinner Flyers | Date | |
| 34895 Groesbeck Hwy | Click F | lere for Memo I | temization Type |
| Clinton Township, MI 48035 | Check box if this expenditure is payment of | | |
| Fund Raiser | debt or obligation reported on previous statement | | |
| Expenditure #4 | | | |
| Name Italian Tribune | | 08/31/15 | |
| | Nowanasar Ad | Date | \$ <u>500</u> |
| Address | Purpose: Newspaper Ad | | |
| PO Box 380407 | Click I | Here for Memo I | temization Type |
| Clinton Township, MI 48038 | Check box if this expenditure is payment of | | |
| Fund Deises | debt or obligation reported on previous | | |
| Fund Raiser | statement | | |
| Expenditure #5 | | | |
| Name Home Depot | | 08/31/15 | \$ 124.66 |
| Address | Purpose: Sign Posts | Date | + <u>12-7.00</u> |
| 37000 Van Dyke | | Here for Memo I | Itemization Type |
| Sterling Heights, MI 48312 | Check box if this expenditure is payment of | | |
| Fund Raiser | debt or obligation reported on previous statement | | |
| 1 did Naisei | | otal this page | ¢1 076 55 |
| | | | \$1,076.55 |
| | Grand Total of all (Complete on last pag | | |
| | (Complete of last pag | 2 3. 00.1000.0) | Francisco total |



| Committee I | Ь | Number | 138477 | |
|-------------|---|--------|--------|--|
| Committee I | П | Number | 130411 | |

| 1. Committee I. D. Ni | umber |
|-----------------------|--------------------------------------|
| 2 Committee Name | Committee to Elect Michael C. Taylor |

| Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
|---|---|------------------|------------------|
| Expenditure #1 Name Facebook | | 09/02/15 | \$ 39.42 |
| Address | Purpose: Facebook Ad | Date | <u> </u> |
| 1 Hacker Way | Click H | lere for Memo It | emization Type |
| Menlo Park, CA 94205 | Check box if this expenditure is payment of debt or obligation reported on previous | | |
| Expenditure #2 | statement | | |
| Name Home Depot | | 09/04/15 Date | \$ <u>170.65</u> |
| Address | Purpose: Sign Posts | Dale | |
| 37000 Van Dyke | Click H | lere for Memo it | temization Type |
| Sterling Heights, MI 48312 | Check box if this expenditure is payment of | | ļ |
| Fund Raiser | debt or obligation reported on previous statement | | |
| Expenditure #3 | | | |
| Name Victory Phones | | 09/11/15 | \$ <u>630.48</u> |
| Address | Purpose: Polling | Date | |
| 190 Monroe NW, Fifth Floor | Click H | lere for Memo l | temization Type |
| Grand Rapids, MI 49503 | Check box if this expenditure is payment of | | |
| Fund Raiser | debt or obligation reported on previous statement | | · |
| Expenditure #4 | | | |
| ^{Name} Facebook | | 09/14/15 | \$ 50.01 |
| Address | Purpose: Facebook Ad | Date | · <u></u> |
| 1 Hacker Way | Click ⊦ | lere for Memo I | temization Type |
| Menlo Park, CA 94205 | Check box if this expenditure is payment of | | |
| Fund Raiser | debt or obligation reported on previous statement | _ | |
| Expenditure #5 | | | |
| Name Sterling Heights Band Boosters | | 09/14/15 | \$ 50.00 |
| Address | Purpose: Golf Outing Hole Sponsorship | Date | ¥ <u>50.00</u> |
| 12901 15 Mile Rd | Click F | Here for Memo | Itemization Type |
| Sterling Heights, MI 48312 | Check box if this expenditure is payment of debt or obligation reported on previous | | |
| Fund Raiser | statement | | |
| | | otal this page | \$940.56 |
| | Grand Total of all (Complete on last page | | |
| | | | |



| | | | 1 | 3 | 8 | 4 | 7 |
|------------|---|--------|---|---|---|---|---|
| ommittee I | D | Number | | _ | _ | • | • |

2. Committee Name Committee to Elect Michael C. Taylor

| - | Continue realine | | |
|--|---|-----------------|------------------|
| 3. Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
| Expenditure #1 | | | |
| Name CTE Barbara A. Ziarko | | 09/13/15 | \$ <u>15.88</u> |
| Address | Purpose: Spaghetti Dinner Flowers | Date | |
| 13805 Deepwood Ct. | Click I | Here for Memo | Itemization Type |
| STerling Heights, MI 48312 | Check box if this expenditure is payment of | | 75- |
| Fund Raiser | debt or obligation reported on previous statement | | |
| Expenditure #2 | | . – | |
| Name City of Sterling Heights | | 09/15/15 | \$ 58 |
| Address | Purpose: Voter Lists | Date | |
| 40555 Utica Rd. | Click I | Here for Memo I | Itemization Type |
| Sterling Heights, MI 48313 | | | , . |
| | Check box if this expenditure is payment of | | |
| Fund Raiser | debt or obligation reported on previous statement | | |
| Expenditure #3 | | | |
| Name CTE Maria Schmidt | | 09/13/15 | n 40 40 |
| | Snoohotti Dinner Blates 9 College | Date | \$ <u>40.42</u> |
| Address | Purpose: Spaghetti Dinner Plates & Cake | Date | |
| 35755 Woodvilla Dr. | Click I | Here for Memo I | Itemization Type |
| Sterling Heights, MI 48312 | Check box if this expenditure is payment of | | •• |
| Fund Paiser | debt or obligation reported on previous | | |
| Fund Raiser | statement | | |
| Expenditure #4 | | | |
| Name C&G Publishing | | 09/16/15 | \$ 1720 |
| Address | Purpose: Sentry Ad | Date | - 1120 |
| | ruipose. | | |
| 13650 11 Mile Rd. | Click | Here for Memo | Itemization Type |
| Warren, MI 48089 | Check box if this expenditure is payment of | , | |
| Fund Paiser | debt or obligation reported on previous | | |
| Fund Raiser | statement | | |
| Expenditure #5 | | | |
| Name St. Jude | | 09/13/15 | \$ 35.75 |
| Address | Purpose: St. Jude Charity Walk Sponsorship | Date | ÷ <u>55.15</u> |
| 1461 E. 12 Mile Rd. | Click | Here for Memo | Itemization Type |
| Madison Heights, MI 48071 | Check box if this expenditure is payment of | | 75- |
| | debt or obligation reported on previous | | |
| Fund Raiser | statement | | T |
| | Subt | total this page | \$1,870.05 |
| | Grand Total of all | | |
| | (Complete on last pag | ge of Schedule) | <u></u> |
| | | | |



| | _ | | 1 | 38 | 34 | 4 | 7 | 7 | |
|------------|--------------|--------|---|----|----|---|---|---|--|
| ommittee I | \mathbf{n} | Number | | | | | | | |

| 1. Committee I. D. N | umber |
|----------------------|--------------------------------------|
| 2. Committee Name | Committee to Elect Michael C. Taylor |

| Name and address of person or vendor to whom paid | Purpose (Required Information) | 5. Date | 6. Amount |
|--|---|------------------|-------------------|
| Expenditure #1 Name Tony Licata | Photography | 09/13/15 Date | \$ <u>200</u> |
| Address 8874 Houghton Sterilng Heights, MI 48314 | Check box if this expenditure is payment of | Here for Memo I | emization Type |
| Fund Raiser | debt or obligation reported on previous statement | | |
| Expenditure #2 Name M. Beshara, Inc. | Elvoro | 09/25/15 Date | \$ <u>6752.89</u> |
| Address | Purpose: Flyers | | |
| 10020 Capital Dr. Oak Park, MI 48237 Fund Raiser | Click Check box if this expenditure is payment of debt or obligation reported on previous statement | Here for Memo I | temization Type |
| Expenditure #3 | | | |
| Name Postmaster | Dontors | 09/25/15 Date | \$ <u>2009.42</u> |
| Address 7007 Metro Pkwy | Purpose: Postage | | – |
| 7007 Metro Pkwy Sterling Heights, MI 48311 | Click Check box if this expenditure is payment of debt or obligation reported on previous | Here for Memo I | temization Type |
| Fund Raiser | statement | | |
| Expenditure #4 Name Italian Tribune | | 09/28/15 | \$ 500 |
| Address | Purpose: Newspaper Ad | Date | |
| P.O. Box 380407 Clinton Township, MI 48038 | Click Check box if this expenditure is payment of debt or obligation reported on previous | | temization Type |
| Fund Raiser | statement | | |
| Expenditure #5 | | _ = | |
| Name Home Depot Address | Purpose: Sign Posts | 09/28/15 Date | \$ 93.49 |
| 37000 Van Dyke Sterling Heights, MI 48312 | Click Check box if this expenditure is payment of debt or obligation reported on previous statement | | Itemization Type |
| | Subt | total this page | \$9,555.80 |
| | Grand Total of al (Complete on last pag | | |

Enter this total on line 8a of Summary Page

9 of 13



| ommittee I. D. Number | 138477 |
|-----------------------|--------|
|-----------------------|--------|

| 1. Committee I. D. N | |
|----------------------|--------------------------------------|
| 2 Committee Name | Committee to Elect Michael C. Taylor |
| E. Committee Harris | |

| Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
|--|---|------------------|------------------|
| Expenditure #1 Name C&G Publishing | Purpose: Sentry Ad | 09/30/15 Date | s_1820 |
| Address 13650 11 Mile Rd Warren, MI 48089 | Click Check box if this expenditure is payment of | Here for Memo II | emization Type |
| Fund Raiser | debt or obligation reported on previous statement | | |
| Expenditure #2 Name Facebook | Purpose: Facebook Ad | 10/01/15 Date | \$ <u>80.71</u> |
| Address 1 Hacker Way Menlo Park, CA 94025 Fund Raiser | | Here for Memo I | temization Type |
| Expenditure #3 Name Nightowl Printing | _{Purpose:} Printing | 10/01/15 Date | \$ <u>526.06</u> |
| Address 15138 Beech-Daly Rd Redford, MI 48239 Fund Raiser | | Here for Memo I | temization Type |
| Expenditure #4 Name Mass Mailing | | 10/01/15 Date | \$ 774 |
| Address 35468 Mound Sterling Heights, MI 48310 | Purpose: Mail Service Click Check box if this expenditure is payment of debt or obligation reported on previous | Here for Memo I | temization Type |
| Fund Raiser | statement | | |
| Expenditure #5 Name Home Depot Address | Purpose: Sign Posts | 10/05/15 Date | \$ <u>135.25</u> |
| 37000 Van Dyke Ave Sterling Heights, MI 48312 | Click Check box if this expenditure is payment o debt or obligation reported on previous statement | | Itemization Type |
| | Sub | total this page | \$3,336.02 |
| | Grand Total of al (Complete on last pa | | |



| | _ | N | 1 | 3 | 8 | 4 | 7 |
|-----------|----|--------|---|---|---|---|---|
| mmittaa 1 | 1) | Number | | | | | |

Committee I. D. Number
 Committee to Elect Michael C. Taylor

| | 4 Durage (Paguired Information) | 5. Date | 6. Amount |
|---|---|------------------|------------------|
| Name and address of person or vendor to whom paid | Purpose (Required Information) | J. Date | o. Amount |
| Expenditure #1 | | | |
| Name Postmaster | | 10/13/15 | \$ 2009.42 |
| Address | Purpose: Postage | Date | |
| 7007 Metro Parkway | Click H | lere for Memo It | emization Type |
| Sterling Heights, MI 48311 | Check box if this expenditure is payment of | | |
| Fund Raiser | debt or obligation reported on previous statement | | |
| Expenditure #2 | | | |
| Name Mass Mailing | | 10/13/15 | \$ 387 |
| Address | Purpose: Mail Service | Date | |
| 35468 Mound | Click H | Here for Memo I | emization Type |
| Sterling Heights, MI 48310 | Check box if this expenditure is payment of | | |
| Fund Raiser | debt or obligation reported on previous statement | | |
| Expenditure #3 | | | |
| Name American Polish Century Club | | 10/15/15 | r 1015 |
| · | Purpose: Spaghetti Dinner | Date | \$ <u>1015</u> |
| Address | Purpose: P-3 | | |
| 33204 Maple Ln | Click F | Here for Memo I | temization Type |
| Sterling Heights, MI 48312 | Check box if this expenditure is payment of | | |
| Fund Raiser | debt or obligation reported on previous statement | | |
| Expenditure #4 | | | |
| Name Sam's Club | | 10/15/15 | \$ 135.04 |
| Address | Purpose: Halloween Candy | Date | |
| 45600 Utica Park Blvd | Click | Here for Memo I | temization Type |
| Utica, MI 48315 | | | |
| | Check box if this expenditure is payment of debt or obligation reported on previous | | |
| Fund Raiser | statement | | |
| Expenditure #5 | | | |
| Name C&G Publishing | | 10/15/15 | \$ 2852 |
| Address | Purpose: Sentry Ad | Date | \$ <u>2852</u> |
| 13650 11 Mile Rd. | Click | Here for Memo | Itemization Type |
| Warren, MI 48089 | Check box if this expenditure is payment of | | |
| Fund Raiser | debt or obligation reported on previous statement | | |
| | | otal this page | \$6,398.46 |
| | Grand Total of all | Schedules 1B | |
| | (Complete on last pag | | |



1. Committee I. D. Number

| 1. Committee 1. D. Num | |
|------------------------|--------------------------------------|
| 2. Committee Name | committee to Elect Michael C. Taylor |

| Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
|---|---|-------------------|------------------|
| Expenditure #1 | | | |
| Name Lamar Media | | 10/15/15 | \$ 1800 |
| Address | Purpose: Billboard Ad | Date | |
| 6405 North Hix | Click F | Here for Memo I | temization Type |
| Westland, MI 48185 | Check box if this expenditure is payment of | | |
| Fund Raiser | debt or obligation reported on previous statement | | |
| Expenditure #2 | | | |
| Name CTE Nathan Shannon | | 04/30/15 | s <u>100</u> |
| Address | Purpose: Fundraiser Ticket | Date | |
| 40256 Diane Dr. | Click F | Here for Memo | temization Type |
| Sterling Heights, MI 48313 | | | |
| Fund Raiser | Check box if this expenditure is payment of debt or obligation reported on previous statement | | |
| Expenditure #3 | | | |
| Name Sam's Club | | 09/21/15 | \$ 36.30 |
| Address | Purpose: Gasoline | Date | |
| 45600 Utica Park Blvd | | loro for Momo I | temization Type |
| Utica, MI 48315 | ļ — _ | Tele IOI MEITIO I | ternization Type |
| Fund Raiser | Check box if this expenditure is payment of debt or obligation reported on previous statement | | |
| Expenditure #4 | | | |
| Name Print Masters | | 10/07/15 | \$ 1693.20 |
| Address | Purpose: Flyers | Date | 1000.20 |
| 26039 Dequindre Rd | Click + | Here for Memo I | temization Type |
| Madison Heights, MI 48071 | | | |
| Fund Raiser | Check box if this expenditure is payment of debt or obligation reported on previous statement | | |
| Expenditure #5 | | | |
| Name C&G Publishing | | 10/07/15 | \$ 1476 |
| Address | Purpose: Sentry Ad | Date | ¥ <u>1470</u> |
| 13650 11 Mile Rd | Click I | Here for Memo | temization Type |
| Warren, MI 48089 | Check box if this expenditure is payment of | | ,, |
| Fund Raiser | debt or obligation reported on previous statement | | |
| | Subto | otal this page | \$5,105.50 |
| | Grand Total of all (Complete on last pag | | |
| | | , | |

Enter this total on line 8a of Summary Page

Page ____ of ___



2. Committee Name Committee to Elect Michael C. Taylor

| Name and address of person or vendor to whom paid | 4. Purpose (Required Information) | 5. Date | 6. Amount |
|---|---|---------------------|-----------------|
| Expenditure #1 | | 10/05/:- | |
| Name Postmaster | | 10/07/15 | \$ 2009.42 |
| Address | Purpose: Postage | Date | |
| 7007 Metro Pkwy | Click H | ere for Memo If | temization Type |
| Sterling Heights, MI 48312 | Check box if this expenditure is payment of | | |
| Fund Raiser | debt or obligation reported on previous statement | | |
| Expenditure #2 | | | |
| Name | | | \$ |
| Address | Purpose: | Date | |
| | Click H | ere for Memo I | temization Type |
| | _ | | |
| Fund Raiser | Check box if this expenditure is payment of debt or obligation reported on previous statement | | |
| Expenditure #3 | | | |
| Name | | | e |
| Address | Purpose: | Date | \$ |
| Addiess | | | |
| | | ere for Memo II | temization Type |
| | Check box if this expenditure is payment of debt or obligation reported on previous | | |
| Fund Raiser | statement | | |
| Expenditure #4 Name | | | |
| realic | | Data | \$ |
| Address | Purpose: | Date | |
| | Click H | lere for Memo l | temization Type |
| | Check box if this expenditure is payment of | 1010 101 11101110 1 | |
| Trud Brian | debt or obligation reported on previous | | |
| Fund Raiser | statement | | |
| Expenditure #5 Name | | | |
| Name | | Date | \$ |
| Address | Purpose: | Date | |
| | l | lere for Memo i | temization Type |
| Fund Raiser | Check box if this expenditure is payment of debt or obligation reported on previous statement | | |
| | | tal this page | \$2,009.42 |
| | Grand Total of all | Schedules 1B | |
| | (Complete on last page | | \$42,269.58 |

Enter this total on line 8a of Summary Page

13 of ____



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee 1.D. Number 13847

138477

... Committee Name CTE Michael C. Taylor

| CANDIDATE COMMITTEE 2. C. | ommittee Name | | | |
|--|--|---|---------------------------------------|--|
| This Schedule itemizes: | | | | |
| a Debts and obligations owed by or forgiven the common (Chec | mittee OR b. Debteck either a or b. Use only for the pu | s and obligations owed <u>to</u> or rpose checked.) | forgiven by the cor | nmittee. |
| Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any. | 4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt | Date and amount of each payment | 8. Cumulative payment to date on debt | 9. Outstanding Balance at close of this period (Item 6 minus Item 8) |
| Debt #1 Corp? Yes Owed to or by: | 4. Type: In-Kind Loan | | | |
| Taylor, Michael C. | 5. Date Debt Was Incurred: | \$ | | |
| 35651 Kensington Ave Sterling Heights, MI 48312 | 08/14/09 | \$ | 0.00 | s 75.51 |
| Sterling Heights, Mil 40312 | 6. Original Amount of Debt: | \$ | \$ 0.00 | \$ |
| | s_75.51 | \$ | | FORGIVEN |
| If bank loan, name of endorser or guarantor: | | Amo | ount Endorsed: \$ _ | |
| Debt #2 Corp? Yes Owed to or by: | 4. Type: In-Kind Loan | \$ | | |
| Taylor, Michael C. | 5. Date Debt Was Incurred: | \$ | | |
| 35651 Kensington Ave Sterling Heights, MI 48312 | 8/15/09 6. Original Amount of Debt: | \$ | s 0.00 | s 14.30 |
| otering rieights, wii 40012 | s 14.30 | 1 \$ | \$ 0.00 | |
| | \$ | \$ | | FORGIVEN |
| If bank loan, name of endorser or guarantor: | | An | ount Endorsed: \$_ | |
| Debt #3 Corp? Yes Owed to or by: | 4. Type: In-Kind Loan | \$ | | |
| Taylor, Michael C. | 5. Date Debt Was Incurred: | \$\$ | | |
| 35651 Kensington Ave | 8/16/09 | \$ | 0.00 | _{\$} 115.60 |
| Sterling Heights, MI 48312 | 6. Original Amount of Debt | \$ | \$ 0.00 | , <u> </u> |
| | <u>\$_115.60</u> | \$ | | FORGIVEN |
| If bank loan, name of endorser or guarantor: | | Ar | mount Endorsed: \$_ | |
| | | Page Subtotal | (Outstanding debt) | \$205.41 |
| | data and otherwise dOct of the | Grand Total | of all Schedules 1E | |
| (Co | omplete on last page of Schedule s | snowing amounts owed by t | n to the committee) | Enter this total |

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

by"" or line 12b "owed to" of the Summary Page





DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number

| 13847 | 7 | | | |
|-------|---|--|--|--|
| | | | | |

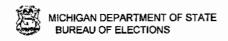
CTE Michael C. Taylor

| CANDIDATE COMMITTEE 2. C | committee Name | ridor of raylor | | |
|--|--|---|--|--|
| This Schedule Itemizes: | | | | |
| a Debts and obligations owed by or forgiven the com | mittee OR b. Debt ck either a or b. Use only for the pu | s and obligations owed <u>to</u> or irpose checked.) | forgiven by the cor | nmittee. |
| Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any. | 4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt | 7. Date and amount of each payment | Cumulative payment to date on debt | 9. Outstanding Balance at close of this period (Item 6 minus Item 8) |
| Debt #1 Corp? Yes Owed to or by: | 4. Type: In-Kind Loan | \$ | | |
| Taylor, Michael C. 35651 Kensington Ave | 5. Date Debt Was Incurred: | \$ | | |
| Sterling Heights, MI 48312 | 09/08/09 | | \$ 0.00 | s 550.00 |
| | 6. Original Amount of Debt: | \$ | \$ | |
| | \$_550.00 | \$ | | FORGIVEN |
| If bank loan, name of endorser or guarantor: | | Amo | ount Endorsed: \$ | |
| Debt #2 Corp? Yes Owed to or by: | 4. Type: In-Kind Loan | \$ | | |
| Taylor, Michael C. | 5. Date Debt Was Incurred: | <u> </u> | | |
| 35651 Kensington Ave | 10/2/09 | \$ | | 1107.00 |
| Sterling Heights, MI 48312 | 6. Original Amount of Debt: | \$ | \$ 0.00 | \$_1107.82 |
| | <u>\$ 1107.82 </u> | | | FORGIVEN |
| | | \$ | | |
| If bank loan, name of endorser or guarantor. | | Ап | nount Endorsed: \$ | |
| Debt #3 Corp? Yes Owed to or by: | 4. Type: In-Kind Loan | \$ | | |
| Taylor, Michael C. | 5. Date Debt Was Incurred: | \$ | | |
| 35651 Kensington Ave | 10/1/09 | \$ | | |
| Sterling Heights, MI 48312 | 6. Original Amount of Debt: | • | \$_0.00 | \$ 62.97 |
| | _{\$} 62.97 | | | FORGIVEN |
| | | \$ | | |
| If bank loan, name of endorser or guarantor. | | Ar | nount Endorsed: \$_ | |
| | | Page Subtotal | (Outstanding debt) | \$1,720.79 |
| (C | omplete on last page of Schedule s | | of all Schedules 1E r to the committee) | |
| | | | | Enter this total |

A debt or obligation must be shown on this Schedule If there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Enter this total on line 12a "owed by"" or line 12b "owed to" of the Summary Page





DEBTS AND OBLIGATIONS SCHEDULE 1E

| • | | | |
|-------|------|-----|--------|
| CANDI | DATE | COM | MITTEE |

CTE Michael C. Taylor

| CANDIDATE COMMITTEE 2.0 | ommittee Name | | | |
|--|--|--|---------------------------------------|--|
| This Schedule Itemizes: | | | | |
| a Debts and obligations owed by or forgiven the comm | mittee OR b. Debts ck either a or b. Use only for the pu | s and obligations owed <u>to</u> or rpose checked.) | forgiven by the con | nmittee. |
| Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any. | 4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt | Date and amount of each payment | 8. Cumulative payment to date on debt | 9. Outstanding Balance at close of this period (Item 6 minus Item 8) |
| Debt #1 Corp? Yes Owed to or by: | 4. Type: In-Kind Loan | \$ | | |
| Taylor, Michael C. 35651 Kensington Ave | 5. <u>Date Debt Was Incurred</u> : 07/06/11 | \$ | | · · · · · · · · · · · · · · · · · · · |
| Sterling Heights, MI 48312 | 6. Original Amount of Debt | <u> </u> | \$ <u>0.00</u> | \$_556.5 |
| | • 556.60 | \$ | | FORGIVEN |
| | \$ | \$ | 1 | |
| If bank loan, name of endorser or guarantor: | | Amo | ount Endorsed: \$ | |
| Debt #2 Corp? Yes Owed to or by: | 4. Type: In-Kind Loan | \$ | | |
| Taylor, Michael C. | 5. Date Debt Was Incurred: | \$ | | |
| 35651 Kensington Ave Sterling Heights, MI 48312 | 9-7-11 6. Original Amount of Debt: | \$ | s 0.00 | c 1533.82 |
| Sterling Heights, Wii 46512 | s 1533.82 | \$ | \$ 0.00 | |
| | \$ 1333.02 | \$ | | FORGIVEN |
| If bank loan, name of endorser or guarantor: | | | nount Endorsed: \$_ | |
| Debt #3 Corp? Yes | - In Kind Loan | | Lindorocu. | |
| Owed to or by: | 4. Type: In-Kind Loan | \$ | | |
| Taylor, Michael C. | 5. Date Debt Was Incurred: | \$ | | |
| 35651 Kensington Ave | 9-29-11 | \$ | 0.00 | \$ 130 |
| Sterling Heights, MI 48312 | 6. Original Amount of Debt: | \$ | \$_0.00 | |
| | ş <u>130</u> | \$ | | FORGIVEN |
| If bank loan, name of endorser or guarantor: | | | mount Endorsed: \$_ | |
| | | Page Subtotal | (Outstanding debt) | \$2,220.32 |
| Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee) | | | | |
| e) | embraca an irrat bada at contaggio | | | Enter this total on line 12a "owed |

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

by" or line 12b "owed to" of the Summary Page



DEBTS AND OBLIGATIONS SCHEDULE 1E

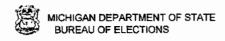
| CANDIDATE | COMMITTEE |
|-----------|-----------|
|-----------|-----------|

2. Committee Name CTE Michael C. Taylor

| CANDIDATE COMMITTEE | | | | |
|--|--|---|--|--|
| This Schedule itemizes: | | | | |
| a ☑ Debts and obligations owed <u>by</u> or forgiven the co (Cf | mmittee OR b. Debts eck either a or b. Use only for the pu | s and obligations owed <u>to</u> or rpose checked.) | forgiven by the com | mittee. |
| Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any. | 4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt | 7. Date and amount of each payment | Cumulative payment to date on debt | 9. Outstanding Balance at close of this period (Item 6 minus Item 8) |
| Debt #1 Corp? Yes Owed to or by: | 4. Type: In-Kind Loan | \$ | | |
| Taylor, Michael C. 35651 Kensington Ave | 5. Date Debt Was Incurred: | \$ | | |
| Sterling Heights, MI 48312 | 09/07/11 | \$ | \$ 0.00 | s 159.00 |
| Otoming Program, Wil 10012 | 6. Original Amount of Debt | \$ | \$ 0.00 | |
| | \$ <u>159.00</u> | | | FORGIVEN |
| If bank loan, name of endorser or guarantor: | | \$ Amo | ount Endorsed: \$ | |
| Debt #2 Corp? Yes Owed to or by: | 4. Type: In-Kind Loan | \$ | | |
| Taylor, Michael C. | 5. Date Debt Was Incurred: | s | | |
| 35651 Kensington Ave | 9-7-11 | | · · | |
| Sterling Heights, MI 48312 | 6. Original Amount of Debt: | | \$ 0.00 | \$_23.30 |
| | ş 23.30 | \$ | | FORGIVEN |
| | | \$ | | |
| If bank loan, name of endorser or guarantor: | | An | nount Endorsed: \$_ | |
| Debt #3 Corp? Yes Owed to or by: | 4. Type: In-Kind Loan | s | | |
| Taylor, Michael C. | 5. Date Debt Was Incurred: | \$ | | |
| 35651 Kensington Ave | 9-7-11 | \$ | | 402.00 |
| Sterling Heights, MI 48312 | 6. Original Amount of Debt: | \$ | \$_0.00 | \$ 103.68 |
| | \$ <u>103.68</u> | | | FORGIVEN |
| | | \$ | | |
| If bank loan, name of endorser or guarantor: | | A | mount Endorsed: \$_ | |
| | | Page Subtotal | (Outstanding debt) | \$285.98 |
| Grand Total of all Schedules 1E (Complete on tast page of Schedule showing amounts owed by or to the committee) | | | | |
| | | | | Enter this total |

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

by" or line 12b "owed to" of the Summary Page



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number

138477

| CANDI | DATE | COMM | IITTEE |
|-------|------|------|--------|

CTE Michael C. Taylor

| CANDIDATE COMMITTEE 2.0 | Committee Name | | | |
|---|--|--|---|--|
| This Schedule itemizes: | | | | |
| a Debts and obligations owed <u>by</u> or forgiven the con (Che | nmittee OR b. Debts ack either a or b. Use only for the pu | s and obligations owed <u>to</u> or rpose checked.) | forgiven by the com | mittee. |
| 3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any. | 4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt | Date and amount of each payment | Cumulative payment to date on debt | 9. Outstanding Balance at close of this period (Item 6 minus Item 8) |
| Debt #1 Corp? Yes Owed to or by: | 4. Type: In Kind Loan | \$ | | |
| Michael C. Taylor 35651 Kensington Ave | 5. Date Debt Was Incurred: | \$ | | |
| Sterling Heights, MI 48312 | 09/29/11 | \$ | s | \$_94.34 |
| 3 7 | 6. Original Amount of Debt: | \$ | <u> </u> | FORGIVEN |
| | \$_94.54 | \$ | | IFORGIVEN |
| If bank loan, name of endorser or guarantor. | | Amo | ount Endorsed: \$ | |
| Debt #2 Corp? Yes Owed to or by: | 4. Type: | \$ | | |
| | 5. Date Debt Was Incurred: | \$ | | |
| | 6 Original Amount of Debt: | \$s | \$ | \$ |
| | \$ | • | | FORGIVEN |
| If hank loan, name of andomer or guaranter | | Δη | nount Endorsed: \$ | |
| If bank loan, name of endorser or guarantor: Debt #3 Corp? Yes | | | lour Endorsed. \$ | |
| Owed to or by: | 4. Type: | <u> </u> | | |
| | 5. Date Debt Was Incurred: | <u> </u> | | |
| • | 6. Original Amount of Debt: | \$ | • | \$ |
| | e | \$ | • • | FORGIVEN |
| | Ψ | \$ | | renewer |
| If bank toan, name of endorser or guarantor: | | Aı | mount Endorsed: \$_ | |
| | | Page Subtotal | (Outstanding debt) | \$94.34 |
| (0 | Complete on last page of Schedule: | Grand Total showing amounts owed by o | of all Schedules 1E or to the committee) | Ψ 1,02010 1 |
| | | | | Enter this total on line 12a "owed by" or line 12b |

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

"owed to" of the Summary Page





FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number 138477

2. Committee Name CTE Michael C. Taylor

| | | 2. Com | imiliee Name | | |
|---|-------------|--|----------------------------------|--|--|
| - USE A SEPARATE SHEET FOR EACH EVENT - | | | | | |
| 3. Date Event Was Held | | r of Individuals Attending ating (whichever is | 5. Type of Fund Raising Activity | 6. Address and Name (If any) of the place where the activity was held. | |
| 06/24/15 | g | 225 | Dinner | Penna's 38400 Van Dyke Sterling Heights, MI Private Residence | |
| 7. Total Contributions | | \$46,490.00 | | | |
| 8. Other Receipts | \$0.00 | | | | |
| 5. Gross Necelpts (Add lines 7 and 6) | | \$46,490.00 | | | |
| | | \$3,869.12 and All Expenditures | Made For the Event) | | |
| 11. Check if event was a jo | int fund ra | iser and complete the | following: | | |
| Co-Sponsor(s) | | Contribution S (%) | plit | 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.

| Page | 1 | of | 1 |
|------|---|----|---|
| _ | | | |