

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by andidate.	3. This Statement covers From	^{i:} 01/01/15	to 10/18/15	
1. Committee I.D. Number		4. Candidate Last Name	Firs	st Name	M.I.
00136969-50		Ziarko	Barbara		Α
2. Committee Name		4a. Office Sought Including Dis Sterling Heights City		ly Served (If application	able)
CTE Barbara A. Ziarko		4b. County of Residence MA	СОМВ		
5. Committee's Mailing Address	· · · · · · · · · · · · · · · · · · ·	6. Treasurer's Name & Reside	ntial Address		
13805 Deepwood Court		Barbara A. Ziarko			
Sterling Heights, MI 48312		13805 Deepwood Co	ourt	= I	- <u></u>
		Sterling Heights, MI	48312	78	15 0
Area Code and Phone (586) 939-0332 If the address in this box is different from the commitmalling address on the Statement of Organization, robe sent to this address by the filing official.		Area Code & Phone (586) 93	9-0332	OC PROPERTY OF THE PROPERTY OF	FILED OCT 22 P
7. Treasurer's Business Address		8. Designated Record keeper	s Name and Mailing		mmittee has a
13805 Deepwood Court		Designated Record keeper) Barbara A. Ziarko		HOLE CO	
Sterling Heights, MI 48312		Daibara A. Ziarko		D D Z X	,i
Area Code and Phone (586) 939-0332		Area Code and Phone (586	939-0332		
9. TYPE OF STATEMENT	D	11 N 15	9e. Dissolution	of Candidate Com	mittee
9a. X Pre-Election OR 9b. Post-Election		NLY if candidate ballot for the	by the committee	to the candidate or	ly any outstanding debt his or her spouse is here
Pre-Election or Post-Election Statement relates to:	July Quar	eriv	the committee. The	he committee has r	onger collectible from no oustanding assets,
Primary			lowes no lates rees	s or has any oustar	aing debt.
⊠ General	October C	uarterly	Further, if the diss	olution cannot be c	ranted, that this be
Convention Convention			considered a requi	est for the Reporting	ig Waiver.
Special	9c. Annua	al Statement ()			
School		Coverage Year	Effective	e date of dissolutio	n
Caucus		dment to Campaign Statement plete Item 9a, 9b, 9c or 9e to			
	indica	te which Statement is being		tion of residual fun-	ds must be reported on
Date of Election, Convention or Caucus	amend	dea.)		and Community Fug.	.
11/03/15					
			L		
 Verification: I\We certify that all reasonable diligenty my\our knowledge and belief the contents are true, 			ent and attached so	chedules (if any) ar	id to the best of
Current Treasurer or Designated Record keeper Designated Record keeper	arko	Barbara Le	irke	Deta 1	0-19-15
Type or Print Name		Signature	<u> </u>	— Date ——— /	
Candidate Barbara A. Ziarko		Darbarate	Zink	∕∕ Date1	0-19-15
Type or Print Name		Signature (ノ		

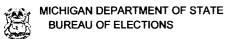


1. Committee I.D. Number 0136969-50

SUMMARY PAGE

2. Committee Name CTE Barbara A. Ziarko

CANDIDATE COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions	12 U2 - MD	
a. Itemized (Schedule 1A - Column 6)	(3a.) \$13,430.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ 13,430.00	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ 95.26	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>13,525.28</u>	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>721.42</u>	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ 10,132.24	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ 10,132·24	(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ Ø	(24.) \$
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
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.) $s = 474.92$ (14.) $+ s = 13,525.20$ (15.) $= s = 14,000.20$ (16.) $- s = 10,132.24$ (17.) $s = 3,807.90$	



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

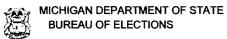
CANDIDATE COMMITTEE

1. Committee I.D. Number _____0136969-50

2. Committee Name CTE Barbara A. Ziarko

line 3a of Summary

Enter contributor's name and address. If contribution is from an individual, enter last name, first name,	6. Amount 7. Cumulative for
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.	Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 4/16/15	
Dominic Tringali	
37266 Jefferson Ave.	15000
Harrison Twp, MI 48045	\$ 150.00° \$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation BUSINESSMAN Employer SEIF	
Business Address	
Type of Contribution: Direct Loan from a person X Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 4/17/15	
Name & Address Fazlullah Khan	
5238 Windmill DR.	s 150.00 s
the state of the s	\$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation BUSINGS Man Employer SOF	
Business Address 43345 Schoenherr Sterling Heights, MI 4	8313
Type of Contribution: Direct Loan from a person X Fund Raiser	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 4/15/15	
Name & Address:	-
Name & Address:	s 150,00°s
Name & Address: Walter Alix 3233 N. Elder	•
Name & Address: Walter Alix 323 N. Elder West Bloomfield, MI 48324 5. If over \$100.00 cumulative, please provide:	\$ 150,00 \$Click Here for Memo Itemization
Name & Address: Walter Alix 3233 N. Elder West Bloomfield, MI 48324 5. If over \$100.00 cumulative, please provide: Occupation BUSINESMAN Employer SELT	•
Name & Address: Walter Alix 3233 N. Elder West Bloomfield, MI 48324 5. If over \$100.00 cumulative, please provide: Occupation BUSINESMAN Employer SELT	Click Here for Memo Itemization
Name & Address: Walter Alix 3233 N. Elder West Bloomfield, MI 48324 5. If over \$100.00 cumulative, please provide: Occupation Businessman Employer Self	Click Here for Memo Itemization
Name & Address: Walter Alix 3a33 N. Elder West Bloomfield, MI 48324 5. If over \$100.00 cumulative, please provide: Occupation BUSINESMAN Employer Business Address 3233 N. Elder, W. Bloomfield MI 48324 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 4/18/15	Click Here for Memo Itemization
Name & Address: Walter Alix 3a33 N. Elder West Bloomfield, MI 48324 5. If over \$100.00 cumulative, please provide: Occupation Business Man Employer Business Address 3233 N. Elder, W. Bloomfield MI 48324 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 4/19/15	Click Here for Memo Itemization
Name & Address: Walter Alix 3233 N. Elder West Bloomfield, MI 48324 5. If over \$100.00 cumulative, please provide: Occupation Business Address 3233 N. Elder, W. Bloomfield MI 48324 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 4/18/15 John Bologna	Click Here for Memo Itemization
Name & Address: Walter Alix 3a33 N. Elder West Bloomfield, MI 48324 5. If over \$100.00 cumulative, please provide: Occupation Business Man Employer Business Address 3233 N. Elder, W. Bloomfield MI 48324 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 4/19/15	Click Here for Memo Itemization
Name & Address: Walter Alix 3233 N. Elder West Bloomfield, MI 48324 5. If over \$100.00 cumulative, please provide: Occupation Business Address 3233 N. Elder, W. Bloomfield MI 48324 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # PAC Receipt? YES 4. Date of Receipt 4/18/15 Name & Address John Bologna 19135 Saxon Dr. Benery Hills, MI 48025 5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Name & Address: Walter Alix 3233 N. Elder West Bloomfield, MI 48324 5. If over \$100.00 cumulative, please provide: Occupation Business Man Employer Self Business Address 3233 N. Elder, W. Bloomfield MI 48324 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 4/18/15 Name & Address John Bologna 19135 Sax on Br. Benery Hils, MI 48025 5. If over \$100.00 cumulative, please provide: Occupation Business Man Employer JHB Association	Click Here for Memo Itemization \$ 150,00 \$ Click Here for Memo Itemization
Name & Address: Walter Alix 3233 N. Elder West Bloomfield, MI 48324 5. If over \$100.00 cumulative, please provide: Occupation Business Address 3233 N. Elder, W. Bloomfield MI 48324 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # PAC Receipt? YES 4. Date of Receipt 4/18/15 Name & Address John Bologna 19135 Saxon Dr. Benery Hills, MI 48025 5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization \$ 150,00 \$ Click Here for Memo Itemization
Name & Address: Walter Alix 3233 N. Elder West Bloomfield, MI 48324 5. If over \$100.00 cumulative, please provide: Occupation Business Man Employer Self Business Address 3233 N. Elder, W. Bloomfield MI 48324 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 4/18/15 Name & Address John Bologna 19135 Sax on Br. Benery Hils, MI 48025 5. If over \$100.00 cumulative, please provide: Occupation Business Man Employer JHB Association	Click Here for Memo Itemization \$ 150,00 \$ Click Here for Memo Itemization
Name & Address: Walter Alix 3233 N. Elder West Bloomfield, MI 48324 5. If over \$100.00 cumulative, please provide: Occupation BMS/NESSMAN Employer Self Business Address 3233 N. Elder, W. Bloomfield MI 48324 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 4/18/15 Name & Address JOhn Bologna 19135 Saxon Dr. Benery Hills, MI 48025 5. If over \$100.00 cumulative, please provide: Occupation BUSINESSMAN Employer UHB ASSOCIATION Business Address 19135 Saxon Dr, Benerly Hills, MI L	Click Here for Memo Itemization \$ 150.00 \$ Click Here for Memo Itemization
Name & Address: Walter Alix 3233 N. Elder West Bloomfield, MI 48324 5. If over \$100.00 cumulative, please provide: Occupation BUSINESMAN Employer Self Business Address 3233 N. Elder, W. Bloomfield MI 48324 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 4/18/15 Name & Address JOHN BOLOGNAL 19135 Saxon Dr. BENEMY HILS, MI 48025 5. If over \$100.00 cumulative, please provide: Occupation BUSINESSMAN Employer JHB ASSOCIATION Business Address 19135 Saxon Dr, Benefly Hils, MI L Type of Contribution: Direct Loan from a person Fund Raiser	Click Here for Memo Itemization \$ 150.00 \$ Click Here for Memo Itemization



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

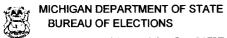
CANDIDATE COMMITTEE

1. Committee I.D. Number _____

2 Committee Name CTE Barbara A. Ziarko

Enter this total on line 3a of Summary

2. Committee Name		
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 417 15 Name & Address: Martin Brown 14300 15 Mile Rd. Sterling Heights, MI 48312 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Loan from a person Fund Raiser	\$ 25.00 Click Here fo	\$or Memo Itemization
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 4/16/15 Name & Address CAYOL FYOLING 5440 BYOOK DATE Rd. Bloomfield Hills, MI 48304 5. If over \$100.00 cumulative, please provide: Occupation BUSINESSWOMAN Employer FYOLING Properties Business Address 5440 BYOOK DATE BLOOMFIELD HILLS, MI 48 Type of Contribution: Direct Loan from a person X Fund Raiser		\$or Memo Itemization
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 4/18/15 Name & Address: Larry Scott 12900 Hall Rd. Stening Heights, MI 48314 5. If over \$100.00 cumulative, please provide: Occupation Attorney Employer D'Reilly Ranailo Business Address Type of Contribution: Direct Loan from a person X Fund Raiser	\$150.00 Click Here fo	\$ r Memo Itemization
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 4/20/15 Thomas Guastello 3H120 Woodward Birming ham, MI 40009 5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer Center Management Business Address 3H120 Woodward, Birming ham, MI 48 Type of Contribution: Direct Loan from a person X Fund Raiser	_	\$r Memo Itemization
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	475.00	_



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

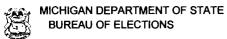
CANDIDATE COMMITTEE

1. Committee I.D. Number ______0136969-50

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line 3a of Summary

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3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 4/20/15 Name & Address: KENIN Denha 40700 Woodward Ave. Ste. 250 B100mfield Hills, M1 40304 5. If over \$100.00 cumulative, please provide:	\$ 75.00 \$ Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person X Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 4/21/15 Name & Address Wayne Dehmke 17610 21 Mile Rd. Macomb, MI 48044	\$ 75.00 \$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person X Fund Raiser	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 4/21/15 Name & Address: JOHN FUN 13288 Lillian Ln. Sterling Hughts, MI 48313 5. If over \$100.00 cumulative, please provide:	\$ 75.00 \$ 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 4/21/15 Name & Address RAYMOND Bianchini 50413 Central Industrial Dr. Shelby Township, MI 48315 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	\$ 75.00 \$ Click Here for Memo Itemization
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	300.0



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

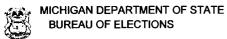
CANDIDATE COMMITTEE

1. Committee I.D. Number ______0136969-50

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Enter this total on tine 3a of Summary

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3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 4/30/15		
Name & Address:		
Darryl Onderik		
53245 Sams Lanc		
chesterfield, MI 48047	s 150.00	\$
	·	
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Musician Employer SCIF		
Business Address 53245 sams Lane Chesterfield, MI 48047		
Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/2/15		
Name & Address		
Mark Hurst		
54290 Bryce Canyon Trl.	, 150,00	^
Macomb, M1 48042	3	a
5. If over \$100.00 cumulative, please provide:	Click Horo for	r Memo Itemization
	Click nere lo	Memo Remization
Occupation CPA Employer Plante Moran		
Business Address 19176 Hall Rd, Clinton Twp, MI 48308		
Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt		
Name & Address:		
Name & Address:		
Steven, Daniel & Edward Manaini	\$ 75.0°	\$
Steven, Daniel & Edward Manaini 6850 Ninetcen Milo Rd	\$ 75.0°	\$
Steven, Daniel & Edward Manaini 16850 Ninetcen Milo Rd Sterling Heights, MI 48314		\$Memo Itemization
Steven, Daniel & Edward Manaini 6850 Ninetcen Milo Rd		\$ Memo Itemization
Steven, Daniel & Edward Manaini 16850 Ninetcen Milo Rd Sterling Heights, MI 48314		\$Memo Itemization
Steven, Daniel & Edward Manaini 10850 Nineteen Milo Rd Sterling Heights, MI 48314 5. If over \$100.00 cumulative, please provide:		\$ Memo Itemization
Steven, Daniel & Edward Manaini 10050 Nineteen Milo Rd Sterling Heights, MI 48314 5. If over \$100.00 cumulative, please provide: Occupation Employer		\$ Memo Itemization
Steven, Daniel & Edward Manaini 10050 Nineteen Milo Rd Sterling Heights, MI 48314 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct		\$ Memo Itemization
Steven, Daniel & Edward Manaini 10050 Nineteen Milo Rd Sterling Heights, MI 48314 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct		\$ Memo Itemization
Steven, Daniel & Edward Manaini 10850 Nineteen Milo Rd Sterling Heights, MI 48314 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct	Click Here for	\$ Memo Itemization
Steven, Daniel & Edward Manaini 10050 Nineteen Milo Rd Sterling Heights, MI 48314 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct		\$ Memo Itemization
Steven, Daniel & Edward Manaini 10050 Nineteen Milo Rd Sterling Heights, MI 48314 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct	Click Here for	\$ Memo Itemization
Steven, Daniel & Edward Manaini 10050 Nineteen Milo Rd Stening Heights, MI 48314 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct	Click Here for	\$ Memo Itemization \$ Memo Itemization
Steven, Daniel & Edward Manaini 10050 Nineten Milo Rd Sterling Heights, MI 48314 5. If over \$100.00 cumulative, please provide: Occupation	Click Here for	\$
Steven, Daniel & Edward Manaini 10050 Nineten Milo Rd Sterling Heights, MI 48314 5. If over \$100.00 cumulative, please provide: Occupation Employer	Click Here for	\$
Steven, Daniel & Edward Manaini 10050 Nineten Milo Rd Sterling Heights, MI 48314 5. If over \$100.00 cumulative, please provide: Occupation	Click Here for	\$
Steven, Daniel & Edward Manaini 10050 Nineteen Milo Rd Sterling Heights, MI 48314 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct	Click Here for \$300.000 Click Here for	\$
Steven, Daniel & Edward Manaini 10850 Nineten Milo Rd Sterling Heights, MI 48314 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct	Click Here for	\$



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number _

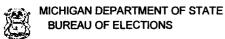
0136969-50

2. Committee Name

CTE Barbara A. Ziarko

line 3a of Summary

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <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 4/22/15 Name & Address: ROY ROSC 55620 Woodnidge Pr. Shelby Township, MI 48316 5. If over \$100.00 cumulative, please provide:	\$	\$or Memo Itemization
Occupation Employer	Ollok Froid K	or morno normadicari
Business Address		
Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 4/25/15 Name & Address Armenag Kalaydjian 845 Orchard Ridge Dr.	\$ 250.00	\$
Bloomfield, MI 40304		
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Businessman Employer SCIF		
Business Address Same as above		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 4/30/15 Name & Address: GYACU BACKUS 45550 VANKER AVE. Utica, MI 48317 5. If over \$100.00 cumulative, please provide:	\$ 75.00 Click Here fo	sr Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt Name & Address VAIIENA ALLISON 16385 WALL Street Sterling Heights, MI 48312 5. If over \$100.00 cumulative, please provide:	<u>\$ 150.00</u>	\$
	Click Here fo	r Memo Itemization
Occupation CEO Employer EM Business Address <u>W305 Wall St. Sterling Heights</u> , MI 48312 Type of Contribution: Direct Loan from a person X Fund Raiser	-	
Page Subto	tal 575.00	
Grand Total of All Schedules 1		
(Complete on last page of Schedul	le) Enter this total on	



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

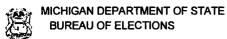
CANDIDATE COMMITTEE

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3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 4/27/15		
Name & Address:		
JOZEF SMOCK 2773 Norwalk St.		
Hamtranck, MI 48212	s 150.00	\$
5. If over \$100.00 cumulative, please provide:		
Occupation OWNER Employer SEVF	Click Here for	or Memo Itemization
Business Address 9601 USEPH Campau, Hamtramck, MI 48	3212	
Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 4/22/15		
Pashko Ujkic		
30344 Phyllis Ct.	s 150.00	,
Stening Heights, MI 48312	\$ 1001	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation OWNER Employer Dodge Park Coney		
Business Address 35252 Dodge Park Stenling Hgts, MI	48312	
Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 51115		
Anthony Marrocco Victory PAC P.O. Box	s 75.00	\$
Mt. acmens, MI 48046 5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Rusiness Address		
Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 5/2/15 Name & Address		
Sterling Heights Fire Fighters Union Local 155	7	
38911 Van Dyke	\$ 150.00	
Sterling Heights, MI 48312	\$ 100	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer	Ollok Here to	Memo nemization
Business Address		
Type of Contribution: Direct Loan from a person X Fund Raiser	1000 50	
Page Subtotal	525.00	_
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

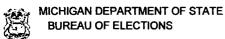
CANDIDATE COMMITTEE

1. Committee I.D. Number _____0136969-50

2. Committee Name CTE Barbara A. Ziarko

Enter this total on line 3a of Summary

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? X YES 4. Date of Receipt 4/30/15		
Waste Management Employees Better Governm	nant Fund of	- Michigan
# 502752 40797 Alpha Dr. Ste. 100 Wixom, 101 40393 5. If over \$100.00 cumulative, please provide:	s 500.00	
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer	<u>.</u>	
Business Address		
Type of Contribution: Direct Loan from a person Y Fund Raiser		
3. Contribution #2 PAC Receipt? XYES 4. Date of Receipt 4/27/15 Name & Address	-	
Rizzo Environmental Services PAC		
6200 Elmnidge Dr.	s 750.00	\$
Sturing Heights, MI 48313		
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 X Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 4/15/15 Name & Address:		
Calcaterra Wujek Investment Co.	\$00.00	
Calcaterra Wujek Investment Co. 36900 Schoenherr Rd.	<u>\$ 300.00</u>	\$
Calcaterra Wujek Investment Co.	•	\$ Memo Itemization
Calcaterra Wujek Investment Co. 36900 Schoenherr Rd. Stuning Heights, MI 48312	•	\$ Memo Itemization
Calcaterra Wujek Investment Co. 36900 Schoennerr Rd. Sturing Heights, MI 48312 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address	•	\$ Memo Itemization
Calcaterra Wujek Investment Co. 36900 Schoennerr Rd. Stuling Heights, MI 48312 5. If over \$100.00 cumulative, please provide: Occupation Employer	•	\$ Memo Itemization
Calcaterra Wujek Investment Co. 36900 Schoennerr Rd. Sturing Heights, MI 48312 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address	•	\$ Memo Itemization
CAI CATENA WUJEK Investment Co. 36900 Schoennerv Rd. Stuning Heights, MI 48312 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct	•	\$ Memo Itemization
Calcaterra Wujek Investment Co. 36900 Schoennerr Rd. Stuning Heights, MI 48312 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct	•	\$ Memo Itemization
Calcaterra Wujek Investment. Co. 36900 Schoennerr Rd. Stuning Heights, MI 48312 5. If over \$100.00 cumulative, please provide: Occupation	Click Here for	\$ Memo Itemization
CAICATENTA WUJEK Investment Co. 36900 Schoennerr Rd. Stuning Heights, MI 48312 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct	Click Here for	\$ Memo Itemization \$ Memo Itemization
Calcaterra Wujek Investment Co. 36900 Schoennerr Rd. Stening Heights, MI 48312 5. If over \$100.00 cumulative, please provide: Occupation	Click Here for \$ 200.00	\$
CAICATENTA WUJEK Investment Co. 36900 Schoennerr Rd. Stuning Heights, MI 48312 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct	Click Here for \$ 200.00	\$
Calcaterra Wujek Investment Co. 36900 Schoennerr Rd. Stening Heights, MI 48312 5. If over \$100.00 cumulative, please provide: Occupation	click Here for \$ 200.00 Click Here for Mt 48312.	\$
Calcaterra Wujek Investment Co. 36900 Schoennerr Rd. Stening Heights, MI 48312 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Direct	\$ 200.00 Click Here for M1 48312.	\$



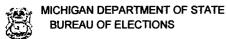
ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number _____0136969-50

2. Committee Name CTE Barbara A. Ziarko

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 5/20/15 Name & Address: Shart Shenidan		
23670 Ryanka. Waven, M1 48091	\$500,00	\$
5. If over \$100.00 cumulative, please provide:		
Occupation OWNEK Employer SUF	Click Here to	r Memo Itemization
Business Address 23670 Ryan Ra, Warren, MI 4809	1	
Type of Contribution: Direct Loan from a person Fund Raiser		!
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/11/15		
Name & Address DON DENAUH 15731 MARCIE	, 75.00	
Fraser, M1 48024	\$	<u>\$</u>
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 5/13/15 Name & Address: LAUVA KASZUBSKI 1096 Brompton Rd. ROCHESTUHIS, MI 49309 5. If over \$100.00 cumulative, please provide:	\$ 75.00 Click Here for	\$ Memo Itemization
Occupation Employer		
Business Address Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 5/19/15 ROBUR SIMPSON		
14436 Edshire Stening Hughts, MI 48312 5. If over \$100.00 cumulative, please provide:	\$ 50.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page of	Enter this total on line 3a of Summary Page.	



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number _____0136969-50

2. Committee Name CTE Barbara A. Ziarko

line 3a of Summary

OANDIDATE CONTINUE 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 5/13/15 Name & Address: CANK ANDREWS 53985 SUTHERIAND LA. Shelby TOWNSNIP, MI 48316 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person X Fund Raiser	\$ 75.50 \$ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/13/15 Name & Address TIM MAIONC 14708 CAYMEL StarlingHaghts, MI 48312 5. If over \$100.00 cumulative, please provide:	\$ 75.00 \$ Click Here for Memo Itemization
Occupation Employer	
Type of Contribution: Direct Loan from a person X Fund Raiser	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 4/22/15 Name & Address: Charles Turn bull 53957 Suthenand Shelby Townswp, MI 48316 5. If over \$100.00 cumulative, please provide: Occupation Employer	\$ 75.00 \$ Click Here for Memo Itemization
Business Address Type of Contribution: Direct Loan from a person X Fund Raiser	
Type of Contribution: Direct Loan from a person X Fund Raiser 3. Contribution # 4 PAC Receipt? Type of Contribution: Direct Loan from a person X Fund Raiser 4. Date of Receipt 5/15/15 6. Story Bah Ovski 6. Story \$100.00 cumulative, please provide: 6. Occupation Employer 8. Employer Employer 8. Employer Employer Type of Contribution: Direct Loan from a person X Fund Raiser	\$ 75.00 \$ Click Here for Memo Itemization
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ITEMIZED CONTRIBUTIONS SCHEDULE 1A

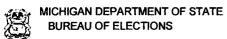
CANDIDATE COMMITTEE

1. Committee I.D. Number ______0136969-50

2. Committee Name CTE Barbara A. Ziarko

line 3a of Summary

Enter contributor's name and address. If contribution is from an individual, enter last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each
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.		Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 5/20/15 Name & Address: WAYNE DAVIS 3054 Alden SHONING Heights, MI 49310 5. If over \$100.00 cumulative, please provide:	\$ 100,00	\$or Memo Itemization
Occupation Employer	Click Hele IC	o wello tertization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	·····	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/20/15 Name & Address		
Christine GUZIK 13917 Deepwood Ct. Stening Haghts, MI 48312 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 X Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 5/20/15 RONALD SUWINSKI 3204 BARDO Struing Heights, MI 48310 5. If over \$100.00 cumulative, please provide: Occupation Employer	\$ 100 00 Click Here for	\$r Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 5/20/15 CON STINO Dib 30359 LUND AVU Waven, MI 49,093 5. If over \$100.00 cumulative, please provide:	\$ 100.00 Click Here for	\$ r Memo Itemization
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person X Fund Raiser		
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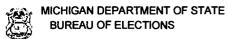
ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number _____0136969-50

Committee Name	CTE	Barbara	Α.	Ziarko	

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	Flection Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 5/19/15 Name & Address: Phil Rugger	-	
55764 St. Regis Shelby Township, MI 48316	\$250.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Atomey Employer SCIF		or wome tomedon
Business Address 43231 Schoenherr, Sterling Hgts, MI	48014	
Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/20/15 Name & Address		
Brian Onderik		
33944 Viceroy	s 150.00) \$
Staing Hughts, MI 48310 5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Educator Employer Kaplan	1 401 00-	a. l
Business Address 25300 Telegraph Rd Southfield	ווא _ר ג איי איי איי	34
Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 5/20/15 Name & Address:	-	
J. Oram	s 150,00	
4585 Aninord	\$ 1007	. \$
W. BIOOMAUD, MI 48323 5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation OWNER Employer VIP REAHY		
Business Address 29551 Giveenfield, Southfida, MI 49	076	
Type of Contribution: Direct Loan from a person K Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 5/20/15 Name & Address		
Robert Zianco Zoela Jem Path		!
2084 Jem Path	\$ 200,00	•
Tho Villages, PL 32162		Ψ
5. If over \$100.00 cumulative, please provide: Occupation Engineer Retived	Click Here fo	r Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
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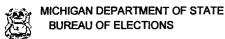
ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number _____0136969-50

2. Committee Name CTE Barbara A. Ziarko

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 5/20/15 Name & Address: RICHARD KOIASINSKI 14795 PAHLUSON RD Shuby TOWNShip, MI 49315 5. If over \$100.00 cumulative, please provide:	\$ /00 .00	\$ or Memo Itemization
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/20/15 Name & Address Glevald Gleisler 14407 Edshire Sterling Heights, MI 49312 5. If over \$100.00 cumulative, please provide:	\$ IDO OD Click Here for	\$ r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 5/20/15 Name & Address: Margaret Yandora 2144 Forest Mead Dr. Stenling Heights, MI 4934 5. If over \$100.00 cumulative, please provide:	\$ 75.00 Click Here for	\$ Memo Itemization
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt Name & Address YONNO KNIAZ 14014 PRANICAL SHOWING HOUGHS, MI 49313 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person V Fund Raiser	\$ 50.00 Click Here for	\$ Memo Itemization
y Died Demineration	122-00	
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ITEMIZED CONTRIBUTIONS **SCHEDULE 1A**

CANDIDATE COMMITTEE

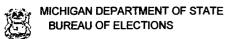
0136969-50 1. Committee I.D. Number

CTE Barbara A. Ziarko 2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount 7. Cumulative for Election Cycle for Each middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Contributor (Through Committee (PAC) Report all contributions regardless of amount. date of receipt) PAC Receipt? YES 3. Contribution # 1 4. Date of Receipt 5/20/15 Name & Address: Thomas Vankula 4870 Pebble Creek E. Apt. 5 5. If over \$100.00 cumulative, please provide: M1 49317 Click Here for Memo Itemization Occupation _ _____ Employer ___ Business Address _ Direct Type of Contribution: Fund Raiser Loan from a person 4. Date of Receipt 5/4/15 PAC Receipt? YES 3. Contribution #2 Name & Address Scott Purtill 1200 Glastonbury Dr. St. Johns, M1 48979 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation ____ Business Address Type of Contribution: Direct Loan from a person X Fund Raiser 4. Date of Receipt 4/23/15 PAC Receipt? YES 3. Contribution # 3 Name & Address: LOWS Longo 11 1440 cascado un. · 75.00 Barnington, 14 60010 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Occupation Business Address Loan from a person X Fund Raiser Type of Contribution: PAC Receipt? X YES 4. Date of Receipt 5/11/15 3. Contribution # 4 Name & Address To Ford Motor Company Civic Action Fund PAC The American DR Dearborn, MI 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation_ Employer _ Business Address Type of Contribution: **Fund Raiser** Direct Loan from a person Page Subtotal Grand Total of All Schedules 1A

Page _____ of ____

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ITEMIZED CONTRIBUTIONS SCHEDULE 1A

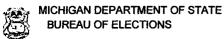
CANDIDATE COMMITTEE

1. Committee I.D. Number _

0136969-50

2. Committee Name CTE Barbara A. Ziarko

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 5/20/15 Name & Address: Tim Doppel 41538 Vancouver Stemling Heights, MI 48314 5. If over \$100.00 cumulative, please provide: Occupation Employer	\$ /OO .OO Click Here fo	\$or Memo Itemization
Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/20/15 Name & Address KATHYN MCGrATH JII34 LOVING SHOWING HEIGHTS, M J 48312 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person X Fund Raiser	\$ 100.00 Click Here fo	\$r Memo Itemization
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 5/20/15		
Name & Address: RDSAN'D BUFFA 29225 RED MAPIE Ln. Chesterfield, MI 48051 5. If over \$100.00 cumulative, please provide:	\$ 50.00 Click Here for	\$Memo Itemization
OccupationEmployer		
Business Address		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 5/20/15 Name & Address JANU KUK 320+ Bayton Staning Heights, MI 493/0 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Type Fund Raiser	\$ 50.00 Click Here for	\$ Memo Itemization
Type of Contribution: Direct Loan from a person X Fund Raiser Page Subtotal	200 00	
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ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

0136969-50 1. Committee I.D. Number

2. Committee Name CTE Barbara A. Ziarko

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? X YES 4. Date of Receipt 9/1/15 Name & Address: Mitten Leadership Fund - PAC 517221 971 Dressler U. Rochester Hills, MI 40307 5. If over \$100.00 cumulative, please provide: Occupation Employer	s [∰] 5000.50 Click Here fo	\$ 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 6/210/15 Name & Address JOHN KIIK 43173 Fortner Dr. Stenling Heights, MI 49313 5. If over \$100.00 cumulative, please provide: Occupation Retrived Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	§ 100.00 Click Here fo	\$ or Memo Itemization
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 9/10/15 Name & Address:	_	
Waste Management Employees Better Government Fund of Michigan #502.752 48797 Alpha Dr. Ste.100 Wixom, MI 40393 5. If over \$100.00 cumulative, please provide:	\$250.00 Click Here for	\$ 750.00 Memo Itemization
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? X YES 4. Date of Receipt 7/3/15 Name & Address Sterling Heights Police Officers Association PAC POBOX 5-46 Sterling Heights, MI 49311 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser		\$ r Memo Itemization
Page Subtota	5,500,00	_

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ITEMIZED OTHER RECEIPTS SCHEDULE 1A-1

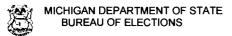
CANDIDATE COMMITTEE

1. Committee I.D. Number 0136969-50

CANDIDATE	COMMITTEE	2. Committee Name CT	E Barbara	A.Ziarko
3. Name & Address From Whom Received	Date of Receipt	5. Type of F		6. Amount
Receipt #1 Name & Address:	Date of Receipt 9/13/15	Loan from a Lei	nding Institution	VF 067
CTE Michael Taylo	OR	Interest		<u>\$ 15.88</u>
36 35651 Kensingt		Refund \Rebate	e Click for Mem	o Itemization Type
Stcr. Hgts, MI 48312	Fund Raiser	Other (Specify)	Reimbursem	ent-flowers
Receipt #2	Date of Receipt 9 13 15			
Name & Address:	_	Loan from a Le	ending Institution	15 98
Friends of Doug S	okryniarz	Interest		<u>\$ 15.88</u>
PO BOX 7005	8211	Refund \Rebate	: Click for Men	no Itemization Type
Starling Hgts, MI 49	Fund Raiser	Other (Specify)	Raimbursen	nent-flowers
Receipt #3 [Name & Address:	Date of Receipt 9113115	Loan from a Lei	nding Institution	
CTE Deanna Kosk	i	Interest		<u>\$ 15.88</u>
15079 Harvest Mea		Refund \Rebate	Click for Men	no Itemization Type
Sterling Hgts, MI 49	8313 Tund Raiser	Other (Specify)	Reimbursen	ient— Flowers
Receipt #4 E	Date of Receipt 9113/15	— ☐ Loan from a Le	nding Institution	
CTE JOSEPH V. RO	mano	Interest		s 15.88
12236 aninaley		Refund \Rebat	e Click for Mer	no Itemization Type
Storling Hgts, MI 4	8312 □ Fund Raiser		<u>Reimbursema</u>	
	rate of Receipt 9/13/15	Loan from a Ler	nding Institution	
Name & Address:	midt	Interest	toning modulation	\$ 15.88
CTE Maria G. Schi 35755 Woodvilla		Refund \Rebate	Click for Mer	no Itemization Type
Sterling Hats, MI 4				
	Fund Raiser	Other (Specify)	Reimbursem	14-+10Wers
Hallic & Addicas.	e of Receipt 9/13/15	Loan from a Le	ending Institution	IE 60
CIE Nation Shanno	on	Interest		\$ 15.88
40256 Diane	18313	Refund \Rebate	•	no Itemization Type
Sterling Hgts, MI	Fund Raiser	Other (Specify)	Rumburseme	ent-flowers
•	te of Receipt			
Name & Address:		Loan nom a Le	ending Institution	\$
		Interest	Ottob son AA	a Itamization Toras
		Refund \Rebat	e Click for Men	no Itemization Type
	Fund Raiser	Other (Specify	·)	
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Page _____ of ____



ITEMIZED IN-KIND CONTRIBUTIONS

U	700100 -50	2	
	Barbara	Α	ZiaVVO

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CANDIDATE COMM	IITTEE 2. Committee Name	Dava A. Zlayku
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 for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? X Yes Name & Address: Sterling Hgts. Firefighters 38911 Vaniage Value 1557 Sterling Hgts, MI 49310 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 5. Date Of Receipt: 2/11/15 6. Vendor Name & Address:	\$ 71.42. \$ Click Here for Memo Itemization
Contribution # 2 PAC Receipt? X Yes Name & Address Rizzo Enviornmental PAC U200 Elmridgo Stevling Hgts, MI 40313 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOA Description FOOD 5. Date Of Receipt: 2/12/15 6. Vendor Name & Address:	250.00 \$ N Click Here for Memo Itemization
Contribution #3 PAC Receipt? Yes Name & Address: Barb Ziarko 13805 Deepwood Ct. Sterling Hats, MI 48312 If over \$100.00 cumulative, please provide: Occupation: Retired Employer Name & Address:	4.	SClick Here for Memo Itemization
Fund Raiser Contribution		
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Page ____ of ____



SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 0136969 - 50

2. Committee Name CTE Barbara A. Ziarko

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Ехре			
Nam			
Add			
(
	Check box if this expenditure is payment of		
C und range	debt or obligation reported on previous statement		
Expenditure #2	Statement		
Name APCC ACS Fundraiser		11010	
		1/12/15 Date	\$ 50.00
Address 33204 Maple Ln. Stening Hgts, MI 40312	Purpose: Placemat Ad	Date	
Stenina Hats, MI 40312	Oliale U	ana fan Maraa	tamination Tuna
3.0	Click	ere for Memo	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name Down Skrzyniarz		1/2-1	
Name Doug Skrzyniarz	Olahaa .	1/25/15	\$ 190.00
Address P.O. Box 7005	Purpose. Postage	Date	-
Address P.O. Box 7005 Stenling Heights, MI 48312	Click H	ere for Memo I	temization Type
Samp nagristra			ionii Laudin Typa
	LICheck box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name Office Max		3/29/15	° EO 103
37600 Jan Duke	Purpose: Invitations	Date	\$ 54.62
Address 37600 Van Dyke Sterling Hgts, MI 48312	Purpose: IIIIIIIII		
Sterling tigts, 1911 40512	Click H	lere for Memo	temization Type
	Check box if this expenditure is payment of		
П	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name Office Max		3/29/15	\$35.56
Address 371000 Van Dyko Sterling Heights, MI 40312	Purpose: Invitations	Date	\$ 55.50
Clerking Height MI			–
27011111 10 1100 1115/1111 dazio	—	Here for Memo	Itemization Type
TOOL	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
	Subto	tal this page	335.19
	Grand Total of all	Schedules 1B	
	(Complete on last page	e of Schedule)	

Page	of	



SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 0136969-50

2 Committee Name	CTE Barbara A. Ziarko
2. Committee Hame	The state of the s

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Triangle Printing	1	4/8/15	s 68.90
Address 30520 Gratiot Ave.	Purpose: Printing Fundraise		3 <u>6 9 - 10</u>
Roseville, M1 48066	Click H	lere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		·
Expenditure #2 Name POSTMASTER		11/m/r	101.00
	Purpose: Fundraiser Postag	4/10/15 Date	\$ <u>196.00</u>
Address 7007 Metro Pwky. Sterling Hgts, MI 48312		_	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name CTE Nate Shannon	mandanina mid. 1	4/30/15 Date	\$ <u>50.00</u>
Address 40256 Diane Dr.	Purpose Fundraiscr Ticket	Date	
Sterling Hgts, MI 48313	<u></u>	ere for Memo	temization Type
X Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name Kroger		5/11/15	s 101.63
Address 13700 E. 14 Mile Rd	Purpose: Fundraiser Centerpieces	Date	
Warren, M1 48088		lere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name Meyer		5/14/15	s 62.87
Address 34835 Utica Rd Fraser, MI 46020	Purpose: Fundraiser Food	Date	<u> </u>
Fraser, MI 48020	l 	Here for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
		tal this page	479.40
	Grand Total of all ((Complete on last page		

Page	of	f



ITEMIZED EXPENDITURES **SCHEDULE 1B CANDIDATE COMMITTEE**

1. Committee I. D. Number 0136969 - 50

2. Committee Name	CTE	Barbara	A. Ziarko

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date 6. Amount
Expenditure #1		
Name G10rdon Food Services		5/14/15 \$ 44.11
Address	Purpose: Food for Fundraiser	Date
7835 Convention Blvd.	Fundraiser Click H	lere for Memo Itemization Type
Warren, MI 48092		,
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	
Expenditure #2	Statement	
Name Sam's Club		8/1/15 \$ 129.74
Con 112 Clar		Date \$129.71
Address 45600 Utica Park Blvd.	Purpose: Cookies for election day	
utica, MI 48315	Click H	lere for Memo Itemization Type
• · · · · · · · · · · · · · · · · · · ·	Check box if this expenditure is payment of	
Fund Raiser	debt or obligation reported on previous statement	
Expenditure #3		
Name CONNIE KUrczewski		Elanter de la
•	cookies for	5/20/15 \$90.00
Address 41345 Giveenspire Dr.	Purpose: COOKIES FOR FundraiseR	
clinton Twp. Mi 48038	Click H	lere for Memo Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous	
Fund Raiser	statement	
Expenditure #4		
Name APCC		617115 \$100.00
Address 332 D.L. Manle J. ONC.	Purpose: Sign for festival	Date
Address 33204 Maple Lane		
Sterling Hgts, MI 48312		lere for Memo Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous	
Fund Raiser	statement	
Expenditure #5		
Name SH Band Boosters		6/23/15 \$ 50.00
Address 12901 15 Miles Rd	Purpose: Hole Sponsorship	Date
Address 12901 15. Mile Rd Stening Hgts, MI 48312	Click I	Here for Memo Itemization Type
John Mindial	Check box if this expenditure is payment of	
Fund Raiser	debt or obligation reported on previous statement	
	Subto	otal this page 413.85
	Grand Total of all	
	(Complete on last page	e of Schedule)

Page	of	·
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SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 0136969-50

2. Committee Name	CTE	Barbara	A. Ziarko

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name St. Malachy Address 14115 E. 14 Mile Rd. Storling Hgts, M1 48312.	Purpose: Pestival Sign Click H Check box if this expenditure is payment of debt or obligation reported on previous	8/1/15 Date lere for Memo It	\$ IOO.00 emization Type
Expenditure #2	statement		
Address 23812 Groesbeck Hwy. Clinton Twp, M1 48035	Purpose: Door Hanger Print Piece Click H	8/18/15 Date	\$ 506.36 emization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name Manhattan Mailers Address 51132 Milano DR. Macomb, M1 48042		Date Date Date	\$ 246.82 emization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name Bronco Printing Address 21841 Dequindre Hazel Park, MI 48030	Purpose: Business Cards Click H	Plants Date Here for Memo It	\$ 180.00 emization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name Thrify Flowers Address 34838 Dequindre Sterling Hgts, MI 48313 Fund Raiser	Purpose: Flowers for Pasta Party	9/12/15 Date Here for Memo I	\$ [1].2] temization Type
	Subto	otal this page	1,144.39
	Grand Total of all ((Complete on last page		

Page	of



SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 013669-50

Expenditure #1 Name CTE Marria Schmidt Address 21841 Dequindre Hazer Purpose: Labels for Expenditure #2 Name Bronco Printing Address 21841 Dequindre Hazer Purpose: Labels for Expenditure #3 Name Bronco Printing Address 21841 Dequindre Hazer Purpose: Labels for Date Date Expenditure #3 Name Bronco Printing Address 21841 Dequindre Hazer Purpose: Labels for Date Date Expenditure #4 Name Bronco Printing Address 21841 Dequindre Hazer Purpose: Labels for Date Date Expenditure #4 Name Bronco Printing Address 21841 Dequindre Hazer Purpose: Labels for Date Date Date Expenditure #4 Name Bronco Printing Address 21841 Dequindre Hazer Purpose: Labels for Date Date Date Date Date Date Date Date	Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date 6. Amount
Address 3566 Kensington Stcrling Hgts, MI 46312 Fund Raiser Check box if this expenditure is payment of det or obligation reported on previous statement	Expenditure #1		
Address 3565 Kensington Stcrling Hgts, MI 46312 Fund Raiser Check box if this expenditure is payment of dect or obligation reported on previous statement	Name CTE Maria Schmidt		9/15/15 \$40,42
Sterling Hgts, MI 46312 Fund Raiser Click Here for Memo Itemization Type		Purpose Cake for Pasta	_
Fund Raiser Expenditure #2	Addiess 35651 Kensington	Party	
Fund Raiser Expenditure #2	Sterling Hats, MI 48312	Click F	lere for Memo Itemization Type
Statement Stat	3 3		
Name TONY Licata Address 8874 Houghton Stcring Hgts, MI 4834 Fund Raiser Expenditure #3 Name Bronco Printing Address 21841 Dequindre Hazel Park, MI 48030 Fund Raiser Expenditure #4 Name Bronco Printing Address 21841 Dequindre Hazel Park, MI 48030 Fund Raiser Expenditure #4 Name Bronco Printing Address 21841 Dequindre Sterling Hgts, MI 48312 City Here for Memo Itemization Type City Here for Memo Itemization Type City Here for Memo Itemization Type City Benkargement City Benkargement Gebt or obligation reported on previous statement City Benkargement Glick Here for Memo Itemization Type City Benkargement City Benkargement City Benkargement Gebt or obligation reported on previous statement City Benkargement Fund Raiser Expenditure #5 Name American Graphics Address 34895 Grobs beck- Clinton Twp, MI 48035 Fund Raiser Fund Raiser City Benkargement 9/24-115 Date \$ 25.00 Purpose: Man Benkargement 9/2015 \$ \$183.05 Date Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement City Benkargement Ci	Fund Raiser		
Address 8874 Howghton Stcrling Hgts, MI 48314 Fund Raiser	Expenditure #2		
Address 8874 Howghton Stcrling Hgts, MI 48314 Fund Raiser	Name TONY Licata		9/13/15 , 100.00
Stcrling Hg 15, MI 4834 Stependiture #3 Name Bronco Printing Address 21841 Dequindre H2030 Fund Raiser Expenditure #4 Name Bronco Printing Address 21841 Dequindre Expenditure #4 Name Bronco Printing Address 21841 Dequindre Stcrling Hg 15, MI 48312 Fund Raiser Expenditure #5 Name American Graphics Address 24895 Grossbeck Clinton Twp, MI 48035 Fund Raiser Expenditure #5 Name American Graphics Address 24895 Grossbeck Clinton Twp, MI 48035 Fund Raiser Click Here for Memo Itemization Type	·	Photos	
Fund Raiser Fund Raiser Fund Raiser Fund Raiser	Address 8874 Houghton	Purpose:	
Fund Raiser Fund Raiser Fund Raiser Fund Raiser	Storling Hats, MI 48314	Click F	lere for Memo Itemization Type
Statement Stat		Check box if this expenditure is payment of	
Rependiture #3 Name Bronco Printing Purpose: Labels for Date Date	Fund Raiser		
Address 21841 Dequindre Hazel Park, M1 48030 Fund Raiser Expenditure #4 Name Bronco Printing Address 21841 Dequindre Sterling Hgts, M1 48312 Fund Raiser Expenditure #5 Name American Graphics Address 34895 Grossbeck Clinton Twp, M1 48035 Fund Raiser Purpose: Labels for Date Election Day Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Purpose: Map Enlargement Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Purpose: Mania / Barb Print Date Purpose: Mania / Barb Print Date Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Purpose: Mania / Barb Print Date Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement	Expenditure #3	Statement	
Address 21841 Dequindre Hazel Park, M1 48030 Fund Raiser Expenditure #4 Name Bronco Printing Address 21841 Dequindre Sterling Hgts, M1 48312 Fund Raiser Expenditure #5 Name American Graphics Address 34895 Grossbeck Clinton Twp, M1 48035 Fund Raiser Purpose: Labels for Date Election Day Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Purpose: Map Enlargement Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Purpose: Mania / Barb Print Date Purpose: Mania / Barb Print Date Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Purpose: Mania / Barb Print Date Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement	Name Broken Printing		
Fund Raiser Expenditure #4 Name Bronco Printing Address 21841 Dequindre Sterling Hgts, MI 48312 Fund Raiser Expenditure #5 Name American Graphics Address 34895 Großsbeck Clinton Twp, MI 48035 Fund Raiser Fund Raiser Fund Raiser Fund Raiser Click Here for Memo Itemization Type Click Here for Memo Itemization Type Purpose: Many Enlargement Click Here for Memo Itemization Type Click Here for Memo Itemization Type Purpose: Many American Graphics Address 34895 Großsbeck Clinton Twp, MI 48035 Click Here for Memo Itemization Type	Profice Printing	lal de C	
Fund Raiser Expenditure #4 Name Bronco Printing Address 21841 Dequindre Sterling Hgts, MI 48312 Fund Raiser Expenditure #5 Name American Graphics Address 34895 Großsbeck Clinton Twp, MI 48035 Fund Raiser Fund Raiser Fund Raiser Fund Raiser Click Here for Memo Itemization Type Click Here for Memo Itemization Type Purpose: Many Enlargement Click Here for Memo Itemization Type Click Here for Memo Itemization Type Purpose: Many American Graphics Address 34895 Großsbeck Clinton Twp, MI 48035 Click Here for Memo Itemization Type	Address 21841 Dequindre	Purpose: Labels for	Date
□ Fund Raiser Expenditure #4 Name Bronco Printing Address 21841 Dequindre Sterling Hgts, MI 48312 □ Fund Raiser Expenditure #5 Name American Graphics Address 34895 Großsbeck Clinton Twp, MI 48035 □ Fund Raiser □ Fund Raiser □ Check box if this expenditure is payment of debt or obligation reported on previous statement □ Fund Raiser □ Check box if this expenditure is payment of debt or obligation reported on previous Purpose: Maria / Barb Print 9/26/15 Date Purpose: Maria / Barb Print 9/26/15 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement	Hazel Park, MI 48030	Election Day Click H	lere for Memo Itemization Type
Expenditure #4 Name Bronco Printing Address 21841 Dequindre Sterling Hgts, MI 48312 Fund Raiser Expenditure #5 Name American Graphics Address 3H895 Grossbeck Clinton Twp, MI 48035 Fund Raiser Glick Here for Memo Itemization Type Purpose: Many Enlargement Click Here for Memo Itemization Type Gheck box if this expenditure is payment of debt or obligation reported on previous statement Purpose: Many Enlargement Fund Raiser Click Here for Memo Itemization Type Click Here for Memo Itemization Type Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement	(10,00) (0.17) (111 10000	l 	
Expenditure #4 Name Bronco Printing Address 21841 Dequindre Sterling Hgts, MI 48312 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name American Graphics Address 34895 Grossbeck- Clinton Twp, MI 48035 Purpose: Mania Barb Print Plate \$183.05 Purpose: Mania Barb Print Plate \$183.05 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement	Fund Raiser	debt or obligation reported on previous	
Address 21841 Dequindre Sterling Hgts, MI 48312 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name American Graphics Address 34895 Grossbeck Clinton Twp, MI 48035 Purpose: Mania Barb Print 9/28/15 Date Purpose: Price Date Purpose: Price Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement		statement	
Address 21841 Dequindre Sterling Hgts, MI 48312 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name American Graphics Address 3H895 Großsbeck Clinton Twp, MI 48035 Purpose: Map Enlargement Click Here for Memo Itemization Type Purpose: Man a Barb Print Purpose: Man a Barb Print Purpose: Man a Barb Print Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement	1 .		
Address 21841 Dequindre Sterling Hgts, MI 48312 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name American Graphics Address 34895 Großsbeck Clinton Twp, MI 48035 Purpose: Map Enlargement Date Click Here for Memo Itemization Type Purpose: Man a Barb Print Purpose: Man a Barb Print Picco Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement	Brunco Printing	4.1	- J L J -
Sterling Hgts, MI 48312 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name American Graphics Address 34895 Großsbeck Clinton Twp, MI 48035 Purpose: Maria Barb Print 9/20/15 Date Purpose: Maria Barb Print Date Picco Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement	Address 21841 Deallindre	Purpose: Map Enlargement	Date ———
Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name American Graphics Address 34895 Grossbeck Clinton Twp, MI 48035 Fund Raiser Check box if this expenditure is payment of debt or obligation reported on previous Statement Purpose: Maria / Barb Print Picco Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Statement	Clarity Hate AN 18212		
Expenditure #5 Name American Graphics Address 3H895 Grossbeck Clinton Twp, MI 40035 Fund Raiser Gebt or obligation reported on previous statement Purpose: Mania / Barb Print Date Picco Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement	Sterling rights, Mil 70312	Click F	lere for Memo Itemization Type
Expenditure #5 Name American Graphics Address 34895 Großsbeck Clinton Twp, MI 48035 Fund Raiser Statement Statement Purpose: Mania Barb Print 9 28 15 5 953.05 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement			
Name American Graphics Address 3H895 Großsbeck Clinton Twp, MI 48035 Fund Raiser Purpose: Maria Barb Print 9/26/15 Date September Date Purpose: Maria Barb Print Date September Date Purpose: Maria Barb Print Date September Date	Fund Raiser		
Address 34895 Großsbeck Clinton Twp, MI 48035 Fund Raiser Purpose: Mana / Barb Print Date Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement	Expenditure #5		
Address 34895 Großsbeck Clinton Twp, MI 48035 Fund Raiser Purpose: Mana / Barb Print Date Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement	Name American Graphics		alastic
Clinton Twp, MI 48035 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement	·	maria / Barb Print	*. . .
Fund Raiser Check box if this expenditure is payment of debt or obligation reported on previous statement	Audiess 34895 Großsbeck	Ollica Purpose:	- 2
Fund Raiser Check box if this expenditure is payment of debt or obligation reported on previous statement	Clinton Twp, MI 48035		lere for Memo Itemization Type
Fund Raiser statement	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Subtotal this page 2.240.37	Fund Raiser		
		Subto	tal this page 2,240.37

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

Page		of
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ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

0136969-50 1. Committee I. D. Number __

2. Committee Name CTE)		
Purpose (Required	Information)	5. Date	6. Amount

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date 6. Amount
	,	
Expenditure #1 Name Manha Han Mailers Address 51137 Milano Dr.	Postage Purpose: Barbi Mania	7/28/15 \$3299.78
Address 51132 Milano Dr. Macomb, MI 48042	Mailer	lere for Memo Itemization Type
, , , , , , , , , , , , , , , , , , , ,	Check box if this expenditure is payment of	
Fund Raiser	debt or obligation reported on previous statement	
Expenditure #2		
Name Nightowl Printing	Delahira	10/1/15 \$ 526.06
Address 15130 Beech-Daly Rd.	Purpose: Printing Stato	Date
Redford Twp, MI 48239	Click H	lere for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	
Expenditure #3		
Name Phint Masters		10/1/15 \$ 1693.20
Address 26039 Dequindre Madison Hgts, MI 48071	Purpose: Postage Slate Piece	Date
48071		ere for Memo Itemization Type
Fund Raiser	LCheck box if this expenditure is payment of debt or obligation reported on previous statement	
Expenditure #4		
Name		
Address	Purpose:	\$
	Click H	ere for Memo Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	
Expenditure #5		
Name		
Address	Purpose:	\$
	Click H	lere for Memo Itemization Type
	Check box if this expenditure is payment of	••
Fund Raiser	debt or obligation reported on previous statement	······································
	Subtot	tal this page 5519.04

Grand Total of all Schedules 1B (Complete on last page of Schedule) 10132.21

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DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number

00136969-50

³ Committee Name CTE Barbara A. Ziarko

CANDIDATE COMMITTEE 2.5	ommittee Name			
This Schedule itemizes:				,
a Debts and obligations owed by or forgiven the common (Chec	mittee OR b. Debtsck either a or b. Use only for the pu	s and obligations owed <u>to</u> or irpose checked.)	forgiven by the cor	nmittee.
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	7. 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: loan	\$		
Tommy Ziarko 13805 Deepwood Court Sterling Heights, MI 48312	5. Date Debt Was Incurred: 02/18/05 6. Original Amount of Debt: \$ 1,000.00	\$ \$ \$	\$ 0.00	\$1,000.00
If bank loan, name of endorser or guarantor:		Amo	unt Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: loan	s		
Tommy Ziarko 13805 Deepwood Court Sterling Heights, MI 48312	5. <u>Date Debt Was Incurred</u> : 07/01/01 6. <u>Original Amount of Debt</u> : \$1,100.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$_0.00	\$_1,100.00
If bank loan, name of endorser or guarantor:			ount Endorsed: \$_	
Debt #3 Corp? Yes		AIII	ount Endoised. #=	1
2001 100	l 4 Tyrne: loan	1		l .

Page Subtotal (Outstanding debt)

s 0.00

Amount Endorsed: \$

\$3,000.00

FORGIVEN

\$ 900.00

Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)

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

Summary Page

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.

4. Type: loan

5. Date Debt Was Incurred:

6. Original Amount of Debt:

04/2003

900.00

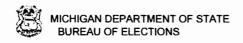
Page 1 of 2

Owed to or by: Tommy Ziarko

13805 Deepwood Court

Sterling Heights, MI 48312

if bank loan, name of endorser or guarantor:



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number

00136969-50

CTF Barbara A Ziarko

CANDIDATE COMMITTEE 2. C.	ommittee Name	ZIG A. ZIGIKO		
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the come (Chec	mittee OR b. Debts ck either a or b. Use only for the pu	and obligations owed <u>to</u> or rpose checked.)	forgiven by the con	nmittee.
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	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: loan	 \$		
Barbara A. Ziarko 13805 Deepwood Court	5. Date Debt Was Incurred:	 \$!
Sterling Heights, 48312	05/01/05	<u> </u>	s	\$
	6. Original Amount of Debt: \$ 600.00	\$		FORGIVEN
	1 4	 \$	l i	
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	\$
	\$	<u> </u>		FORGIVEN
		\$		OKOIVEK
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type:	\$\$		
	5. Date Debt Was Incurred:	<u> </u>		
	6. Original Amount of Debt:	<u> </u>		•
	6. Original Amount of Debt.	\$	' \$	· • · · · · · · · · · · · · · · · · · ·
	\$	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Ar	mount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	\$600.00
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				
· ·				Enter this total on line 12a "owed by"" or line 12h

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

Page 2 of 2