S

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 c	l signed by andidate.	3. This Statement covers From	01/01/15	to 10/18/1	5	
1. Committee I.D. Number		4. Candidate Last Name	Fi	rst Name	M.I.	
137967		McCartney	Collee	en	M	
		4a. Office Sought Including Dis	trict # or Commur	nity Served (If applica	able)	 ,
2. Committee Name		Rosevile City Council			Ĺ	₹
CTE Colleen MCCartney for Roseville Ci	ty Council	4b. County of Residence MAC	СОМВ	\Box		
5. Committee's Mailing Address 27861 Brinker		6. Treasurer's Name & Reside	ntial Address		-	
Roseville Mi. 48066		Matthew McCartney 27861 Brinker				
1.0000		Roseville Mi 48066				
Area Code and Phone (586) 776-1776						
If the address in this box is different from the comm						
mailing address on the Statement of Organization, be sent to this address by the filing official.	maii may	Area Code & Phone (586) 7	76-1776	^		
7. Treasurer's Business Address		8. Designated Record keeper	s Name and Maili	ng Address (If ∰erco		
		Designated Record keeper)		. C.	· 5	
				Property of the second	CT CT	
				M 0/-	FIL 20	
					(T)	
				550	-1-	
Area Code and Phone		Area Code and Phone		SE SE	<u>:</u>	
9. TYPE OF STATEMENT	5	1137.15	9e. Dissolution	of Candidate €om	mittee	
9a. Pre-Election OR 9k Post-Election	is not on the	NLY if candidate ballot for the			y any outstanding debt	
Pre-Election or Post-Election Statement relates to:	current year		by discharged ar	nd forgiven, and no le	his or her spouse is he onger collectible from	еге
	July Quart	terly		The committee has r es or has any oustan	no oustanding assets, iding debt.	
Primary	October C), ortorly		, , , , , , , , , , , , , , , , , , , ,	3	
⊠ General	October C	quarterry	Further, if the dis	solution cannot be guest for the Reportin	ranted, that this be	
Convention			Considered a req	dest for the Reportin	y waivei.	
Special	9c. Annua	al Statement ()				
School		Coverage Year	Effecti	ve date of dissolution	1	
Caucus		dment to Campaign Statement				
		plete Item 9a, 9b, 9c or 9e to te which Statement is being			ds must be reported on	1
	amen	ded.)	Scriedule 15 and	d the Summary Page	7.	
Date of Election, Convention or Caucus						
10. Verification: I\We certify that all reasonable dilig my\our knowledge and belief the contents are true,	ence was used	in the preparation of this statement	ent and attached	schedules (if any) an	d to the best of	
11			1//		0 =	
Current Treasurer or Designated Record keeper Type or Print Name	M CARTH	N Matte ON	Carbon	1 Date 10	-18-15	
Type or Print Name	/	Signature		1	97.87	
Candidate Ce lleer M'(ARTMI)		I Alm McPa	· lui	·	-18-15 -18-15	
1		College 71 College	My	Date <u>'U</u>		
Type or Print Name)	Signature	-t			

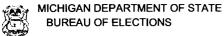


1. Committee I.D. Number	137967
1. Committee 1.D. Number	

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name CTE Colleen McCartney for Roseville City Council

RECEIPTS	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 2,575.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$_\$2,575.00	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ _\$2,575.00	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$736. 6 0	
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.) \$ \$736.60	(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS	(10b.) \$	
(Add Line 10a + Line 10b)	(11.) \$	(24.) \$
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) φ	(24.) \$
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
	BALANCE STATEMENT	
Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	
14. Amount received during reporting period	(14.) + \$ \$2,575.00	
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$ \$2,575.00	
 Amount expended during reporting period (Add lines 9 and 11) 	(15.) = \$ \$2,575.00 (16.) - \$ \$736.60	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$1,83 24 0 \$1838.40.	.)



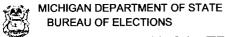
ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number ______137967

CTE Colleen McCartney for Roseville 2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)		
3. Contribution # 1 Name & Address: John Dolan 42850 Garfield S	PAC Receipt?	YES 4. Date	of Rece	ipt 09/23/15		
Clinton Twnp. M					_{\$} 500	_s 500
5. If over \$100.00 cum		vido:			Ψ	_
Occupation Attoeny		_ Employer self			Click Here	for Memo Itemization
		_ Employer				
Type of Contribution:	Direct	Loan from a persor		Fund Raiser		
Contribution #2 Name & Address	PAC Receipt?			pt 09/23/15		
Tim Tomlinson 42850 Garfield S Clinton Twnp. M					_{\$} 500	ş 1000
5. If over \$100.00 cumu	ılative, please pro	vide:			Click Here f	or Memo Itemization
Occupation Attorney	7	Employer Self				
Business Address						
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
3. Contribution #3	PAC Receipt?	YES 4. Date	e of Rece	eipt 09/24/15		
Name & Address: Lisa DeFilice						
15437 Curtis					_{\$} 200	_s 1200
Roseville MI 480	66					
5. If over \$100.00 cum	ılative, please pro	vide:			Click Here fo	or Memo Itemization
Occupation Teacher		Employer Rosev	ille Co	mmunity Schools		
Business Address						
Type of Contribution:	Direct	Loan from a persor	n <u>L</u>	Fund Raiser	· · · · · · · · · · · · · · · · · · ·	
Contribution # 4 Name & Address	PAC Receipt?	YES 4. Dat	te of Rec	eipt <u>09/24/15</u>		
Dennis Moier	- Oirele				500	4700
23636 West Lak Brownstown MI					_{\$} 500	_{\$} 1700
5. If over \$100.00 cum		vide:			Click Horo f	or Memo Itemization
Occupation Insurar	ice Agent	_ Employer Self		0.00	CHUK METE I	or Menio Reilization
Business Address						
Type of Contribution:	✓ Direct	Loan from a perso	n [Fund Raiser		
				Page Subtotal	\$1,700.00	
			G	rand Total of All Schedules 1A		
			(Com	plete on last page of Schedule)	Enter this total on	
Page of					line 3a of Summar Page.	У



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

137967 1. Committee I.D. Number

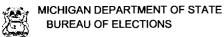
2. Committee Name

CTE Colleen McCartney for Roseville

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 09/22/15 Name & Address: Harold Haugh 19464 Candlelight Roseville MI 48066	,200	. 1900
Roseville MI 48000	<u>\$</u>	_ \$
5. If over \$100.00 cumulative, please provide: Occupation Retired Employer n/a	Click Here	for Memo Itemization
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address		
Ruth Geeen 17812 Oakdale Roseville MI 48066	_{\$} 50	_{\$} 1950
	Olinte I Iama	for Mome Itemization
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 10/05/15 Name & Address:		
Stephen Saph 44 Macomb PL Mt Clemens MI 48046-6907	_{\$} 250	_ <u>\$</u> 2200
5. If over \$100.00 cumulative, please provide:	Click Here f	or Memo Itemization 🔻
Occupation Insurance Employer Self		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 10/02/15 Name & Address		
Michael Batke 19090 Rosegarden Roseville MI 48066	_{\$} 25	_{\$} 2225
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here t	for Memo Itemization
Dustrana Addana		
Type of Contribution:		
- Direct		
Page Subtotal	\$525.00	_
Grand Total of All Schedules 1A		

(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

137967 1. Committee I.D. Number

2. Committee Name CTE Colleen McCartney for Roseville

OANDIDATE CON	*****	2. Committee Hame			
Enter contributor's name and address. If contribution middle initial. Check box to indicate if contribution Committee (PAC) Report all contributions regard	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)			
3. Contribution # 1 PAC Receipt? Name & Address: Douglas Dinning 3770 Lake Forest Drive Sterking Heights MI 48314	YES 4. Date of Receip	ot <u>10/02/15</u>	_{\$} 100	_{\$} 2325	
5. If over \$100.00 cumulative, please provide	:		Click Horo for	Memo Itemization ▼	
Occupation E	mployer	<u> </u>	Click nere lor	Wellio itemization	
Business Address					
	Loan from a person	Fund Raiser			
3. Contribution #2 PAC Receipt?	/ES 4. Date of Receip	ot 10/09/15			
Roy Rose 55620 Woodbridge Shelby Twnp. MI 48316			_{\$} 75	_{\$} 2400	
5. If over \$100.00 cumulative, please provide:	:		Click Here for Memo Itemization ▼		
Occupation Em	ployer				
Business Address					
	_oan from a person	Fund Raiser			
3. Contribution # 3 PAC Receipt?	YES 4. Date of Recei	^{pt} 10/06/15			
Scott Lockwood 950 Southdown Bloomfield MI 48304			_{\$} 75	_{\$} 2475	
5. If over \$100.00 cumulative, please provide	:		Click Here for	Memo Itemization ▼	
OccupationE	mployer				
Business Address Type of Contribution: Direct	Loan from a person	Fund Raiser			
3. Contribution # 4 PAC Receipt? Name & Address Eric Moase	YES 4. Date of Rece	eipt 10/15/15			
16551 Kingston Ave Fraser MI 48026			_{\$} 100	_{\$} 2574	
5. If over \$100.00 cumulative, please provide	:		Click Here for	Memo Itemization ▼	
Occupation	Employer				
Business Address		1			
Type of Contribution: V Direct	Loan from a person	Fund Raiser		<u> </u>	
		Page Subtotal	\$350.00		
	_	LT LL CAUGE - duly 44	MO EZE 00	1	

Page <u>3</u> of <u>3</u>

(Complete on last page of Schedule) \$2,575.00

Enter this total on line 3a of Summary Page.



SCHEDULE 1B CANDIDATE COMMITTEE

2 Committee Name CTE Colleen McCartney for Roseville City Council

OANDIDATE COMMITTEE	2. Committee Name		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Costco		09/20/15	s 45
003.00	Purpose: Office Supplies	Date	<u> </u>
Address	Purpose: Omeo Cappines		
27118 Gratiot	Click	Here for Memo I	temization Type
Roseville MI 48066	Check box if this expenditure is payment of		
	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2			
Name Roseville Post Office		09/20/15	s 19.60
	Postage	Date	10.00
Address	Purpose: Postage		
30550 Gratioit	Click	Here for Memo I	temization Type
Roseville MI 48066			
	Check box if this expenditure is payment of	f	
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name C and C Nows		09/23/15	
Name C and G News			\$ <u>258.00</u>
Address	Purpose: Eastsider Advertisement	Date	
13650 East 11 Mile	Click	Here for Memo I	temization Type
Warren MI 48089			termization Type
	Check box if this expenditure is payment of	ŕ	
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name C and G News		10/08/15	
C and G News			\$ 258.00
Address	Purpose: Eastsider Advertisement	Date	
13650 East 11 MI			
Warren MI 48089	Click	Here for Memo I	temization Type
	Check box if this expenditure is payment or	f	
Fund Raiser	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name Costco		09/23/15	*406.00
Address	Purpose: Print Cartriges	Date	\$ <u>106.00</u>
27118 Gratiot			
Roseville MI 48066			Itemization Type
17,000 1111 10000	Check box if this expenditure is payment o	f	
Fund Raiser	debt or obligation reported on previous statement		
		total this page	\$686.60
			Ψ000.00
	Grand Total of al (Complete on last pa		
	(Complete on last pa	go or correduce)	

Enter this total on line 8a of Summary Page



ITEMIZED EXPENDITURES **SCHEDULE 1B CANDIDATE COMMITTEE**

137967 1. Committee I. D. Number

2. Committee Name CTE Colleen McCartney for Roseville City Council

Name Address Reservice ### Address Address Address Roseville High School Check box if this expenditure is payment of debt or obligation reported on previous statement Check box if this expenditure is payment of debt or obligation reported on previous Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser Check box if this expenditure is payment of debt or obligation reported on previous 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 statement 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 statement 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 statement 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 statement 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 statement Check box if this expenditure is payment of debt or obligation reported on previous statement Check box if this expenditure is payment of debt or obligation reported on previous statement Check box if this expenditure is payment of debt or obligation reported on previous Check box if this expenditure is payment of debt or obligation reported on previous Check box if this expenditure is payment of debt or obligation reported on previous Check box if this expenditure is p	Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Address Address Address Address Address Address Address Address Common Road Roseville High School T/855 Common Road Roseville Mil 48066 Fund Raiser	Expenditure #1			
Address Roseville High School 17855 Common Road Roseville Mil 48066	Name RHS Booster Club		10/08/15	\$ 50
Roseville High School 17885 Common Road Roseville Mil 48066 Fund Raiser Expenditure #2 Name Address Purpose: Expenditure #3 Name Address Click Here for Memo Itemization Type Date Click Here for Memo Itemization Type Purpose: Click Here for Memo Itemization Type Click Here for Memo Itemization Type Purpose: Expenditure #3 Name Address Click Here for Memo Itemization Type Date Click Here for Memo Itemization Type Click Here for Memo Itemization Type Click Hook if this expenditure is payment of debt or obligation reported on previous statement Expenditure #4 Name Address Purpose: Click Here for Memo Itemization Type Click Here for Memo Itemizat		Purpose: donation to booster club	Date	
Tribso Common Road Roseville MI 48066 Fund Raiser Fund Raiser Fund Raiser	Roseville High School		Here for Memo II	emization Type
Fund Raiser Expenditure #2 Name Address Purpose:	17855 Common Road		TOTO TOT INICITIO II	Similar 1990
Statement Stat	Roseville MI 48066	Check box if this expenditure is payment of		
Address Purpose:	Fund Raiser			
Address Purpose:	Expenditure #2			
Address Purpose:	Name			\$
Click Here for Memo Itemization Type Fund Raiser		Pumosa	Date	***************************************
□ Fund Raiser Expenditure #3 Name Address Purpose: □ Date □ Check box if this expenditure is payment of debt or obligation reported on previous S	Address			
Expenditure #3 Name Address Purpose:		Click I	Here for Memo I	temization Type
Fund Raiser Statement		Check box if this expenditure is payment of		
Expenditure #3 Name Address Purpose:	Fund Raiser			
Address Purpose:	Expenditure #3			
Address Purpose:	Name			•
Address Purpose: Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #4 Name Address Purpose: 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 Expenditure #5 Name Address Purpose: Date Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type Click Here for Memo Itemization Type Click Here for Memo Itemization Type Address Fund Raiser			Date	\$
Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #4 Name Address Purpose: Click Here for Memo Itemization Type Expenditure #5 Name Address Purpose: Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name Address Purpose: Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement	Address	Purpose:		
Expenditure #4 Name Address Purpose:		Click I	Here for Memo I	temization Type
Expenditure #4 Name Address Purpose:		Check box if this expenditure is payment of		
Expenditure #4 Name Address Purpose:	Fund Raiser			
Address Purpose:	Expenditure #4			
Address Purpose:	Name			
Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name Address Purpose: 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			Date	\$
Fund Raiser Check box if this expenditure is payment of debt or obligation reported on previous statement Expenditure #5 Name Address Purpose:	Address	Purpose:		
Fund Raiser Statement St		Click	Here for Memo I	temization Type
Fund Raiser Statement St		Check box if this expenditure is payment of	f	
Expenditure #5 Name Address Purpose:	Fund Raiser	debt or obligation reported on previous		
Address Purpose: Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement		- Control of the cont		
Address Purpose: Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement				
Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement			Data	\$
Check box if this expenditure is payment of debt or obligation reported on previous statement	Address	Purpose:	Date	
Fund Raiser debt or obligation reported on previous statement		Click	Here for Memo	Itemization Type ▼
Fund Raiser statement		Check box if this expenditure is payment or	f	
	Fund Raiser			
Subtotal this page \$50.00		Sub	total this page	\$50.00
Grand Total of all Schedules 1B (Complete on last page of Schedule) \$736.60		Grand Total of al	l Schedules 1B	

Enter this total on line 8a of Summary Page

(Complete on last page of Schedule)

2 of 2