

# CANDIDATE COMMITTEE COVER PAGE

#### FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and sign the treasurer (or designated record keeper) and candid	ed by 3. This state.	Statement covers From:	1-01-16 to	7-17-16
1. Committee I.D. Number	4. Car	didate Last Name	First Name	M.I.
138663		<b>Wickersham</b> e Sought Including Dist	Anthony nict # or Community Served (If	<b>M</b> • f applicable)
2. Committee Name		Sheriff of Ma	comb County	
CTE Anthony Wickersham		nty of Residence	Macomb	
5. Committee's Mailing Address	6. Treas	surer's Name & Resider	ntial Address	
PO Box 752		Christina Mil		
Mt. Clemens, MI 48046	I .	52012 Copper ( Chesterfield,		
Area Code and Phone (586) 524-4476				
If the address in this box is different from the committee	_			
mailing address on the Statement of Organization, mail r be sent to this address by the filing official.	Area Co	de & Phone	6) 524-4476	£ 7
7. Treasurer's Business Address	8. Desi Design	gnated Record keeper's ated Record keeper)	Name and Mailing Address (	If the animittee has a
43565 Elizabeth Rd. Mt. Clemens, MI 48043		S/A		
nt. Clemens, ni 40045	'	5/ A		
				FILE 19
				E DE
Area Code and Phone(586) 524-4476	Area Co	ode and Phone		<u> </u>
9. TYPE OF STATEMENT			9e. Dissolution of Candida	te Committee
9a. X Pre-Election OR 9b. Post-Election is	equired ONLY if can not on the ballotfor		By checking this item I/M	ve certify any outstanding debt
Pre-Election or Post-Election Statement relates to:	rrent year:		by discharged and forgiven, a	idate or his or her spouse is here and no longer collectible from
	July Quarterly		the committee. The committee owes no lates fees or has any	•
Primary	October Quarterly		,	
General	October Quarterly		Further, if the dissolution canr considered a request for the F	not be granted, that this be
Convention				Topoling Transcri
Special 9c.	Annual Stateme	ent ()	Effective date of dis	scalution
School		Coverage Year	Ellective date of dis	Solution
Caucus 9d.		Campaign Statement 9a, 9b, 9c or 9e to		
		Statement is being	Note: The disposition of resid Schedule 1B and the Summa	dual funds must be reported on arry Page.
	amended.)			
Date of Election, Convention or Caucus				
8-02-16				
1				
10. Verification: I\We certify that all reasonable diligence		paration of this stateme	ent and attached schedules (if	any) and to the best of
my\our knowledge and belief the contents are true, accu	rate and complete.	$\Omega I$	_	
Current Treasurer or Designated Record keeper Christina Mille	er ,	( Mrs 11		7-19-16
Type or Print Name		Signature 11	// Daye	
Anthony M Walanahan		1. My	Unt	7.18.16
Candidate Anthony M. Wickersham	,	- /	Date	7.11-14
Type or Print Name		Signature		

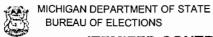


1. Committee I.D. Number	138663	
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#### **SUMMARY PAGE** CANDIDATE COMMITTEE

2. Committee Name \_\_\_\_\_CTE Anthony Wickersham

CANDIDATE COMMITTEE	2. Committee Name	#ICKCI SHGM
RECEIPTS	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <b>32</b> ,975	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$	(18.) \$ <u>119,050.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$ <b>43.08</b>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	(20.) \$ 119,093.08
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.) \$ <u>-0-</u>	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	
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.) \$ <b>7,648.12</b>	(23.) \$252.65
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
Disbursements     a. Itemized (Schedule 1C, Column 6)	(10a.) \$5,871.67	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)  DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$ <u>6,115.18</u>	(24.) \$32,868.37
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
	BALANCE STATEMENT	
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <b>38,120.45</b>	-
14. Amount received during reporting period	(14.) + \$ <u>32,975</u>	_
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <b>71,095.45</b>	-
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>13,763.30</u>	-
17. ENDING BALANCE		



#### CANDIDATE COMMITTEE

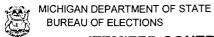
1. Committee I.D. Number \_\_\_\_\_138663

2. Committee Name Committee To Elect Anthony Wickersham

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 7 / 7 2 / // 2		
Name & Address:		
Dominic Abbate		
DOMINIC MODATE		
2500 Royal View Dr.		_
asa Royal viluor.	$\sim 200$	. 60x
00 Kland - MI 48262	\$	• • • •
5. If over \$100.00 cumulative, please provide:		
And The Internal Access	Click Here f	or Memo Itemization
Occupation Architect Employer Wakel ASSOC.		
- 20000 Van Duke in all 100002		
Business Address 3 0500 Van Dyke Warren, 111 41093		
Type of Contribution:   Direct   Loan from a person   Fund Raiser		
Loan Hom a person		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 2 / 2 2 / /		
Name & Address		
Al-J.		
( x 77000 )		
2719 Hawthorn	. 100	- EXX
or 11-1 How Holl	\$	\$ 200
Shelly Tup, MI 48316		_
5 1)E(W) 147 761 6	Oliela Liere fa	
5. If over \$100.00 cumulative, please provide:	Click Here to	or Memo Itemization
Occupation Attorney Employer (VAbdo Attorn at Cal	1)	
Occupation / 100 / Semployer 4 / 100	1	
Business Address 42550 (par hield Suite 1044 Clinton to	D. MI	
business Address 70.330 (but fire street of the street of	17	
Type of Contribution:   Direct   Loan from a person   Fund Raiser	48038	
·		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/23///o		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/23//6 Name & Address:		
Name & Address: Tason Abro	2	Q t x
Name & Address: Jason Abro 55205 Heatnerside	s 200	. \$ 800
Name & Address: Jason Abro 55205 Heatnerside	2	s 808
Name & Address: Jason Abro 55205 Heatnerside Shelby Tup, MI 48316	\$ 200	
Name & Address: Jason Abro 55205 Heatnerside	\$ 200	. \$ <u>808</u> r Memo Itemization
Name & Address: Jason Abro 55205 Heatnerside Shelby Tuf, MI 48316 5. If over \$100.00 cumulative, please provide:	\$ 200	
Name & Address: Jason Abro 55205 Heatnerside Shelby Tup, MI 48316	\$ 200	
Name & Address: Jason Abrotherside  55205 Heatherside  5. If over \$100.00 cumulative, please provide:  Occupation Segent Employer Macarb Sheriff	\$ 200	
Name & Address: Jason Abro 55205 Heatnerside  Shelby Typ, M/483/6  5. If over \$100.00 cumulative, please provide:  Occupation Segrent Employer Macarb Sherifa  Business Address 43565 Elizabeth Mt. Clemb M/88	\$ 200	
Name & Address: Jason Abrotherside  55205 Heatherside  5. If over \$100.00 cumulative, please provide:  Occupation Segent Employer Macarb Sheriff	\$ 200	
Name & Address:  Jason Abrotherside  Shelby Tuf, MI 48316  5. If over \$100.00 cumulative, please provide:  Occupation Servent Employer Macarb Sheriff  Business Address 13565 Elizabeth Mt. Clemes MY 20  Type of Contribution: Direct Ploan from a person Fund Raiser	\$ 200	
Name & Address:  Jason Abrotherside  Shelby Tup, MI 48316  5. If over \$100.00 cumulative, please provide:  Occupation Sey cant Employer Macarb Sheriff  Business Address 13565 Elizabeth Mt. Clemen WI 98  Type of Contribution: Direct QLoan from a person Fund Raiser  3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3 / 231/16	\$ 200	
Name & Address:  Jason Abrotherside  Shelby Tuf, MI 48316  5. If over \$100.00 cumulative, please provide:  Occupation Servent Employer Macarb Sheriff  Business Address 13565 Elizabeth Mt. Clemes MY 20  Type of Contribution: Direct Ploan from a person Fund Raiser	\$ 200	
Name & Address:  Jason Abrotherside  Shelby Tup, MI 48316  5. If over \$100.00 cumulative, please provide:  Occupation Sey cant Employer Macarb Sheriff  Business Address 13565 Elizabeth Mt. Clemen WI 98  Type of Contribution: Direct QLoan from a person Fund Raiser  3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3 / 231/16	\$ 200	
Name & Address:  Jason Abrotherside  Shelby Tup, MI 48316  5. If over \$100.00 cumulative, please provide:  Occupation Sey cant Employer Macarb Sheriff  Business Address 13565 Elizabeth Mt. Clemen WI 98  Type of Contribution: Direct QLoan from a person Fund Raiser  3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3 / 231/16	\$ 200	
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Name & Address:  Jason Abrotherside  Shelby Tup, MI 48316  5. If over \$100.00 cumulative, please provide:  Occupation Sey cant Employer Macarb Sheriff  Business Address 13565 Elizabeth Mt. Clemen WI 98  Type of Contribution: Direct QLoan from a person Fund Raiser  3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3 / 231/16	\$ 200	
Name & Address:  Jason Abro  55205 Heatner Side  Shelby Tup, MI 48316  5. If over \$100.00 cumulative, please provide:  Occupation Segrent Employer Macarb Sherita  Business Address 13565 Elizabeth Mt. Clemes MI 48  Type of Contribution: Direct Quan from a person Tend Raiser  3. Contribution # 4  Name & Address  PAC Receipt? YES 4. Date of Receipt 3/23//6  5541 Spring brook  Troy MI 480 93	\$ 200 Click Here fo	s 700
Name & Address:  Jason Abrotherside  Shelby Tup, MI 48316  5. If over \$100.00 cumulative, please provide:  Occupation Sey cant Employer Macarb Sheriff  Business Address 13565 Elizabeth Mt. Clemen WI 98  Type of Contribution: Direct QLoan from a person Fund Raiser  3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3 / 231/16	\$ 200 Click Here fo	
Name & Address:  Jason Abro  55205 Heatner Side  Shelby Tup, MI 48316  5. If over \$100.00 cumulative, please provide:  Occupation Segrent Employer Macarb Sherita  Business Address 13565 Elizabeth Mt. Clemes MI 48  Type of Contribution: Direct Quan from a person Tend Raiser  3. Contribution # 4  Name & Address  PAC Receipt? YES 4. Date of Receipt 3/23//6  5541 Spring brook  Troy MI 480 93	\$ 200 Click Here fo	s 700
Name & Address:  Jason Abro 55205 Heatner Side  Shelby Typ, MI 483/b  5. If over \$100.00 cumulative, please provide:  Occupation Sergent Employer Macoub Sheriks  Business Address 13505 Eli 20 beth Mt. Clemb MI 48  Type of Contribution: Direct QLoan from a person Fund Raiser  3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3/23//b  Name & Address  Self Spring brook  5. If over \$100.00 cumulative please provide:  Occupation Employer Self-employed	\$ 200 Click Here fo	s 700
Name & Address: Jason Abro 55205 Heather Side  Shelby Thy, MI 483/b  5. If over \$100.00 cumulative, please provide:  Occupation Sergent Employer Macab Sherifs  Business Address 13505 Eli 20 beth Mt. Clemen MI 48  Type of Contribution: Direct Ploan from a person Fund Raiser  3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3/23//b  Self Spring brook  5541 Spring brook  5541 Spring brook  5541 Spring brook  5641 Spring brook  5641 Spring brook  57541 Spring	\$ 200 Click Here fo	s 700
Name & Address:  Jason Abrother Side  Shelby Tuf, MI 48316  5. If over \$100.00 cumulative, please provide:  Occupation Servent Employer Macarb Sheriff  Business Address Is a beth Mt. Clemen MI 98  Type of Contribution:  Direct QLoan from a person Fund Raiser  3. Contribution #4  Name & Address  Self Spring brook  5. If over \$100.00 cumulative please provide:  Occupation Employer Self-employed  Business Address  Same as abare	\$ 200 Click Here fo	s 700
Name & Address: Jason Abro 55205 Heather Side  Shelby Thy, MI 483/b  5. If over \$100.00 cumulative, please provide:  Occupation Sergent Employer Macab Sherifs  Business Address 13505 Eli 20 beth Mt. Clemen MI 48  Type of Contribution: Direct Ploan from a person Fund Raiser  3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3/23//b  Self Spring brook  5541 Spring brook  5541 Spring brook  5541 Spring brook  5641 Spring brook  5641 Spring brook  57541 Spring	\$ 200 Click Here fo	s 700
Name & Address:  Jason Aborther Side  Scale Heather Side  Scale Heather Side  Macab Sherits  Direct Employer Macab Sherits  Type of Contribution:  Direct QLoan from a person Fund Raiser  3. Contribution # 4  Name & Address  PAC Receipt?  YES 4. Date of Receipt 3/23//b  Schill Spring braik  5. If over \$100.00 currulative please provide:  Occupation Employer Self - employed  Business Address Sanl as about  Type of Contribution:  Direct Loan from a person Fund Raiser	\$ 200 Click Here fo	s 700
Name & Address:  Jason Abrother Side  Shelby Tuf, MI 48316  5. If over \$100.00 cumulative, please provide:  Occupation Servent Employer Macarb Sheriff  Business Address Is a beth Mt. Clemen MI 98  Type of Contribution:  Direct QLoan from a person Fund Raiser  3. Contribution #4  Name & Address  Self Spring brook  5. If over \$100.00 cumulative please provide:  Occupation Employer Self-employed  Business Address  Same as abare	\$ 200 Click Here fo	s 700
Name & Address:  Jason Apropriation  Scas Heather Side  Shelby Ruf, MI 483/b  5. If over \$100.00 cumulative, please provide:  Occupation Severant Employer Macarb Sherify  Type of Contribution:  Direct Ploan from a person Fund Raiser  3. Contribution # 4  Name & Address  PAC Receipt?  YES 4. Date of Receipt 3/23//b  5. If over \$100.00 cumulative please provide:  Occupation Employer Self-employed  Business Address  Type of Contribution:  Direct Loan from a person Fund Raiser  Page Subtotal	\$ 200 Click Here fo	s 700
Name & Address:  Jason Aborther Side  Scale Heather Side  Scale Heather Side  Macab Sherits  Direct Employer Macab Sherits  Type of Contribution:  Direct QLoan from a person Fund Raiser  3. Contribution # 4  Name & Address  PAC Receipt?  YES 4. Date of Receipt 3/23//b  Schill Spring braik  5. If over \$100.00 currulative please provide:  Occupation Employer Self - employed  Business Address Sanl as about  Type of Contribution:  Direct Loan from a person Fund Raiser	\$ 200 Click Here fo	s 700

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line 3a of Summary Page.



138663 1. Committee I.D. Number

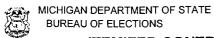
Committee To Elect Anthony Wickersham

CANDIDATE COMMITTEE 2. Committee Name		Timony Wienerenann
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 3/3//b Name & Address:  COORL Adams 3300 26 Mile Shelby Tup, MI 48316  5. If over \$100.00 cumulative, prease provide:  Occupation Employer  Business Address Type of Contribution: Direct   Loan from a person   Fund Raiser	\$Click Here fo	\$ / O ∨ Memo Itemization
S. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/23//6 Name & Address MiChael Agnello 1594 Millar  Clinton Typ, MI 48036 Occupation Builder Employer MiChael Agnello Under Business Address 31500 Harper SCS, MI 49082  Type of Contribution: Direct Loan from a person Fund Raiser		\$ <u>30 Ö</u> r Memo Itemization
A. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/23//6  Name & Address: Nicholas Aivto  41100 Conjer Bay Pr.  5. If over \$100.00 cumulative, please provide: Pharmacon Dunch  Employer Kings Towing  Business Address 35090 Hay per Clinton Dy M 48035  Type of Contribution: Direct Loan from a person Fund Raiser	\$ <u>250</u> Click Here for	\$ 3,750 r Memo Itemization
S. Contribution #4 PAC Receipt? YES 4. Date of Receipt 3/23/16 Name & Address PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address PAC Receipt? YES 4. Date of Receipt 3/23/16  S. Main  Mt. Clemens M1 48043  S. If over \$100.00 cumulative, please provide:  Occupation Attory Employer Maconh Conty  Business Address S. Main Mt. Clemens M1 48043  Type of Contribution: Direct Loan from a person Fund Raiser	\$ / OO Click Here for	\$\$
V Page Subtotal	550	

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

Enter this total on line 3a of Summary Page.

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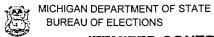
#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_138663

OANDIDATE OOMINITTEE	
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 3/23//b  Name & Address:  Donald Amboyer  5 4 Over \$100.00 cumulative, please provided M 473/b  Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	\$ / OC \$ / OC  Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address  OCOMPAN ANTON  I STCOMORY Land  Source \$100.00 cumulative, please provide:  Occupation Duran  Employer Anton Source by ASSO  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 3 Name & Address:  Darrell Babbitt  20720 Elm Forest Ct.  Clinton To MI 48038  5. If over \$100.00 cumulative, please provide?  Deputy Employer Macon Shorts  Business Address 435 65 Elizabeth Mt. Clenes, MI  Type of Contribution: Direct Loser from a person Fund Raiser	\$
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address Jo Shvu Babbitt  20720 EIM ForestCt.  5. If over \$100.00 carnulative, please provide:  Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	\$
Page Subtota  Grand Total of All Schedules 1A  (Complete on last page of Schedule)	-700

Page 3\_ of 45

line 3a of Summary Page.



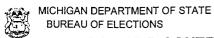
#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_138663

2 Committee Name Committee To Elect Anthony Wickersham

CANDIDATE COMMINITTEE 2. Committee Name	***	
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 3/23//6 Name & Address: Cheryl Ballor 24050 28 Mile Rd Ray Type of Contribution: Direct Loan from a person Fund Raiser	\$ / OO Click Here fo	\$_500 or Memo Itemization
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/23/16 Name & Address Doel Ballor  50383 Heathwood  Shelly The MI 483/7  5. If over \$100.00 cumulative, please provide:  Occupation Own Employer Balla Town	\$ 200 Click Here fo	sss
Business Address S7760 Main St. New Haven MIC  Type of Contribution: Direct Loan from a person Fund Raiser	18048	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/23/14  Brian Barlog  S2317 Saumill Creek  Maconb M1 48042  5. If over \$100.00 cumulative, please provide:  Occupation Lt. Employer Maconb Sheep  Business Address 43575 Elizabeth Mt. Clemen 44  Type of Contribution: Direct Yoan from a person Fund Raiser		\$\$
3. Contribution # 4 Name & Address  Sarah Becken 21909 Stephens  SCS, MI 48080  5. If over \$100.00 cumulative, please provide:  Occupation ASSOCIATE Employer HAS  Business Address 16039 9 Mile East Pointe, MI 48021  Type of Contribution: Direct Loan from a person Fund Raiser	\$ 7 <i>5</i> 0 Click Here for	\$\$
Page Subtotal  Grand Total of All Schedules 1A  (Complete on last page of Schedule)	Enter this total on line 3a of Summary	

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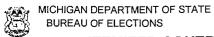
# CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_138663

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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 3/23//6 Name & Address: Paul Buis		
54222 Ridgeview	s /00	s 100
5. If over \$100.00 cumulative, please provide: MI 48316	Click Here fo	or Memo Itemization
Occupation Day Develor Employer Clark Construction  Business Address 3535 Moores River Dr. Cansin MI 40	8911	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address		
Thomas Bommarito 48049 James Pr.	\$ <u>/00</u>	s 200
5. If over \$100.00 cumulative, please provide: M1 48317	Click Here fo	r Memo Itemization
Occupation Selfen plojed Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/23/16  Antonio Bonfiglio  902 S. Shady Hollow Circle	\$ /00	\$/OO
5. If over \$100.00 samulative, please provide: MY 47304	Click Here to	Memo itemization
Occupation Employer		
Business Address Loan from a person Fund Raiser		
3. Contribution #4 Name & Address  Name & Address  Nothy  Name & Address  Nothy  Nothy		
Inothy Bowln 39666 Edgemont 5. If over \$100.00 cummative, please provide:	\$ 100	\$
Occupation Employer	Click Here for	Memo Itemization
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	400	
Grand Total of All Schedules 1A	700	-
(Complete on last page of Schedule)	Enter this total on	J
6 (IC	line 3a of Summary	

Page <u>5</u> of <u>45</u>



#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_138663

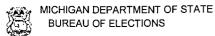
2. Committee Name

Committee To Elect Anthony Wickersham

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.	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 2/22//	
Name & Address: Cary Broad 20250 MOXON	- 200 - 200
5. If over \$100.00 cumulative, please provide:	\$ 300 \$ 500
Occupation President Employer Midwest Steel	Click Here for Memo Itemization
	8211
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/23//	6
Rejet Layers Local No. 1 Mi. PAC.	
Brick Layers Local No. 1 Mi. PAC. 21031 Ryan Rd.	<u> 200                                   </u>
5. If over \$100.00 cumulative, please provide:	-
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	
Jepp ry Brossard	16 5 200 5 708
Name & Address: Jeff reg Brossard 35504 Grant New Baltimore, MI 48047 5. If over \$100.00 cumulative, please provide:	\$ 200 \$ 708  Click Here for Memo Itemization
Jeff ry Brossard 35504 Corant	<u>\$ 200   \$ 708 </u>
Name & Address: Jeff reg Brossard  3 5504 Grant  5. If over \$100.00 cumulative, please provide:  Occupation Lt. Employer MCSO	<u>\$ 200   \$ 708 </u>
Name & Address:  Jeff Ney Brossard  3 5509 Grant  New Baltmore, MI 18047  5. If over \$100.00 cumulative, please provide:  Occupation	\$ 200 \$ 708  Click Here for Memo Itemization  M149043
Name & Address:  Jeff Ny Brossard  3 5504 Grant  5. If over \$100.00 cumulative, please provide:  Occupation	\$ 200 \$ 708  Click Here for Memo Itemization  M149043
Name & Address:  Jeff Ney Brossard  3 5509 Grant  New Baltmore, MI 18047  5. If over \$100.00 cumulative, please provide:  Occupation	\$ 200 \$ 708  Click Here for Memo Itemization  M149043
Name & Address:  Jeff Ny Brossard  3 5509 (grant  New Baltmore, MI 48047  5. If over \$100.00 cumulative, please provide:  Occupation L. Employer MCSO  Business Address 435 (e. 5 E. I. Baketh Mt. Clement Type of Contribution:  Direct Loan from a person Fund Raiser  3. Contribution # 4 PAC Receipt?  Name & Address  PAC Receipt?  BUAZYNOWSKI	\$ 200 \( \struct \) 708  Click Here for Memo Itemization  3 \( M149043 \)  \( \struct \) 200 \( \struct \) 340
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Name & Address:  Jeff Ny Brossard  3 5504 (crant  New Baltmore, MI 48047  5. If over \$100.00 cumulative, please provide:  Occupation	\$ 200 \( \struct \) 708  Click Here for Memo Itemization  3 \( M149043 \)  \( \struct \) 200 \( \struct \) 340
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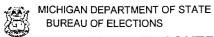
# CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_138663

2. Committee Name Committee To Elect Anthony Wickersham

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 3/23//b Name & Address; Tran Ann Buga (WS/Ci		
16982 Stewart Crt.	s 200	<u>\$ 900</u>
5. If over \$100.00 cumulative, please provide:  Occupation  Employer  Employer	Click Here fo	or Memo Itemization
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Business Address Samo		
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3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/23//b Name & Address: David Burn has 2540 Golf Crest	s	s /0 A
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3/23///6 Name & Address Larry Camp Del		
6690 Vernmor	s 100	, 200
5. If over \$100.00 cumulative lease provide:	- Click Here fo	r Memo Itemization
Occupation Associate Employer G21 Carpell Real	T	, Momo Romazation
Business Address 1186 8. 12 Mile Madison Heights, MI 480	71	
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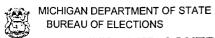


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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 3/23//6  Name & Address: James Caygill  3450 28 Mile	_
Washington MI 48094 5. If over \$100.00 cumulative, please provide:	s 100 s 100
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Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/23//6  Prancis Champagne	
43173 Kirkwood	\$ 200 \$ 700
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Occupation Industrie Kenzlamployer Champayre Association	
Business Address 45173 Kirkwood Clinton Try, MI 48036	\$
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3. Contribution #3 PAC Receipt? YES 4. Date of Reseipt 3/23/// Name & Address: Michael Chirco	
52777 Deerwood	s 100 s 400
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
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Business Address 4660 Poneo Plank Ste 5 Macorb MI 48 Type of Contribution: Direct Loan from a person Fund Raiser	044
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3/23// 60	
Name & Address Dan Cikota 13455 Melanie	
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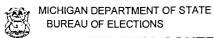


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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 3/23//6 Name & Address: Deborah Condino	_	
3710 Tremonte Cir.S.  Pochester MI 48306  5. If over \$100.00 cumulative, please provide:	s_/00	<u> 700 </u>
5. If over \$100.00 cumulative, please provide:  Occupation Exec. Dicclar Employer Mac. Co. Medical Center	Click Here fo	or Memo Itemization
Business Address 19175 Hall Rd Ste 240 Clintaty MI	48038	
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Name & Address Jason Conklin		
64655 N. AVE	s 100	s /20
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Business Address 43565 Elizabeth Mt. Clemen, MI	48073	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/23//6  Name & Address: Patricia Courie  11994 Maxfield  Hartland MI 48353  5. If over \$100.00 cumulative, please provide:	s [00	\$
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
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37362 From Trail	s / 00	\$ 300
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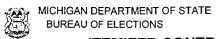
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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 3/23/6 Name & Address: Angelo D'Hessandro 130 49 Ruby Or. Shelby Two, M1 48315  5. If over \$100.00 cumulative, please provide: Occupation	\$ <u>'OO</u> Click Here fo	s 300 or Memo Itemization
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address Cory D'Alessandro  17955 Pris Circle  Clinton Dp. M. 18036  5. If over \$100.00 cumulative, please provide:  Occupation Own Employer Can no Construction  Business Address 28135 Corols beck Rose wile, M.1480  Type of Contribution: Direct Loan from a person Fund Raiser		s 400 r Memo Itemization
3. Contribution # 3 Name & Address:  David Daniels  4. Date of Receipt 3/23//6  David Daniels  45742 Cookout  Maconb, MI 48044  5. If over \$100.00 cumulative, please provide:  Occupation Capaw Employer MCSO  Business Address 43565 Eligabeth, Mt. Clemes, MI 48  Type of Contribution: Direct Coan from a person Fund Raiser	\$ 200 Click Here for	\$ 340 Memo Itemization
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3/23//6  Same & Address Elizabeth Darra  31369 Powland Carl  5. If over \$100.00 cumulative, please provide:  Occupation Wals Sheriff Employer MCSO  Business Address 43565 Elizabeth Mt. Clemens,  Type of Contribution: Direct Loan from a person Fund Raiser  Page Subtotal	\$ <u>/ 00</u> Click Here for  11 48043	\$_300
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#### CANDIDATE COMMITTEE

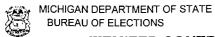
1. Committee I.D. Number 138663

2. Committee Name \_\_\_Committee To Elect Anthony Wickersham

CANDIDATE COMMITTEE 2. Committee Name	***	
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 3/23/16 Name & Address: VINCL Dearl		
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Michelle Debaeuss aert 39856 Brylor Clinton Top, M148038 5. If over \$100.00 cumulative, please provider	\$	\$ <u>/ O O</u>
Occupation Employer Employer		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address: Raymond Debuck  4. RfS 8 Kins Dr.  Shelby Two, MI 483/5  5. If over \$100.00 cumulative, please provide?  Occupation Owner Employer Debuck Construction  Business Address 48858 Kins Dr. Shelby Tup, 483/5  Type of Contribution: Direct Loan from a person Fund Raiser	\$ <u>/00</u> Click Here for	\$ 400
3. Contribution #4 Name & Address  Al hedo Deflavis 19657 Ashley-Crt  Livonia MI 4815 2  5. If over \$100.00 cumulative, please provide:  Occupation Banker Employer First State Bank  Business Address 24300 Cittle Mack SCS MI 48080  Type of Contribution: Direct Loan from a person Fund Raiser	\$ 100 Click Here for	\$200
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# **CANDIDATE COMMITTEE**

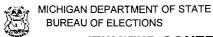
1. Committee I.D. Number \_\_\_\_\_138663

2. Committee Name

Committee To Elect Anthony Wickersham

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3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 3/23/16 Name & Address:  Dan Demeester  9349 Meisner	s	\$ 100
5. If over \$100.00 cumulative, please provide:  Occupation Office Employer Macond Convolved Oller  Business Address MSOO   2 Mile & Works M 48068  Type of Contribution: Direct Loan from a person Fund Raiser	Click Here for	or Memo Itemization
3. Contribution #2 Name & Address  Keith Devlamick  4. Date of Receipt 3/23/16  Keith Devlamick  4. Date of Receipt 3/23/16  Keith Devlamick  4. Date of Receipt 3/23/16  Note of Receipt 3/23/16  And Perlamick  Oryden MI 48428  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address	\$	s / O o
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31400 Kendal  Frace, M1 48026  5. If over \$100.00 cumulative, please provide:  Occupation Employer	\$ / OO  Click Here fo	r Memo Itemization
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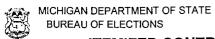
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2. Committee Name Committee To Elect Anthony Wickersham

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3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3/9/10  TO Ann ESCHEN by 9  18989 Carmelo  Clinton Turk MI 48038  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	\$ 40 Click Here fo	\$ <u>7</u> <u>7</u> or Memo Itemization
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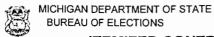
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Name & Address Paul Esposito	
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49419 Compass Point	s 500 s 1,250
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John Fenn	
13288 Lillian	100 200
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3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 2/23///	
Name & Address: Michael Ferlito	224
430 Park Ave,	\$ 200 s 200
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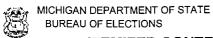


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3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 3/23//6 Name & Address: Fostor		
41700 Conger Bay Dr. Harrison Tup, MP 48045 5. If over \$100.00 cumulative, please provide:	<u>\$ 200</u>	s 600
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Business Address 41700 Conjer Bay Dr. Harrison Tup, MI Type of Contribution: Direct Loan from a person Fund Raiser	48045	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/23///		
Name & Address Norman Bud Fox		
48153 Malard Dri	s /00	243
New Baltimore, MI 48047	\$	\$_3 <i>00</i>
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Engineer Employer Mallard Enterprise		
Business Address 48153 Mallard Dr. New Baltmae, MI	48047	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address: Tony Gallo		_
37425 BellagioCt	<u>\$ 200</u>	s 500 <u> </u>
5. If over \$100.00 cumulative, please provided M1 48036	Click Here for	Memo Itemization
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Business Address 3555 Hoover Warren M 48093  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3/23//6 Name & Address		***************************************
Jim Galloway 61624 Bunker Hill		
61624 Bunker Hill	. 100	. 200
5. If over \$100.00 cumulative, please provide:		\$ 000
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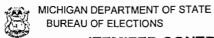
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3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 3/23//6 Name & Address:  Scott Gallus  3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 3/23//6  Scott Gallus  5. If over \$100.00 cumulative, please provide:  Occupation Perty Employer MCSO  Business Address 43565 Elizabeth Mt. Clemens, M1 48043	\$ <u>200</u> Click Here fo	\$ 200
Type of Contribution: Direct Loan from a person Fund Raiser  3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address  GUS Ghan am  32068 Marguret Ct.  Warren M 48093  5. If over \$100.00 cumulative, please provide:  Occupation Def. Public Warren Employer Ctto A Warren  Business Address City Square Warren M 48093  Type of Contribution: Direct Loan from a person Fund Raiser	\$	s 1,500 or Memo Itemization
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address: KeVin (OI   PSpie 50865 Taylor  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address Type of Contribution: Direct   Loan from a person	\$CO	\$ <u>/0</u> 0
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 3/23/16  Thomas Contribution  1825 Lenonhal Circle  5. If over \$100.00 cumulative, please provide:  Occupation OWNE Employer National Cone Island  Business Address 279 17 (Orolsback Roseville, M1480)  Type of Contribution: Direct Loan from a person Fund Raiser		\$ 400 r Memo Itemization
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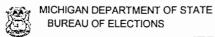
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CANDIDATE COMMITTEE 2. Committee Name		
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 3/23//6  Name & Address:  14523 Bournemuth  5. If over \$100.00 cumulative, please provide:  Occupation Employer	\$ <i>(00</i> Click Here f	s /00
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Name & Address: Michael Gravaglia  18958 ASPEN  5. If over \$100.00 cumulative, please provide:  Occupation Gov. le lations Employer Capital Relations  Business Address 28470   3 Mile Rd. Suite 220 Far Minj & Type of Contribution: Direct Loan from a person Fund Raiser  3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3/23//6  14255 Weiler  Warren, MI 48088	Click Here for Hills, MI	
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Name & Address: Michael Gravagla  18958 Aspen  5. If over \$100.00 cumulative, please provide:  Occupation GOV. le lations Employer Capital Relation  Business Address 28470 13 Mile Rd. Svite 220 Farming to the Survey of Contribution:  Direct Loan from a person Fund Raiser  3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 3/23//6  Name & Address Tere Orless  14255 Weier  5. If over \$100.00 cumulative, please provide:  Occupation fold CAMMISSIAS Employer City Warren  Business Address 29900 Civic Contrib. Warren MI 4809	Click Here for Hills, MI  s. 100  Click Here for	4833Y 5 200

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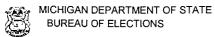


# **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_138663

2. Committee Name Committee To Elect Anthony Wickersham

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 3/23/16  Patrick Green		
3929 Marlene Warren, MI 48092. 5. If over \$100.00 cumulative, please provide:	\$ 200	\$ 200
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3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/3//	•	
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347 Pineridge Dr.	\$/ <i>00</i>	\$ 20 <del>0</del>
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation President Employer Center Mgt.		
Business Address 34120 Woodward Birming ham, MI	48009	
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3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/23//b		
Jeff Handen 6587 Tamarack	s /00	s 100
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
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Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 3/3//6		
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5 W2 Spring book	s /00	. 200
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Page 1 of 45	Page.	



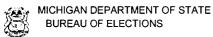
#### **CANDIDATE COMMITTEE**

138663 1. Committee I.D. Number \_

2. Committee Name

Committee To Elect Anthony Wickersham

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3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 3/9/16  Ann Hart 38/20 Willownere  5. If over \$100.00 dumulative, please provide?  4. Date of Receipt 3/9/16  4. Date of Receipt 3/9/16	\$ 25	\$\$r Memo Itemization
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3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/23//6 Name & Address Donna Hassig 237 Church Mt. Clemens, MI 48043	<u>\$ 260</u>	s 200
5. If over \$100.00 cumulative, please provide:	Click Here for	· Memo Itemization
OccupationEmployer_Self-employed		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/23//6  Name & Address: Harold Haugh 19464 Candlelight  5. If over \$100.00 cumulative, please provide:  Occupation Lep. Employer Michigan Tether  Business Address 13600 Elinabeth Mt. Clement M 480  Type of Contribution: Direct Loan from a person Fund Raiser	\$ <u>260</u> Click Here for	\$\$ Memo Itemization
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 2/23//6		
Name & Address Rorald Heitmann 14450 Bournemuth Dr.	\$ 100	s_308
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Occupation Physician Employer Henry Ford Hospita	Click Here for	Memo Itemization
Business Address 21250 Hall Pd. Surt. 200 CINATY  Type of Contribution: Direct Loan from a person Fund Raiser	M1 480	38
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#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_138663

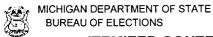
2. Committee Name Committee To Elect Anthony Wickersham

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 3/23//b  Name & Address:  Robert Hindman  49522 Key Cove  Chesterheld MI 48047  5. If over \$100.00 cumulative, please provide:  Occupation Self-Employer American Coraphics  Business Address 3 1995 Corobbeck Clintar Two, MI 480;  Type of Contribution: Direct Loan from a person Fund Raiser	-	\$ 850 r Memo Itemization
3. Contribution #2  PAC Receipt? YES  4. Date of Receipt 3/23/16  A ron Horne  8752 Woodsman  Washington MI 48094  5. If over \$100.00 cumulative, please provide:  Occupation Sergeant Employer MCSO  Business Address 43565 Elizabeth Mt. Clemens, MI 48  Type of Contribution: Direct Loan from a person Fund Raiser	\$ <u>/00</u> Click Here for	\$
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address:  VINCENT HOYUMPA  26 Belleview  Mt. Clemens, MI 48043  5. If over \$100.00 cumulative, please provide:  Occupation Attorney Employer Fischer, Caron Hoyum  Business Address 48 Market St. Mt. Clemens, MI 480  Type of Contribution: Direct Loan from a person Fund Raiser		\$ <u>400</u> Memo Itemization
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address  Robert Huth  2 48 (c) Haw tho (re. Pr. S.)  5. If over \$100.00 cumulative please provide:  Occupation Attorney Employer Kirk, Huth, Lange  Business Address 19500 Hall Rd. Ste 100 Clutary, V  Type of Contribution: Direct Loan from a person Fund Raiser	s 1,000 Click Here for Badala 1	s <u>l,000</u> Memo Itemization Nent I
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Page <u>20</u> of <u>45</u>



1. Committee I.D. Number \_

138663

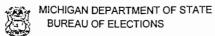
Committee To Elect Anthony Wickersham

CANDIDATE COMMITTEE 2. Committee Name		
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3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address: Gregory Tacobelli  530 S8 Ridge wood Dr.  Chartechald M. 1 (1805)	s 200	s 850
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Occupation OWN Employer On CORD (On SMOTH)		
Business Address 51435 Industrial Macorb, M1 4901  Type of Contribution: Direct Loan from a person Fund Raiser	() 	
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Business Address		
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3. Contribution #3 PAC Receipt? TES 4. Date of Receipt 3/23/16  Name & Address: Iron Workers Local 25- PAC Ford  3115 Joy 4 St.  Burton, M1 48529  5. If over \$100.00 cumulative, please provide:	\$ 200 Click Here for	\$ 3 00 Memo Itemization
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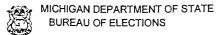
# CANDIDATE COMMITTEE

1. Committee I.D. Number \_

138663

2. Committee Name Committee To Elect Anthony Wickersham

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3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/23/16 P.O. Box 44024 Mt. Clemens, M1 48046  5. If over \$100.00 cumulative, please provide:    Employer   Emp	\$
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Name & Address Thomas Kalkopen 12402 Frank pr.  Lomeo MI 48065  5. If over \$100.00 cumulative, pleaso provide:	\$ 25. \$ 25 Click Here for Memo Itemization
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# **CANDIDATE COMMITTEE**

1. Committee I.D. Number 13866

138663	

2. Committee Name

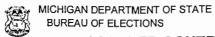
Committee To Elect Anthony Wickersham

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	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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Victoria Kashinsky 41531 Belvidere	s /00	s 100
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Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/23//6 Name & Address: David Kennedy 4102 River Pointe Pr.  St. Clair MI 48079  5. If over \$100.00 cumulative, please provide:	s	s / 40 r Memo Itemization
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address: David Lennedy  4102 River Pointer.  5. If over \$100.00 cumulative, please provide:  Occupation Captain Employer MCSO  Business Address 13565 Elizabeth Mt. Clemens  Type of Contribution: Direct Loan-from a person Fund Raiser	\$ / O O Click Here fo	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address: David Lennedy  4102 River Pointer.  5. If over \$100.00 cumulative, please provide:  Occupation Captain Employer MCSC  Business Address 43565 Elizabeth Mt. Chemens Type of Contribution: Direct Loan from a person Fund Raiser  3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address Copert Kirk	\$ / O O Click Here fo	
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3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 3/23/16 Name & Address: David Lennedy 4102 River Pointer.  5. If over \$100.00 cumulative, please provide: Occupation Captain Employer MCSO Business Address 43565 Elizabeth Mt. Clemens Type of Contribution: Direct Loan from a person Fund Raiser  3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3/23/16  Address Robert Kirk 37539 Hidden Valley  5. If over \$100.00 cumulative, please provide: Occupation Attorney Employer  Business Address 19500 Hall A Steloo Clinton Party Type of Contribution: Direct Loan from a person Fund Raiser	s / 00  Click Here fo  MI 4804  S / 000  Click Here fo	3 \$ 2,100
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# CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_138663

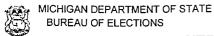
2. Committee Name Committee To Elect Anthony Wickersham

CANDIDATE COMMITTEE 2. Committee Name		
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address: James La Fata  58/20 Timothy Lane  Washington, M 48094  5. If over \$100.00 cumulative, please provide:  Occupation Fundament Employer Standard Drywall  Business Address 5600 Auburn Rd, Stelly Ty, M 483  Type of Contribution: Direct Loan from a person Fund Raiser		\$or Memo Itemization
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/23//b Name & Address Leo Calonde.  2480   Rosalind  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	\$	s <u>(0</u> ) or Memo Itemization
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address: Angelo Lanni 7040 Valley Green Washington MI 48094  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address Type of Contribution: Direct Loan from a person Fund Raiser	\$ <u>,300</u> Click Here fo	\$ <u>300</u> r Memo Itemization
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3/3// Name & Address Address Address Address Profide:  Occupation Employer  Type of Contribution: Direct Loan from a person Fund Raiser	s (00	\$
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#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_138663

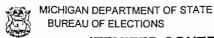
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Committee To Elect Anthony Wickersham

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 3/23// Pame & Address: Dave Lawler		
885 E. COVID 80 Chester MI 48306 5. If over \$100.00 cumulative, please provide:  90 Cocupation Employer _Self - employed	\$ / OO Click Here for	\$ / 90  Memo Itemization
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Business Address 29377 Hoover Warren, M1 48093  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address: An Hory Combardo  S6075 Ken Charles Pr.  5. If over \$100.00 cumulative, please provide:  Occupation Buldu Employer Combardo Honeo  Business Address S1237 Danview Stelly MI 48315  Type of Contribution: Direct Loan from a person Fund Raiser	\$Click Here for N	\$_3&& Memo Itemization
3. Contribution # 4 Name & Address  Albert Lorenzo  3.7281 Woodside Care  5. If over \$100.00 cumulative, please provide:  Occupation Asst. Court Exerc. Employer Maconh County  Business Address   South Main Mt. Clemens, M. 48030  Type of Contribution: Direct Loan from a person Fund Raiser	_	\$ YOO Memo Itemization
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#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_138663

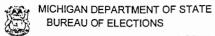
Committee To Elect Anthony Wickersham 2. Committee Name

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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 3/23//6  Shame & Address: YES 4. Date of Receipt 3/23//6		
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Type of Contribution: Direct Loan from a person Fund Raiser  3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 2/9/10		
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3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 3/23//6 Name & Address Oncio Mascore		
11111 Hall Rd. Ste 425	100	. 200
111 112717	<u>\$ 700</u>	\$ 200
5. If over \$100.00 cumulátive, pleáse provide:	Click Here for	r Memo Itemization
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	48317	
Type of Contribution: Direct Loan from a person Fund Raiser		<del></del>
Page Subtotal	350	
Grand Total of All Schedules 1A		

Page 26 of 45

(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



#### **CANDIDATE COMMITTEE**

138663 1. Committee I.D. Number

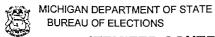
Committee To Elect Anthony Wickersham 2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 3/3// Amy Mayer  2/677 Phoenix 5. If over \$100.00 cumulative, please provide: Occupation Correctus Duf. Employer MCSO  Business Address 43565 Elizabeth Mt. Clarus, Mi Type of Contribution: Direct Loan from a person Fund Raiser		\$_/68 or Memo Itemization
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/3//b Name & Address  Jeffen Mc Merson  GM9 Haunridge  Lenox M1 48050  5. If over \$100.00 cumulative, please provide:  Occupation Alputy Employer M CSO  Business Address 43565 Elizabeth M+ Clens, MI  Type of Contribution: Direct Loan from a person Fund Raiser	60.4-	s 240 or Memo Itemization
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/9/16  Name & Address:  Donald Mentlikowski  21216 Ardmore Park  CCS MI URORI	\$	\$
5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address Type of Contribution: Loan from a person Fund Raiser	CHCK FIETE TO	TWEITHOREMIZATION
Occupation Employer	\$ /60	\$ 360

Page 27 of 45

(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



#### **CANDIDATE COMMITTEE**

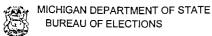
1. Committee I.D. Number \_

nber	138663		
Con	nmittee To	Elect Anthony	Wickersham

CANDIDATE COMMITTEE 2. Committee Name	imittee to Elect.	Anthony wickersham
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 3/23/16  Name & Address:  Patrick Movan  26201 Harbour Pte,  Harrison My 48045  5. If over \$100.00 cumulative, please provide:  Occupation Owner Employer Pat Movan Chevrolet  Business Address 3 SSOO S - Gratiot Clinton My M 48  Type of Contribution: Direct Loan from a person Fund Raiser	s <u>400</u> Click Here fo	\$ <u>600</u> or Memo Itemization
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address Michael Mueller  1250 0x60rd  6 PW MI 49236  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	\$\$ Click Here fo	\$
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 3/3//6 Name & Address: Mathew Murpy 43221 Hills boro  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	\$ <u>[OO</u> Click Here for	\$
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3/3/16  Name & Address JIM NiCholson  222 Cloverly  6PF, M1 48236  5. If over \$100.00 cumulative, please provide:  Occupation Chairman Employer PVS Chemicals  Business Address 10900 Harper Detait M 48213  Type of Contribution: Direct Loan from a person Fund Raiser	\$ 500 Click Here for	\$ 500 Memo Itemization
Page Subtotal	100	1

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

Enter this total on line 3a of Summary



#### CANDIDATE COMMITTEE

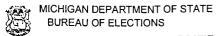
1. Committee I.D. Number \_

138663

2. Committee Name Committee To Elect Anthony Wickersham

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 3/23//6 Stag O' Britin	
52945 Camelot Shelhu Da.M. 48315	<u> </u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Porty Employer MCSO	
Business Address 435 GT Elina beth Mt. Clemens, MI 40	013
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 4 9 16	
Name & Address Donald O'dell 31810 N. Rich Rd.	s 50 s 95
Harrison Trp/ M148045	
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 Name & Address:  Ronald Olkowski 68410 Rosewood	<u> </u>
Richmond MI 48062  5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 2/23//	
Name & Address  James Onyski  6823 Ravenswood	\$ 100 \$ 200
5. If over \$100.00 cumulative, please provide:	
Occupation Deputy Employer MCSO	Click Here for Memo Itemization
Business Address 43765 Elnaket Mt. Clery M 480	13
Type of Contribution: Direct Loan from a person Fund Raiser	
Page Subtotal	275
Grand Total of All Schedules 1A (Complete on last page of Schedule)	
20 11/	Enter this total on line 3a of Summary

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#### CANDIDATE COMMITTEE

1. Committee I.D. Number 138663

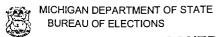
2. Committee Name Committee To Elect Anthony Wickersham

line 3a of Summary

Page.

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through
	<u> </u>	date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 3/3/16 Name & Address:		
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1121 D) + 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	\$ 100	\$ 700
5. If over \$100.00 cumulative, please provide: West & A		
	Click Here for	or Memo Itemization
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Business Address 29551 Greenfield Site 219 50011/0	e N, MI 480-	7b
Type of Contribution: Direct Loan from a person Fund Raiser		'
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt		
Name & Address		
Latil Oram	0.0.	~
3294 Wards Pointe	\$ 200	\$ 200
Orchard Lake Village, MI 48324		
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
	Click Here ic	i wemo itemization
Occupation Selb-engloyen Int. Outdoor		
Business Address 28423 Orchard Cake Rd. Str. 200 Farmly	ten MI	
	(182)11	
Type of Contribution: Loan from a person Fund Raiser	48334	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/23///		
Name & Address:		
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Name & Address: Anthon Petrykowski	s /00	s 147
Name & Address: Anthon Petrykowski 19580 Potomac	<u> </u>	s_/40_
Name & Address: Anthon Petrykowski 19580 Potomac	\$ /OO Click Here fo	s/ <del>/ // )</del> r Memo Itemization
Name & Address:  Anthor Petry Kowski  19580 Petry Kowski  Maconb My  5. If over \$100.00 cumulative, please provide:  Market Maconb My  48044	\$/OO_ Click Here fo	\$
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Name & Address:  Anthor Petry Kowski  19580 Potomic  5. If over \$100.00 cumulative, please provide:  Occupation Direct  Type of Contribution:  Direct  PAC Receipt?  YES  4. Date of Receipt  Anthor Petry Kowski  19580 Pereck  Type of Contribution:  PAC Receipt?  YES  4. Date of Receipt  3/23/16		\$
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Anthor Petry Kowski  19580 Potomac  Macoub MI 48044  Semployer M CSO  Business Address 43765 Elizabeth Mt Clem MI 480  Type of Contribution: Direct Ploan from a person Fund Raiser  3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address Chos Peyer K  340 Moeller		sr Memo Itemization
Anthor Petry Kowski  19580 Potomac  Macoub MI 48044  Semployer M CSO  Business Address 43765 Elizabeth Mt Clem MI 480  Type of Contribution: Direct Ploan from a person Fund Raiser  3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address Chos Peyer K  340 Moeller		s
Name & Address:  Anthor Petry Kowski  19580 Potomic  5. If over \$100.00 cumulative, please provide:  Occupation Direct  Type of Contribution:  Direct  PAC Receipt?  YES  4. Date of Receipt  Anthor Petry Kowski  19580 Pereck  Type of Contribution:  PAC Receipt?  YES  4. Date of Receipt  3/23/16	\$ 200	\$_ <i>J</i> ,000
Name & Address:  Anthor Petry Kowski  19580 Potomic  5. If over \$100.00 cumulative, please provide:  Coupation April Employer MCSO  Business Address 43505 Elizabeth Mt Clery M1 430  Type of Contribution: Direct Loan from a person Fund Raiser  3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address Chas Peyer K  340 Moeller  5. If over \$100.00 cumulative, please provide:	\$ 200	s/_VOr Memo Itemization  s/_ OOO
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Anthor Petrykowski  1958 Petry	\$ 200 Click Here for	\$_ <i>J</i> ,000
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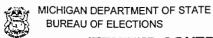


# CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_138663

2. Committee Name Committee To Elect Anthony Wickersham

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? TYES 4. Date of Receipt 3/23/16  Name & Address:  Pipe 1: Hers Local 636  30100 Northwestern Huy.  Farminitan Hills, MI 48334  5. If over \$100.00 cumulative, please provide:  Occupation Employer	\$COOClick Here fo	\$ 700 or Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser	_	
3. Contribution #2  PAC Receipt? YES  4. Date of Receipt  3/23/16  Name & Address  Michael Pitiglio  (01522 Warph Wheel  Washing for Mp, MI 48094  5. If over \$100.00 cumulative, please provide:  Occupation Construction Employer Florence  Business Address 12555 23 Mile Pd. Shelly M, MI 483/5  Type of Contribution: Direct Loan from a person Fund Raiser		s 400
3. Contribution # 3  Name & Address:  Paul Puchovan  W \$189 County kd 388  5. If over \$100.00 cumulative, please provide:  Occupation  Employer  Business Address  Type of Contribution:  Tirect  Loan from a person  Fund Raiser	\$ 50 Click Here for	\$ 50 r Memo Itemization
( ) V	\$ (00 Click Here for DUNSERPLAW 18038	\$ 700 r Memo Itemization
Grand Total of All Schedules 1A (Complete on last page of Schedule)  Page 31 of 45	Enter this total on line 3a of Summary Page.	_



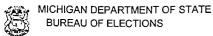
#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_138663

OANDIDATE COMMITTEE		
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 3/23/16 Name & Address: Clonard Runallic 18523 Hawhusde (and	/o.d	(//0
5. If over \$100.00 cumulative, please provide:	\$ [00]	s 700
Occupation SCCURT Sales Employer Kanco Security  Business Address 36809 Corolobeck Clinton M. M. Y	8035	
Type of Contribution: Direct Loan from a person Fund Raiser  3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 2) 23 / 1 / 2		
Name & Address Registrars PAC	400	
1358 Abbott  Detroit MI 48226  5. If over \$100.00 cumulative, please/provide:	<u> 500</u>	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 3/23//6 Name & Address: Prank Riberas		
46087 Barcraft	<u>\$ 200</u>	s 900
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Occupation Real & Fatt Employer Koncell  Business Address (e 171 Me to Par Kivay Sterly Heyhts No Type of Contribution: Direct Loan from a person Pand Raiser	11 483/0	
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 3/23///E Name & Address Mathew Richter		
701 E. Farnum Royal Oak, M1 48067 5. If over \$100.00 cumulative, please provide:	\$ 100	s /00
Occupation Employer	Click Here for	r Memo Itemization
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Page Subtotal	900	
Grand Total of All Schedules 1A		

Page 32 of <u>45</u>

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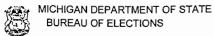
# ITEMIZED CONTRIBUTIONS SCHEDULE 1A

#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_\_138663

line 3a of Summary

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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 3/23//6 Name & Address: Michael Ringler 49137 Vixen D.		
Macomb, MJ 48044  5. If over \$100.00 cumulative, please provide:	\$ 100	\$ <u>200</u>
Occupation Accountant Employer Kingler CAA		or Memo Itemization
Business Address 1999 Hall Kd. Surti 201 Macab A Type of Contribution: Direct Loan from a person Fund Raiser	1148044	
3. Contribution #2 PAC Receipt? TYES 4. Date of Receipt 3/23//b. Name & Address PAC PAC PAC PAC PAC		
6200 Elmrida	s 1,000	s 2,000
5. If over \$100.00 cumulative, please provide, MI 48313	Click Here fo	or Memo Itemization
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S. Contribution #3 Name & Address:  ROY ROSE  SSOQUE Wood Fidel  5. If over \$100.00 cumulative, please provide:  Coccupation Civil Course Employer Andrea Exterior U	\$ <u>/00</u> Click Here for	\$ <u>400</u> r Memo Itemization
Business Address S130   SChotnher Gely TY, M1 48.  Type of Contribution: Direct Loan from a person Fund Raiser	315	
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 3/23//6 Name & Address Barbara Rossman		
54311 Queensborough	: 20c	s_600
5. If over \$100.00 cumulative, prease provide:  Occupation CEO Employer Henn Ford Hospital	Click Here for	r Memo Itemization
Business Address 15855 19 Mile Rd. Clinton Top, M Y Type of Contribution: Direct Loan from a person Fund Raiser	%38 	
Page Subtotal  Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	



## CANDIDATE COMMITTEE

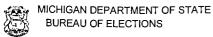
1. Committee I.D. Number \_\_\_\_\_138663

2 Committee Name	Committee To Elect Anthony V	<b>Vickershan</b>
2 Committee Name	Committee to Electrationy v	Vicitorial

OANDIDATE OCHMITTEE	
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 3/23//6 Name & Address: Philip Ruggeri 55764 St. Regis	
5. If over \$100.00 cumulative, prease provide:  Oh 1 a Private Access	<u> 100                                  </u>
occupation Attorne Employer Philip Rugger Assoc.	$ ho_{\cdot C_{\cdot}}$ Click Here for Memo Itemization
Business Address 432 31 Schoenherr Sterling Hey Lt., Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/23/16	· · · · · · · · · · · · · · · · · · ·
Name & Address Ryan Ruttan.	
21158 Van K Drive	s 100 s 180
6. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Deputs Employer MCSO	Olick Field for Metho Remization
Business Address 43565 Elizabeth Mt. Clerus, M148	043
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/23/14  Name & Address: Joseph Salone  5025 Forest Vally	\$ <u>200</u> \$ 400_
Name & Address: Joseph Salone 5025 Forest Vally	\$ 200 \$ 400 Click Here for Memo Itemization
Sozs Forest Vally  Clarkston, MI 48348  5. If over \$100.00 cumulative, please provide:	\$ 200 \$ 400 Click Here for Memo Itemization
Solome So	\$\$\$YO\(\frac{1}{2}\) Click Here for Memo Itemization
So25 Forest Valley  Clarkstyn MI 48348  5. If over \$100.00 cumulative, please provide:  Occupation Employer Sclf-en-ployed  Business Address Type of Contribution: Direct	\$_200 \s_Y0\dots Click Here for Memo Itemization
Name & Address:  Joseph Salone  So25 Forest Vally  Clarksty, MI 48348  5. If over \$100.00 cumulative, please provide:  Occupation Employer Self-enployed  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	\$ 200 \$ 400 Click Here for Memo Itemization
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Solone Solone Solone Solone Solone Solone Solone Solone Solone Clarkstin, MI 48348  5. If over \$100.00 cumulative, please provide:  Occupation Employer Self-enployed  Business Address Type of Contribution: Direct Loan from a person Fund Raiser  3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 3/3/16 Name & Address Dayn Santin 14803 Chippewa  Warken, MI 48088  5. If over \$100.00 cumulative, please provide: Occupation Depty Employer MCSO	\$(OC) \$(20) Click Here for Memo Itemization
Sold Forest Vally  Clarkstn, MI 48348  5. If over \$100.00 cumulative, please provide:  Occupation Employer Self-enployed  Business Address Type of Contribution: Direct	\$(OC) \$(20) Click Here for Memo Itemization
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Soas Forest Valley  Clarkston MI 48348  5. If over \$100.00 cumulative, please provide:  Occupation Employer Sch-enployed  Business Address Loan from a person Fund Raiser  3. Contribution # 4 PAC Receipt? YES	\$_{OC} \$_{AO}\$ Click Here for Memo Itemization

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Enter this total on line 3a of Summary Page.

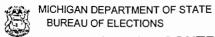


## **CANDIDATE COMMITTEE**

138663 1. Committee I.D. Number

2. Committee Name	Committee To Elect Anthony Wickersham
L. Committee Hame	

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 3/23/16  Name & Address: Alphonse Santino  725 Lalceshore Dr.  Cops MI 48236  5. If over \$100.00 cumulative, please provide:  Occupation Data Employer Michigan Institutes Wa	\$ <u> </u>	\$ 300 or Memo Itemization
Business Address 20952 2 Mile Rd. Surl 200 SCS, MIC  Type of Contribution: Direct Loan from a person Fund Raiser	18081	
3. Contribution #2 Name & Address Stephen Sorn  6. Scintun St.  Mt. Clemens, M1 48043  5. If over \$100.00 cumulative, please provide:  Occupation Ins. Soles. Employer Nickel Sork  Business Address 44 Maroch Place Mt. Clemen, M1 4804  Type of Contribution: Direct Loan from a person Fund Raiser		s <u>200</u> r Memo Itemization
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address: Dan Scalici  43977 Catanba  Clinton M. 48038  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address	\$CO Click Here for	\$ /0උ)  Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser  3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3/3//6  Name & Address Jim Scanlon  339 Cox  5. If over \$100.00 cumulative, please provide:  Occupation Receipt 2/23//6  Employer Employer	\$	\$/\_O Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser  Page Subtotal  Grand Total of All Schedules 1A (Complete on last page of Schedule)	400	-
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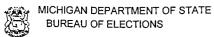


#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_138663

2. Committee Name Committee To Elect Anthony Wickersham

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 2/5/16 Name & Address: Wile Scharf	
19888 Mapketon Dr.	· 500 · 500
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
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Business Address 33497 33 Mile Rd. Chestefield Mile	104)
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 212110	
Name & Address Lawrence Scott	
38447 Huron Pointe Pr.	s 100 s 200
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Attorner Employer O'Reilly Rancello	
Business Address 17900 Hall Rd. Stelling Heights MI 48	313
Type of Contribution: Direct Loan from a person Fund Raiser	
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	\$ 700
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Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 3/23//6	
Name & Address Michael Servito 491 North Esplander Mt. Clemens, M1 48043 5. If over \$100.00 cumulative, please provide:	(00 (40
Mt. Clemens, MI 48043	\$ 100 \$ 100
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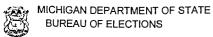
## CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_138663

2. Committee Name

Committee To Elect Anthony Wickersham

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)
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Name & Address:		
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38047 Huran Pointe	1,000	s 4,000
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Business Address 10725 Telegraph Taylor, MI 48180		
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3. Contribution #2 PAC Receipt? TES 4. Date of Receipt 3123//6		
Name & Address Sheet Metal Worlds Local 80 PAC		j
	2	
17255 10 Mile Rd.	s 200	<u>\$ 400</u>
Southbield, MI 48075		
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41221 WindMill	\$ 200	s (0 ST)
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3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 3/23/16		
Name & Address Paul Smasko		
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#### **CANDIDATE COMMITTEE**

138663 1. Committee I.D. Number

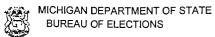
2. Committee Name

Committee To Elect Anthony Wickersham

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 3/23/16 Name & Address: Sherry Soundatino 14633 Breya	/2.0	1/00
Shedu Tupi MI (1831)	\$_/ <i>00</i>	\$ 900
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Pauline Stanger 37917 Saddle Carl	s 500	s 500
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Business Address 12822 (Carrield Clubb, M. 1998)  Type of Contribution: Direct Loan from a person Fund Raiser		
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91935 Stratton Clinton Dur MI 48038  5. If over \$100.00 cumulative, please provide:  Occupation Sut. Employer MCSO		\$ r Memo Itemization
91935 Stratton Clinton Dur MI 48038  5. If over \$100.00 cumulative, please provide:  Occupation Sut. Employer MCSO	\$ <u>/00</u> Click Here for	\$ <u>240</u> r Memo Itemization
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5. If over \$100.00 cumulative, please provide:  Occupation Syt. Employer MCSO  Business Address 43 Destruct Plant Fund Raiser  Type of Contribution: Direct Plant from a person Fund Raiser  3. Contribution # 4  Name & Address  Louis Stramalia  3000 Amvin Rd.		\$_240 r Memo Itemization \$_300
41935 Stration  Clinton During MI 48038  5. If over \$100.00 cumulative, please provide:  Occupation Syt.  Employer MCSO  Business Address 43565 Elizabeth Mt-Clemens MI  Type of Contribution:  Direct Loan from a person Fund Raiser  3. Contribution #4  Name & Address  PAC Receipt?  YES 4. Date of Receipt 3/23/16  COUIS Stramasilia  3000 Awarin Rd.  5. If over \$100.00 cumulative, please provide:	18043 \$ 100	\$ 240  r Memo Itemization  \$ 300  - Memo Itemization
5. If over \$100.00 cumulative, please provide:  Occupation Syt. Employer MCSO  Business Address 43565 Elizabeth Mt-Clemens MI  Type of Contribution: Direct Loan from a person Fund Raiser  3. Contribution # 4  Name & Address  Cours Stramastic  3. Occupation Catenay  Employer Four Bears Catenay  Employer Four Bears Catenay  Coccupation Catenay  Employer Four Bears Catenay  Coccupation C	18043 \$ 100	\$_30 <i>0</i> _
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5. If over \$100.00 cumulative, please provide:  Occupation Syt. Employer MCSO  Business Address 43 Destroya beth Mt. Clemens MI  Type of Contribution: Direct Loan from a person Fund Raiser  3. Contribution # 4  Name & Address  COUIS Strama[IICA 3000 Abov[n Raise]  5. If over \$100.00 cumulative, please provide:  Occupation Catenax Employer Four Bears Catenay  Business Address 3000 Abov[n Stelly] MI 48317	18043 \$ 100	\$_30 <i>0</i> _
5. If over \$100.00 cumulative, please provide:  Occupation Syt. Employer MCSO  Business Address 43 PAC Receipt? Loan from a person Fund Raiser  3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3/23/1/6  Strama (100) Strama (100) Strama (100) Strama (100) Address  5. If over \$100.00 cumulative, please provide:  Occupation Calenny Employer Four Black Catery  Business Address 3000 Address Strama (100)	18043 \$ 100	\$_30 <i>0</i> _

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#### CANDIDATE COMMITTEE

138663 1. Committee I.D. Number \_

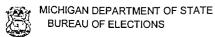
2. Committee Name

Committee To Elect Anthony Wickersham

Enter contributor's name and address. If contribution is from an individual, enter last name, firmiddle initial. Check box to indicate if contribution is from a Political Committee or an Independent (PAC) Report all contributions regardless of amount.	· •	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 3/23 Name & Address: LISO Steen bergin	116	
5. If over \$100.00 cumulative, please provide:	<u>\$ /00</u>	200
5. If over \$100.00 cumulative, please provide:	Click H	lere for Memo Itemization
	J. 13042	
Business Address 27 11 Dunham Mt. Clemens, M. Type of Contribution: Direct Loan from a person Fund Raiser	1_4019	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/2-7	116	
Name & Address Vito Strolis	<del>/                                    </del>	
19874 Westchester	s_20	0 \$ 1,450
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Business Address 305 N. Coratto+ Mt. Clemens N	141043	
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# **CANDIDATE COMMITTEE**

138663 1. Committee I.D. Number

2. Committee Name

Committee To Elect Anthony Wickersham

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 Name & Address:  QFO 2da Swe tech  4. Date of Receipt 3/23/16  QFO 2da Swe tech  4. Date of Receipt 3/23/16  Some tech  5. If over \$100.00 currhulative, please provide:  Occupation Physician Employer Self-employed  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	\$(O) Click Here fo	\$ <u>20∂</u> or Memo Itemization
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address Ronald Syme  38690 Long  Harrison Typ, M1 48045  5. If over \$100.00 cumulative, please provide:  Occupation Architect Employer Wakley Assoc.  Business Address 3 500 Van Dylee Wayren, M1 48093  Type of Contribution: Direct Loan from a person Fund Raiser	\$\$Click Here fo	s <u>30%</u> r Memo Itemization
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt	·	
Peter Thomas  50018 Seven Lake Dr.  5. If over \$100.00 cumulative, please provide:  Occupation Owner Employer Cash Exchange  Business Address 35943 S. Coratiot Clinton M. M. 1985  Type of Contribution: Foirect Loan from a person F. Fund Raiser	_	\$_500 Memo Itemization
Leter Thomas 50018 Seven Lake Dr.  Ua) hing the Duf, MI 48095  Occupation owner Employer Cash Exchange  Business Address 35943 S. Gratiot Clinton My, MI 4809	s 100	\$S

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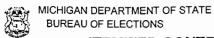
#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_138663

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Name & Address: Charles Towner 39757 Brylor	<del>)/ • • • • • • • • • • • • • • • • • • •</del>	(0.0	. 200
5. If over \$100,00 cumulative, please provide:		State Hara fac	\$
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8000 E. Jefferan		\$ <u>[00</u>	s_S00_
Detroit, MI 48214			
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Occupation Employer			
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Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Re	eceipt 3/23/16		
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at		<u> </u>	\$ 0200
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Occupation (Natural Employer Charles)	y Solution lengt		
Business Address 1250 N ( rooks Claw Type of Contribution: Direct Loan from a person	So M1 48017 Fund Raiser		
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Maconb. MI 48042		\$ 000	\$_000
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#### CANDIDATE COMMITTEE

138663 1. Committee I.D. Number

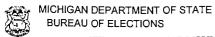
2. Committee Name	Committee To Elect Anthon	y Wickersham

CANDIDATE COMMITTEE 2. Committee Name		
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 3/23//6  Name & Address: Anthomy Viviand  475K Lo L Kwood  5. If over \$100.00 cumulative, please provide:  Occupation Owner Employer Sterling Heights Dodyl  Business Address 40//1 Van. Dyke Sterling Heights M1483/  Type of Contribution: Direct Loan from a person Fund Raiser		\$or Memo Itemization
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/23//6 Name & Address VINCENT VIVIANO 6705 St. Andrews  5. If over \$100.00 cumulative, please provide:	\$(OC)_ Click Here fo	\$ /00
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3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address:  A I CO WATSON  59539 Rongo Plank  5. If over \$100.00 cumulative, please provide:  Occupation BVS. Owner Employer Big Red Farms  Business Address 59539 Rongo Plant Raiser  Type of Contribution: Direct Loan from a person Fund Raiser	\$Click Here for	\$ <u>760</u> Memo Itemization
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 3/3// Name & Address  Can Wissand  1929 S. Delano  5. If over \$100.00 cumulative, please provide:  Occupation Semployer MCSO  Business Address 43565 Elizabeth Mt. Clenes, M  Type of Contribution: Direct Loan from a person Fund Raiser		\$_360 Memo Itemization
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## **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_138663

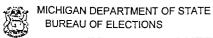
2. Committee Name

Committee To Elect Anthony Wickersham

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3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/3// Name & Address Daniel Willishire 51532 Wilshire	16	s 200	\$ 220
New Baltime. MI 48047			
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
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Business Address 43565 Elizabeth Mt. Cleny MI 480	043		
Type of Contribution: Direct Loan from a person Fund Raiser			
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/23/ Name & Address: Ryan Wohlfield 19744 Rich Pri  5. If over \$100.00 cumulative, please provide:	<u>114</u>	\$	\$ <u>/0</u> 0
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Type of Contribution: Direct Loan from a person Fund Raiser			
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 3/2-3/ Name & Address Covidon Wilson	46		
19297 Hickon Ridge Rd. Pour TVV MP 4842D		\$	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide:	~1 ·	· Click Here for	Memo Itemization
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Business Address S1301 Schoenher Shely, Type of Contribution: Direct Loan from a person Fund Raiser	$_{-}M$	48315	
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#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number

138663

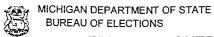
2. Committee Name

Committee To Elect Anthony Wickersham

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 3/23//6  LISO WO NO  32025 Maray J Cf.  Warren M 48093  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	\$	s /OO r Memo Itemization
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/23/16  Name & Address Park Way NO 32025 Margared Ch.  Warren MI 48093  5. If over \$100.00 cumulative, please provide:  Occupation Employer Self- employed  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	\$	\$ Memo Itemization
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 3/23//6  Name & Address: TWA CAMA  30S0Y Dell Canl  Warren M 1 47092  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	\$COC_ Click Here for	\$ Memo Itemization
3. Contribution # 4 Name & Address  PAC Receipt? YES 4. Date of Receipt 3/23/16  TO CEY YOKICH  JOHN CONDON SWITCH ST.  5. If over \$100.00 cumulative, please provide:  Occupation Lawel Employer Major Conty  Business Address YO N. Main Mt. Clement M. Y.  Type of Contribution: Direct Loan from a person Fund Raiser	\$ <u>(60</u> Click Here for	\$_300 Memo Itemization
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#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_138663

2. Committee Name Committee To Elect Anthony Wickersham

CANDIDATE COMMITTEE		<del></del>
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 3/23/16  Name & Address:  Mario Vono  51715 Baken  5. If over \$100.08 cumulative, please provider  M. U. 3047	s 100	s 120
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3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/23/16 Name & Address Chet Zochowski 15355 32 Mile Rd.	s (00	۸۵/
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Business Address		
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# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

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

C	CANDIDATE COMMITTEE 2. C	ommittee Name CTE Anthony Wick	kersham	
3. Name ar	nd address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditur	e #1			
Name	U.S. Postal Service		1/7/16 Date	\$ 76.00
Address	155 S. Main Mt. Clemens, MI 48043	Purpose: Post Box Annual Fee	Date	
	•		ere for Memo I	temization Type
Fund F	Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure	÷#2			
Name	U.S. Postal Service		2/19/16	\$ 588.00
Address	155 S. Main Mt. Clemens, MI 48043	Purpose:	Date	
	net oreneas, nr 10015	Click He	ere for Memo I	temization Type
		Check box if this expenditure is payment of		
X Fund F	Raiser	debt or obligation reported on previous statement		
Expenditur	e #3			
Name	American Graphics		2/22/16	<sub>\$</sub> 1220.38
Address	34895 Groesbeck Clinton Township, MI 48036	Envelopes, Letters &	Date	
	.,	lickets	ere for Memo l	temization Type
		Check box if this expenditure is payment of	sie iei menie n	
X Fund F	Raiser	debt or obligation reported on previous statement		
Expenditure	e #4	Contention		,
Name	Macomb County Clerk's Office 40 N. Main	_	3/18/16	\$ 100.00
Address	Mt. Clemens, MI 48043	Purpose: Purpose:	Date	
		Click He	ere for Memo If	temization Type
Fund F	Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure	e #5			
Name	Mirage Banquet Center 16980 18 Mile Road		2/22/16	. F010 70
Address	Clinton Township, MI 48038	Purpose Food & Beverage Cost	_3/23/16 Date	\$ 5012.70
		for Fundraiser	ere for Memo	temization Type
		Check box if this expenditure is payment of		
XX Fund F	Raiser	debt or obligation reported on previous statement		
		Subtot	al this page	6,997.08
		Grand Total of all S (Complete on last page		
		(Complete on last page	/ [	

Enter this total on line 8a of Summary Page



# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number	138663	
2. Committee Name	CTE Anthony Wickersham	

CA	NDIDATE COMMITTEE 2.	Committee Name	TCKEISHAM
3. Name and a	ddress of person or vendor to whom paid	4. Purpose (Required Information)	5. Date 6. Amount
Expenditure #1 Name Address	CTE Dana Camphous-Peterson PO Box 46057 Mt. Clemens, MI 48046	Purpose: Ticket for Fundraising Event Click Check box if this expenditure is payment of debt or obligation reported on previous statement	4/1/16 \$ 100.00  Here for Memo Itemization Type
Expenditure #2 Name Address	Cynthia Schroeder 26665 Christy Dr. Chesterfield, MI 48051	Purpose: Consulting Services Click	4/04/16 \$ 174.04  Here for Memo Itemization Type
Fund Raise	er	Check box if this expenditure is payment of debt or obligation reported on previous statement	
Expenditure #3 Name Address	Stabenow for State Senator PO Box 4945 East Lansing, MI 48826	Check box if this expenditure is payment of debt or obligation reported on previous	4/14/16 \$ 100.00  Here for Memo Itemization Type
Expenditure #4 Name Address	Italian Tribune PO Box 380407 Clinton Township, MI 48038	Check box if this expenditure is payment of debt or obligation reported on previous	4/21/16 \$ 277.00  Date \$ 277.00  Here for Memo Itemization Type
Expenditure #5 Name Address Fund Raise		Purpose:  Click Check box if this expenditure is payment of debt or obligation reported on previous statement	Date \$  Here for Memo Itemization Type
		Grand Total of all	otal this page 651.04  Schedules 1B ge of Schedule) 7,648.12

Enter this total on line 8a of Summary Page



# INCIDENTAL OFFICE EXPENSE DISBURSEMENTS SCHEDULE 1C CANDIDATE COMMITTEE

1. Committee I. D. Number	138663

VOIDATE COMMITTEE
(For use by officeholders only)

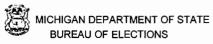
2. Committee Name

CTE Anthony Wickersham

3. Name and address of person to whom disbursement was made	Description of Disbursement     (Be specific & you may assign a     disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1			
Name & Address:	Purpose		
	Quarterly Dues	1/7/16	85.00
Mt. Clemens Lions Club		Date	Φ
c/o Dave Herrington			
165 Crocker Blvd.		Click for Memo Iter	mization Type
Mt. Clemens, MI 48043			
, , , , , , , , , , , , , , , , , , , ,	PΛ		
	Disbursement CodeBO		
Check box if this disbursement is payment of debt or obligation	Fund Raiser		
reported on previous statement			
Disbursement # 2	Purpose		
Name & Address:	Tickets for Tournament	2/1/16	a 105 00
Pistons	TICKETS TOT TOUTHAMEHE	2/1/16	\$ <u>195.00</u>
c/o Palace of Auburn Hills	"Battle of the Badges"	Date	
	· ·		
6 Championship Drive		Click for Memo Iter	nization Type
Auburn Hills, MI 48326			
	PO/CO		
Check box if this disbursement is payment of debt or obligation	Disbursement CodeBO/GO		
reported on previous statement	Fund Raiser		
Disbursement # 3 Name & Address:	Purpose		
Hame a Audiess.	Sponsorship for	3/9/16	\$ 500.00
Macomb County Child Advocacy Center	20th Anniversary	Date	
1	Champions for Children		
131 Market St.	•	0" 1 6 11 "	
Mt. Clemens, MI 48043		Click for Memo Iten	nization Type
	CO		
Check box if this disbursement is payment of debt or obligation	Disbursement Code		
reported on previous statement	X Fund Raiser		
Disbursement # 4	Purpose		
Name & Address:	Tickets to Annaul Event	3/17/16	s 100.00
Macomb County Sheriff's Honorguard		Date	<u> </u>
43565 Elizabeth Road		Date	
Mt. Clemens, MI 48043		Click for Memo Iten	nization Type
nt. Clemens, nr 40043			
<b>\</b>	Disbursement Code GO		
Check box if this disbursement is payment of debt or obligation			
reported on previous statement	X Fund Raiser		
		Subtotal this page	000 00
		Table and bago	880.00
		of all Schedules 1C	
	(Complete on las	t page of Schedule)	

Enter this total on line 10a of Summary Page

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Page	-	of	•	



# INCIDENTAL OFFICE EXPENSE DISBURSEMENTS SCHEDULE 1C CANDIDATE COMMITTEE

1. Committee I. D. Number 138663

(For use by officeholders only) 2	. Committee Name	dony wickersham
Name and address of person to whom disbursement was made	4. Description of Disbursement (Be specific & you may assign a disbursement code*)	5. Date 6. Amount of Disbursement
Disbursement # 1 Name & Address:  Anchor Bay Wrestling c/o Coach Al Biland 31823 Twin Oaks Dr. Chesterfield, MI 48047	Purpose Hole Sponsor	3/29/16 \$ 100.00  Click for Memo Itemization Type
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code KO/GO  X Fund Raiser	
Disbursement # 2 Name & Address:  Macomb County Warming Center	Purpose  1/2 pg Ad - Program	3/31/16 \$_100.00 Date
Two Crocker Blvd. Mt. Clemens, MI 48043		Click for Memo Itemization Type
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code	
Disbursement # 3 Name & Address:	Purpose  Quarterly Dues	4/4/16 \$ 85.00
Mt. Clemens Lions Club C/O Dave Herrington 165 Crocker Blvd. Mt. Clemens, MI 48043		Date  Click for Memo Itemization Type
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code	
Disbursement # 4 Name & Address:	Purpose  Donation for Spring	4/20/16 \$ 100.00
Macomb County Warming Center Two Crocker Blvd. Mt. Clemens, MI 48043	for Homeless Event	Date Click for Memo Itemization Type
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement CodeFund Raiser	
	Grand Tot	Subtotal this page 385.00 al of all Schedules 1C ast page of Schedule)
	(55р.:010	

Enter this total on line 10a of Summary Page



# INCIDENTAL OFFICE EXPENSE DISBURSEMENTS SCHEDULE 1C CANDIDATE COMMITTEE

1. Committee I. D. Number	138663

(For use by officeholders only)	2. Committee Name	ony Wickersh	am
3. Name and address of person to whom disbursement was made	Description of Disbursement     (Be specific & you may assign a     disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address:	Purpose	1 101 116	200.00
Macomb County Association of Chiefs of Police	Golf & Hole Sponsorship	P 4/21/16 Date	\$ <u>300.00</u>
c/o Chief Paduch 121 W. St. Clair		Click for Memo Ite	mization Type
Romeo, MI 48065	Disbursement Code GO/KO		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Fund Raiser		
Disbursement # 2 Name & Address:	Purpose  Ticket for Dinner/Raff1	lo 5/2/16	\$_100 <b>.</b> 00
MCREST 20415 Erin	Fundraising Event	Date	
Roseville, MI 48066		Click for Memo Iter	mization Type
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement CodeG0		
Disbursement # 3 Name & Address:	Purpose  Membership Renewal	5/9/16	\$ 90.00
Sam's Club 45600 Utica Parkway Blvd. Utica, MI 48315	nemberonip Renewal	Date  Click for Memo Iter	
	во		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code		
Disbursement # 4 Name & Address:	Purpose		
Jimmy John's	Lunch for Lieutenants Day Meeting	5/ <u>5/16</u> Date	<u>\$ 217.27</u>
40067 Groesbeck Hwy. Clinton Township, MI 48036		Click for Memo Iter	nization Type
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement CodeBO		
		Subtotal this page	707.27
		of all Schedules 1C st page of Schedule)	Fatouthia tata!
			Enter this total

Enter this total on line 10a of Summary Page

Page	3	of	7



# **INCIDENTAL OFFICE EXPENSE DISBURSEMENTS SCHEDULE 1C**

138663 1. Committee I. D. Number **CANDIDATE COMMITTEE** CTE Anthony Wickersham

(For use by officeholders only)	2. Committee Name		
3. Name and address of person to whom disbursement was made	Description of Disbursement     (Be specific & you may assign a     disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement#1 Name & Address:  Sponsorship Solutions, LLC 13335 15 Mile Road Sterling Hgts., MI 48312	Purpose Park-In Sponsorship		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code KO  Fund Raiser		
Disbursement # 2 Name & Address:  Sam's Club 45600 Utica Parkway Blvd. Utica, MI 48315	Purpose  Candy - Parades	5/25/16 Date	\$95.40
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code		
Disbursement # 3 Name & Address:  FOP Lodge 112 33845 24 Mile Road Chesterfield, MI 48047	Purpose 2016 Dues	6/6/16  Date  Click for Memo Item	\$ 72.00
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code BO		
Disbursement # 4 Name & Address:  Community Caring Program UAW Region 1 27800 George Merrelli Drive Warren, MI 48092	Purpose Annual Golf Outing	6/6/16  Date  Click for Memo Item	\$ 1000.00
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code		
		Subtotal this page	2,417.40
	Grand Tota (Complete on la	ll of all Schedules 1C ast page of Schedule)	-
			Enter this total

on line 10a of Summary Page

\*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY

Page \_\_\_\_\_ of \_\_\_\_7



# INCIDENTAL OFFICE EXPENSE DISBURSEMENTS SCHEDULE 1C CANDIDATE COMMITTEE

1. Committee I. D. Number	138663
2. Committee Name	CTE Anthony Wickersham

(For use by officeholders only) 2.	Committee Name	ony wickersn	
3. Name and address of person to whom disbursement was made	Description of Disbursement     (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address:	Purpose		
Name & Address.	Annual Golf Outing	6/8/16	\$ 200.00
Leukemia & Lymphoma 1471 E. 12 Mile Road		Date  Click for Memo Iter	T
Madison Hgts., MI 48071			
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code		
Disbursement # 2	Purpose		
Name & Address:	Ad Annual Festival	6/15/16	\$_100 <u>.00</u>
American Polish Century Club 33204 Maple Lane	AU AUDUAL PESCIVAL	0 <u>/ 13/ 10</u> Date	Ψ <u>100.00</u>
Sterling Hgts., MI 48312		Click for Memo Iten	nization Type
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code		
Disbursement # 3 Name & Address:	•	(1) = () (	100.00
Italian American Cultural Center	Banner - Annual Event	6/ <u>15/16</u> Date	\$ 100.00
43843 Romeo Plank Road		Date	
Clinton Township, MI 48038		Click for Memo Item	nization Type
		Oliok for Wietho Ren	nzadori Type
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code K0 Fund Raiser		
Disbursement # 4	Purpose		
Name & Address:	Donation - Annual Picni	c 6/16/16	\$ 100.00
Warren/Centerline Senior Connection	Donation - Annual Fichi	Date	\$ 100.00
31698 Mound Road Warren, MI 48092		Click for Memo Item	nization Type
	GO		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code Fund Raiser		
		Subtotal this page	500.00
	Grand Total	of all Schedules 1C	
	(Complete on la	st page of Schedule)	Enter this total
			Litter trilo total

Enter this total on line 10a of Summary Page

\*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY

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# INCIDENTAL OFFICE EXPENSE DISBURSEMENTS SCHEDULE 1C

CANDIDATE COMMITTEE

1. Committee I. D. Number	138663

CTE Anthony Wickersham

(For use by officeholders only)	Continuee Name		
3. Name and address of person to whom disbursement was made	Description of Disbursement     (Be specific & you may assign a     disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address:  Italian Tribune	Purpose  Ad - Italian Festival	6/2/16	\$_277 <b>.</b> 00
PO Box 380407 Clinton Township, MI 48038		Date Click for Memo Iter	mization Type
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code		
Disbursement # 2 Name & Address:  Cousino Sideliners	Purpose  Ad - Yearly Program	7 <u>/1/16</u> Date	\$ <u>70.00</u>
c/o Lisa Jolliffe 30758 Marrocco Drive Warren, MI 48088	ко	Click for Memo Iter	nization Type
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement CodeFund Raiser		707 - 64-
Disbursement # 3 Name & Address:  National Council of Negro Women PO Box 463066 Mt. Clemens, MI 48046	Purpose  Quarter Page Ad  for Fundraising Event	7/2/16  Date  Click for Memo Iter	\$ 50.00
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>KO</u> Fund Raiser		
Disbursement#4 Name & Address:  FOP Lodge 112 33845 24 Mile Road Chesterfield, MI 48047	Purpose  Hole Sponsor  for annual event	7/ <u>6/16</u> Date Click for Memo Iter	\$ 100.00
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code KO Fund Raiser		
		Subtotal this page	497.00
	Grand Tota (Complete on la	I of all Schedules 1C st page of Schedule)	Enter this total

Enter this total on line 10a of Summary Page



# **INCIDENTAL OFFICE EXPENSE DISBURSEMENTS** SCHEDULE 10

COUEDINE 40	1. Committee I. D. Number	138663
SCHEDULE 1C		
CANDIDATE COMMITTEE	CT	E Anthony Wickersham

138663

(For use by officeholders only)	Committee Name		
3. Name and address of person to whom disbursement was made	Description of Disbursement     (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address:	Purpose		-
Mt. Clemens Lions Club	Quarterly Dues	7/6/16 Date	\$ <u>85.00</u>
c/o Dave Herrington 165 Crocker Blvd.		Click for Memo Ite	mization Type
Mt. Clemens, MI 48043			
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement CodeB0		
Disbursement # 2	Purpose		
Name & Address:	Hole Sponsorship	7/10/16	<sub>\$</sub> 200.00
Carehouse		Date	
131 Market St.		Click for Memo Iter	mization Tuna
Mt. Clemens MI 48043		Click to I Wellio Itel	nization rype
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement CodeKO/GO		
Disbursement # 3	Purpose		
Name & Address:	Hole Sponsorship	7/ <u>13/16</u>	\$200.00
Macomb Family YMCA 10 N. River Road		Date	
Mt. Clemens, MI 48043		Click for Memo Iten	nization Type
П	Disbursement CodeKO/GO		
Check box if this disbursement is payment of debt or obligation reported on previous statement	XX Fund Raiser		
Disbursement # 4 Name & Address:	Purpose		
		Date	
		Click for Memo Iter	nization Type
Check box if this disbursement is payment of debt or obligation	Disbursement Code		
reported on previous statement	Fund Raiser		
		Subtotal this page	485.00
	Grand Tota	l of all Schedules 1C st page of Schedule)	5,871.67
	(Somplete of the	c. page of concade)	Enter this total

on line 10a of Summary Page

\*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY

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#### **FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE**

1. Committee I.D. Number		138663		
2. Committee Name	CTE	Anthony	Wickersham	

	- USE A S	EPARATE SH	EET FOR EACH EVENT	•
3. Date Event Was Held	or Participating	ndividuals Attending (whichever is	5. Type of Fund Raising Activity	Address and Name (If any) of place where the activity was held
5/23/16	greater)	260	Friends & Family	Mirage Banquet Cen 16980 18 Mile Clinton Twp.,
7. Total Contributions		30,000	-	
8. Other Receipts	*****	***************************************	neriberrasiasiasiasiasiasiasiasiasiasiasiasiasia	
9. Gross Receipts (Add lines 7	and 8)	30,000	***************************************	
10. Total Cost of Event (Total Cost includes In-Kind Co	ntributions and	6,821.08 d All Expenditures	Made For the Event)	
11. Check if event was a jo	int fund raiser	and complete the	following:	
Co-Sponsor(s)		Contribution S (%)	plit	Expenditure Split (%)
		***************************************	Accompany of the Control of the Cont	***************************************
463600000000000000000000000000000000000	-	***************************************		***************************************
ALAMANIA DA DO DO DO DO DO DE PORTO DE CONTROLOS DE CONTR		***************************************	101101101101101101101	ADDRESS AND ADDRES
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		***************************************	***************************************	***************************************
***************************************	-	**************************************	**************************************	•

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

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