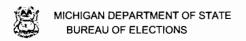


CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and co	l signed by andidate.	3. This Statement covers From	10/20/15	to 07/17	7/16		
1. Committee I.D. Number		Candidate Last Name		irst Name		M.I.	
137792		Tocco	Kathy			E.	
2. Committee Name		4a. Office Sought Including Dis		nity Served (If ap	plicable)		_
		District 11 County Co	mmissioner				~
Friends of Kathy Too	CO 	4b. County of Residence MA		I			
5. Committee's Mailing Address 31669 Kendall Fraser, Mi 48026 Area Code and Phone		6. Treasurer's Name & Reside Vincent J. Tocco 31669 Kendall Fraser, Mi 48026	ntial Address	HT, CLEMENS, H	HACOMB COUNTY	FILE	
If the address in this box is different from the comm mailing address on the Statement of Organization, be sent to this address by the filing official.		Area Code & Phone		CHIGA	ര∑ =		
7. Treasurer's Business Address 31669 Kendall Fraser, Mi 48026		8. Designated Record keeper' Designated Record keeper)	s Name and Maili	ng Address (Inth	₹ comm f	e has a	
Area Code and Phone (586) 293-0834		Area Code and Phone					
9. TYPE OF STATEMENT	T		9e. Dissolution	n of Candidate C	Committee		
9a. Pre-Election OR 9b. Post-Election Pre-Election or Post-Election Statement relates to:			by the committe by discharged a the committee.	g this item I/We ce to the candidate and forgiven, and The committee hees or has any out	e or his or no longer on nas no oust	her spouse collectible fi anding ass	e is here from
General Convention	October C	Quarterly	Further, if the dis	ssolution cannot l quest for the Rep	be granted orting Waiv	, that this b /er.	e
Special School	9c. Annua	al Statement () Coverage Year	Effect	ive date of dissol	ution		
Caucus	(Com	ndment to Campaign Statement plete Item 9a, 9b, 9c or 9e to te which Statement is being ded.)		osition of residual and the Summary F		t be reporte	ed on
Date of Election, Convention or Caucus							
08/02/16							
10. Verification: I\We certify that all reasonable diligmy\our knowledge and belief the contents are true,			ent and attached	schedules (if any) and to the	e best of	
Current Treasurer or Designated Record keeper Vincent J. To	ссо) Signature		Date	07/22/	2016	_
Candidate Kathy Tocco Type or Print Name		Kary For	TO	Date	07/22/	2016	
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							

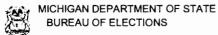


1. Committee I.D. Number 137792

1	37	7	9	2
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SUMMARY PAGE CANDIDATE COMMITTEE

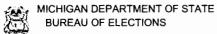
RECEIPTS	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 4,745.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ \$4,745.00	(18.) \$ \$4,745.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$4,745.00	(20.) \$ \$4,745.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$210.00	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ _\$689.00	
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.) \$	(23.) \$ \$689.00
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.)\$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)		(04) \$
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$	(24.) \$
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	(13.) \$_\$2,851.25	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$ \$4,745.00	
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$_\$7,596.25	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ \$689.00	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$6,907.25	•



CANDIDATE COMMITTEE

1. Committee I.D. Number _____137792

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)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 12/05/15 Name & Address:		
Peggy Ciarmitaro 19473 Candlelight Roseville, Mi 48066 5. If over \$100.00 cumulative, please provide:	§ 100	§ 100
Occupation Employer	Click Here to	r Memo Itemization
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/05/15 Name & Address		
David Flynn for County Commissioner 2957 Parkway Circle Sterling Heights, Mi 48310	_{\$} _100	_{\$} 100
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 12/07/15 Name & Address:		
Eleanor Tocco 37139 Aragona Dr N Clinton Township, Mi 48036	\$ 100 Click Here for	\$ 100
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 12/07/15 Name & Address		
Donna Biernat 39724 Berkely St Clinton Township, Mi 48038	_{\$} 30	_{\$} 30
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$330.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total	_
Pageof	Enter this total on line 3a of Summary Page.	

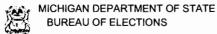


CANDIDATE COMMITTEE

1. Committee I.D. Number ___137792

2. Committee Name	Friends of Kathy Tocco
2. Committee Name	Friends of Kathy Tocco

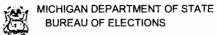
Enter contributor's name and address. If contribution is from an individual, enter last name, f middle initial. Check box to indicate if contribution is from a Political Committee or an Indepe Committee (PAC) Report <u>all</u> contributions regardless of amount.	
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 12/05/15 Name & Address:	
Dennis Bruck 19637 Lloyd Clinton Township, Mi 48038	_{\$} 30 \$_30
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 #2 PAC Receipt? YES 4. Date of Receipt 12/12/15 Name & Address	
Susan Doherty 31746 Gloria Warren, Mi 48093	_{\$} 50
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 12/12/15 Name & Address:	
Barbara Geck 39526 Waldorf Dr Clinton Township, Mi 48038 5. If over \$100.00 cumulative, please provide:	\$ 100 \$ 100 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 11/24/15 Name & Address	
Local #1 PAC - Michigan Education Association 38550 Garfield, Suite B Clinton Township, Mi 48038	§ 300
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	
F	Page Subtotal \$480.00
Grand Total of All S (Complete on last page	
Page of	Enter this total on line 3a of Summary Page.



1. Committee I.D. Number _____137792

CANDIDATE COMMITTEE

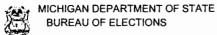
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 12/01/15 Name & Address:		
Renee Henderson		
2147 Bonnieview Dr	_{\$} 100	<u>,</u> 100
Royal Oak, Mi 48073	\$	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		1
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 11/27/15 Name & Address		
Charles Frontera	400	400
16640 Sarmurr	_{\$} 100	_{\$} 100
Roseville, Mi 48066		
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 11/21/15 Name & Address:		
Ed Bruley	° 100	100
38157 Radde St	\$ 100	_{\$_} 100
Clinton Township, Mi 48036	Click Here fo	r Memo Itemization
5. If over \$100.00 cumulative, please provide:	Olick Fiere to	TWEITE RETILEATION
Occupation Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 12/05/15 Name & Address		
Kenneth Pearl	0.0	
38316 Santa Barbara St	_{\$} 30	_s _30
Clinton Township, Mi 48036		
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
Page Subtota	\$330.00	
Grand Total of All Schedules 1A		-
(Complete on last page of Schedule	ــــــا (
Page 3 of 13	Enter this total on line 3a of Summary Page.	,



1. Committee I.D. Number _____137792

CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 12/05/15		
Name & Address: Veronica Klinefelt		
16143 Wilson Ave	30	<u>,</u> 30
Eastpointe, Mi 48021	_{\$} _30	\$ 50
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer	Olick Field R	or Wello Reliazation
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 11/30/15 Name & Address		
Roy Rose	5 0	5 0
55620 Woodridge Dr	_{\$} _50	_{\$} 50
Shelby Township, Mi 48316		
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		
Contribution # 3 PAC Receipt? YES 4. Date of Receipt 11/18/15 Name & Address:	-	
Francine Maisano	50	50
26740 Barbara St	_{\$} 50	_{\$_} 50
Roseville, Mi 48066	Click Here for	r Memo Itemization
5. If over \$100.00 cumulative, please provide:		THE
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 11/21/15 Name & Address		
Phil Smith	5 0	5 0
3865 Lone Pine Rd	_{\$} 50	_{\$_} 50
West Bloomfield, Mi 48323 5. If over \$100.00 cumulative, please provide:		
	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
Page Subtota	\$180.00	
Grand Total of All Schedules 1A	1	
(Complete on last page of Schedule	Enter this total on	
Page of	line 3a of Summary Page.	

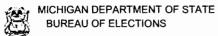


1. Committee I.D. Number _

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CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 12/04/15 Name & Address:		
John Axe		
21 Kerchival Ave Ste 360	_{\$} 30	<u>,</u> 30
Gross Pointe Farms, Mi 48236	\$	\$
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 #2 PAC Receipt? YES 4. Date of Receipt 12/04/15 Name & Address		
Lori Henderson	_s 200	_{\$} 200
2401 Harwood Ave	\$	\$
Royal Oak, Mi 48067	Oliak Hara fa	- Mama Itamization
5. If over \$100.00 cumulative, please provide: Occupation Attorney Employer Self-Employed	Click here to	r Memo Itemization
Business Address 21941 East 9 Mile Rd, St Clair Shores, Mi 48080		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 11/26/15 Name & Address:		
William D. Krull	_{\$} 30	_s 30
27829 Fountain St	\$	\$ <u></u>
Roseville, Mi 48066	Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 11/23/15 Name & Address		
Gary Cynowa		
45451 Fielding St	_{\$} 30	_{\$} 30
Macomb, Mi 48042		
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: V Direct Loan from a person V Fund Raiser		
Page Subtotal	\$290.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	J
Page of	line 3a of Summary Page.	



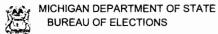
ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

DULE 1A 1. Committee I.D. Number

137792

MMITTEE	2. Committee Name	<u> </u>
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Enter contributor's name and address. If contribution is from an indivimiddle initial. Check box to indicate if contribution is from a Political 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 Name & Address:	Receip	11/20/15		
Carole Bannister 18877 Highlite Dr South Clinton Township, Mi 48035			_{\$} 30	_{\$} 30
5. If over \$100.00 cumulative, please provide:			Click Here fo	or Memo Itemization
Occupation Employer				
Business Address				
Type of Contribution: ✓ Direct Loan from a person	✓	Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Name & Address	Receipt	11/19/15		
Dominic Abbate 2500 Royak View Dr Oakland, Mi 48363			_{\$} _30	ş 30
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	V	Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Name & Address:	Receip	ot 11/19/15		
Diane M Irons 18656 Cranbrook Clinton Township, Mi 48038			\$ 30	§ 30
5. If over \$100.00 cumulative, please provide:			Click Here to	r Memo Itemization
Occupation Employer				
Business Address Type of Contribution: Direct Loan from a person	√	Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date on Name & Address	f Recei	pt 11/21/15		
Dolara Paull 38831 Townhall Harrison Township, Mi 48045			§ 30	_{\$_} 30
5. If over \$100.00 cumulative, please provide:			Click Here fo	r Memo Itemization
Occupation Employer			CHOIC FIOTO TO	
Business Address				
Type of Contribution: Direct Loan from a person	\checkmark	Fund Raiser		
		Page Subtotal and Total of All Schedules 1A ete on last page of Schedule)	\$120.00 Enter this total on	
Page 6 of 13			line 3a of Summary Page.	

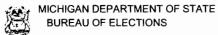


1. Committee I.D. Number _____137792

CANDIDATE COMMITTEE

2. Committee Name Friends of Kathy Tocco

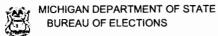
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 11/24/15 Name & Address:		
Dana Gire 37567 Radde	_{\$} 60	¢ 60
Clinton Township, Mi 48036	\$	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer	Olloik Fiore Te	i Weino Reinization
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/05/15 Name & Address		
Friends of Marvin Sauger 7290 Helen Contorling Mi 48015	_{\$} _50	_{\$} 50
Centerline, Mi 48015	Click Horo fo	r Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation Employer	Click nere to	i wemo itemization
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 12/05/15 Name & Address:		
Joanne Labret 2224 Sudbury Way	_{\$} 250	_{\$} 250
Bloomfield Hills, Mi 48304	Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please provide:		
Occupation Retired Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 11/21/15 Name & Address		
Friends of Macomb 39856 Brylor Ct Clinton Township, Mi 48038	_{\$} 500	_{\$_} 500
5. If over \$100.00 cumulative, please provide:	Click Horo for	Memo Itemization
Occupation Employer	Olick Flere for	Wello Remization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$860.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)]
Page 7 of 13	Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number _____137792

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 12/01/15		
Committee for Responsible Government 5802 Vincent Trl Shelby Township, Mi 48317 5. If over \$100.00 cumulative, please provide:	_{\$_} 100	_{\$} 100
Occupation Employer	Click Here f	for Memo Itemization
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/05/15 Name & Address		
Ken Lampar 43304 Vinsetta Dr Sterling Heights, Mi 48313	_{\$} _200	_{\$} 200
5. If over \$100.00 cumulative, please provide:	Click Here f	or Memo Itemization
Occupation Consultant Employer Self-Employed		
Business Address 43304 Vinsetta Dr, Sterling Hgts, Mi 48313		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 11/25/15 Name & Address:	-	
Dennis Morse 1695 Stanley Blvd Birmingham, Mi 48009	\$ 100	\$ 100 or Memo Itemization
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 11/30/15 Name & Address		
Bill Sowerby for Treasurer 37860 Saddle Lane Clinton Township, Mi 48036	_{\$} 30	_{\$} _30
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtota Grand Total of All Schedules 1A (Complete on last page of Schedule	4400.00	
Page 8 of 13	Enter this total on line 3a of Summar Page.	у



1. Committee I.D. Number ___137792

CANDIDATE COMMITTEE

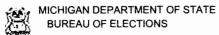
Enter contributor's name and address. If contribution is from an middle initial. Check box to indicate if contribution is from a Politi Committee (PAC) Report <u>all</u> contributions regardless of amount.	tical Committe		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ✓ YES 4. Da Name & Address:	te of Receipt	11/21/15		
Ann Tobin 1789 Brys Dr Gross Pointe, Mi 48236			_{\$} _100	_{\$} 100
5. If over \$100.00 cumulative, please provide:			Click Here fo	r Memo Itemization
Occupation Employer				
Business Address				
Type of Contribution: V Direct Loan from a pers	son 🗸	Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Dat Name & Address YES 4. Dat Address	ite of Receipt	12/05/15		
Beth Neubacher 37221 Evergreen Dr Sterling Heights, Mi 48310			_{\$} 250	_{\$} _250
5. If over \$100.00 cumulative, please provide:			Click Here for	r Memo Itemization
Occupation Insurance Sales Employer Mercury	y Insuranc	e (Home office)		
Business Address 37221 Evergreen Dr, Sterling Height	ts, Mi 483	10		
Type of Contribution: ✓ Direct Loan from a person	on 🗸	Fund Raiser		
Contribution # 3 PAC Receipt? YES 4. Da Name & Address:	ate of Receip	^t 11/17/15		
Rick Flynn 43225 Chardonnay Dr Sterling Heights, Mi 48314			_{\$} 250	_{\$} 250
5. If over \$100.00 cumulative, please provide:			Click Here for	Memo Itemization
Occupation Retired Employer				
Business Address Type of Contribution:	son 🗸	Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. D Name & Address	Date of Recei	pt 12/05/15		
Ken Debeaussaert 39856 Brylor Ct Clinton Township, Mi 48036			_{\$} 60	_{\$_} 60
5. If over \$100.00 cumulative, please provide:			Click Here for	Memo Itemization
Occupation Employer			CHON HELE IOI	MONIO ROMIZZATON
Business Address				
Type of Contribution: Vicet Loan from a pers	son 🗸	Fund Raiser		
		Page Subtotal nd Total of All Schedules 1A ete on last page of Schedule)	\$660.00 Enter this total on	
Page 9 of 13			line 3a of Summary Page.	



1. Committee I.D. Number ____137792

CANDIDATE COMMITTEE

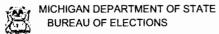
Enter contributor's name and address. If contribution is from an indivimiddle initial. Check box to indicate if contribution is from a Political Committee (PAC) Report all contributions regardless of amount.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Name & Address:	Receipt	11/20/15		
Tracey Yokich 22710 Gordon Switch St St Clair Shores, Mi 48081			_{\$} 50	_{\$} 50
5. If over \$100.00 cumulative, please provide:			Click Here	for Memo Itemization
Occupation Employer				
Business Address Type of Contribution: Direct Loan from a person	√	Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Name & Address	Receipt	12/05/15		
David Flynn 2957 Parkway Circle Sterling Heights, Mi 48310			_{\$} _100	_{\$} 100
5. If over \$100.00 cumulative, please provide:			Click Here f	or Memo Itemization
Occupation Employer				
Business Address				
Type of Contribution: Direct Loan from a person	\checkmark	Fund Raiser		
Contribution # 3 PAC Receipt? YES 4. Date of Name & Address:	f Receip	12/04/15		
Fred Miller 162 Riverside Dr Mt Clemens, Mi 48043			_{\$} 100	_{\$} 100
5. If over \$100.00 cumulative, please provide:			Click Here to	or Memo Itemization
Occupation Employer				
Business Address	√	Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date on Name & Address	of Recei	pt 12/05/15		
David Falk 116 Moross St Mt Clemens, Mi 48043			_{\$} 100	_{\$_} 100
5. If over \$100.00 cumulative, please provide:			Click Here fo	or Memo Itemization
Occupation Employer				
Business Address	<u> </u>	Fund Poisser		
Type of Contribution:	✓	Fund Raiser	10050 55	
		Page Subtotal nd Total of All Schedules 1A ete on last page of Schedule	Enter this total on	
Pageof			line 3a of Summar Page.	У



CANDIDATE COMMITTEE

2. Committee Name	Friends of Kathy Tocco
2. Committee Name	

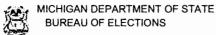
Enter contributor's name and address. If contribution is from an individual, enter last name, first a middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 11/23/15 Name & Address:	
Steven Malach 3910 Telegraph Rd Ste 200 Bloomfield Hills, Mi 48302	_{\$} 30 _{\$} 30
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 #2 PAC Receipt? YES 4. Date of Receipt 12/05/15 Name & Address	
Paul Cilluffo 31640 Cyril Fraser, Mi 48026	\$ 100 <u>\$ 100</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	_
Business Address	
Type of Contribution:	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 12/05/15 Name & Address:	
Mark Plawecki 26736 Cecile Dearborn Heights, Mi 48127	\$ 30 Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:	
Occupation Employer	
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 12/15/15 Name & Address	
Registrars PAC 1358 Abbott St Detroit, Mi 48226	_{\$} 250 <u>\$</u> 250
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution:	
Page Grand Total of All Sche (Complete on last page of S	
ing II of IO	Page.



1. Committee I.D. Number _____137792

CAND	DATE		ITTEE
CAND	IDATE	COMM)

Enter contributor's name and address. If contribution is from an individual, enter last name, middle initial. Check box to indicate if contribution is from a Political Committee or an Indep Committee (PAC) Report all contributions regardless of amount.	
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 12/27/15 Name & Address:	
Diane Bachmann 22517 E. 10 Mile Rd	_s 150 _s 150
St Clair Shores, Mi 48080	\$
5. If over \$100.00 cumulative, please provide: Occupation Retired Employer	Click Here for Memo Itemization
Business Address	
Type of Contribution: ✓ Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 12/24/15 Name & Address	
Nancy White 1516 Enyart Way Unit 204 Annapolis, Md 21409	<u>\$ 50</u> <u>\$ 50</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: ✓ Direct Loan from a person Fund Raiser	r
	·
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 01/03/16 Name & Address:	
Ann McCormick 15260 Windmill Dr	_{\$} 25 _{\$} 25
Macomb, Mi 48044	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Remization
Occupation Employer	
Business Address Type of Contribution:	er
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 01/25/16 Name & Address	
Rob Mijac 43710 Via Antinio Sterling Heights, Mi 48314	§ 30
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
	Page Subtotal \$255.00
Grand Total of All (Complete on last pag	ge of Schedule)
Page of	Enter this total on line 3a of Summary Page.



137792 1. Committee I.D. Number _

CANDIDATE COMMITTEE

2. Committee Name Friends of Kathy Tocco

	ox to indicate if cont	ribu	tion is from a Political C		enter last name, first name, tee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address;	PAC Receipt?		YES 4. Date of F	Receip	ot 03/13/16		
Doug Skrzyniar	Z						
14469 Maisano	Dr					_s 50	_e 50
Sterling Heights						\$	\$
5. If over \$100.00 cun	nulative, please pro	vid	e :			Click Here fo	r Memo Itemization
Occupation		-	Employer				
Business Address		_					
Type of Contribution:	✓ Direct		Loan from a person		Fund Raiser	·	
3. Contribution #2	PAC Receipt?		YES 4. Date of F	Receip	t		
Name & Address							
						•	
						\$	\$
5. If over \$100.00 cum	ulative, please pro	vid	9 :			Click Here for	r Memo Itemization
Occupation			nployer				
		•					
Business Address		_			Front Dalana		
Type of Contribution:		닏	Loan from a person	<u> </u>	Fund Raiser		
Contribution # 3 Name & Address:	PAC Receipt?	L	YES 4. Date of	Receip	ot		
						\$	\$
						Click Hore for	Memo Itemization
5. If over \$100.00 cum	nulative, please pro	vid	: :			Click Here lor	Memo itemization
Occupation		. 1	Employer				
Business Address							
Type of Contribution:	Direct		Loan from a person		Fund Raiser	****	
Contribution # 4 Name & Address	PAC Receipt?		YES 4. Date of	Recei	ipt		
Marile & Address							
						\$	\$
5. If over \$100.00 cum	nulative, please pro	vid	e:			Click Horo for	Memo Itemization
Occupation		-	Employer			Click Fiere for	Wellio Remization
Business Address							
Type of Contribution:	Direct	Γ	Loan from a person	П	Fund Raiser		
		_			Page Subtotal	\$50.00	
				Gro	and Total of All Schedules 1A	·	-
			(0		ete on last page of Schedule)	\$4,745.00 Enter this total on	J
Page1313	_					line 3a of Summary Page.	



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

133792

2. Committee Name Friends of Kathy Tocco

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Fraser Lions Club		07/15/16	s 100
Address	Purpose: Carnival Sign	Date	
34540 Utica Rd		dore for Mome	temization Type
Fraser, Mi 48026	p	Tere for Memo	temization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2		00/40/40	
Name US Postal Service		06/18/16	\$ 589
Address	Purpose: Pancake Breakfast	Date	
155 S. Main	Click t	Here for Memo	temization Type
Mount Clemens, Mi 48043			,,,
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name			\$
Address	Purpose:	Date	
	Click +	Here for Memo I	temization Type
	r	IN INIGINO	Tommanon Typo
C contract	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name			\$
Address	Purpose:	Date	
	, dipose.		
	Click I	Here for Memo	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name			_
Address	Purpose:	Date	\$
	Click	Here for Memo	Itemization Type
	Check box if this expenditure is payment of		,
Fund Raiser	debt or obligation reported on previous statement		
	Subto	otal this page	\$689.00
	Grand Total of all		\$689.00
	(Complete on last pag	e or schedule)	

Enter this total on line 8a of Summary Page

1 1 Page ____ of ___



ITEMIZED IN-KIND EXPENDITURES SCHEDULE 1B – IK

1. Committee I. D. Number

1	3	7	7	q	2
- 1	•			J	_

CANDIDATE COMMITTEE	CANDIDATE COMMITTEE 2. Committee Name Friends of Kathy Tocco					
Name and Address of person to whom goods or ervices were donated or transferred.	Type of In-Kind Expenditure (Check appropriate box and fill in description)	5. Date:	6. Fair Market Value			
xpenditure #1 ame & Address: (athy Tocco 1669 Kendall (raser, Mi 48026	4. Donation of goods or services to a Ballot Question Committee Donation of assets to tax exempt charitable Institution Donation of assets to Political Party Committee Other Description Donation of breakfast fundraiser	Date	210			
xpenditure #2 ame & Address:	4. Donation of goods or services to a Ballot Question Committee Donation of assets to tax exempt charitable institution Donation of assets to Political Party Committee Other Description:	Date Click Here for Memo Item				
xpenditure #3 ame & Address:	Donation of goods or services to a Ballot Question Committee Donation of assets to tax exempt charitable institution Donation of assets to Political Party Committee Other Description:	Date Click Here for Memo Item				
kpenditure #4 ·me & Address:	4. Donation of goods or services to a Ballot Question Committee Donation of assets to tax exempt charitable institution Donation of assets to Political Party Committee Other Description:	Date Click Here for Memo Item				
liture #5 L Address:	4. Donation of goods or services to a Ballot Question Committee Donation of assets to tax exempt charitable institution Donation of assets to Political Party Committee Other Description:	Date Click Here for Memo Item				
		Page Subtotal	\$210.00			
	Grand Tot	al of all Schedules 1B-IK	\$210.00			

Enter this total on line 7 of the Summary Page

(Complete on last page of Schedule)



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number

2. Committee Name 1 1101103 01 1701111 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
- USE A SEPARATE SHEET FOR EACH EVENT -							
3. Date Event Was Held	Number of Individuals Attending or Participating (whichever is greater)		5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held. Apple Annie's			
12/05/15		35	Breakfast	28030 Gratiot Roseville, Mi 48066 Private Residence			
7. Total Contributions		\$4,190.00					
8. Other Receipts							
9. Gross Receipts (Add lines 7 and 8)		\$4,190.00					
10. Total Cost of Event (Total Cost includes In-Kind Contributions		\$210.00 and All Expenditures	Made For the Event)				
11. Check if event was a jo	int fund ra	iser and complete the	following:				
Co-Sponsor(s)		Contribution Split (%)		Expenditure Split (%)			
	_						
	-						
				·			
	-						
	-						
	-						

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

Page of	Page	1	of 1	
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