

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

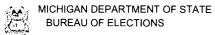
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by andidate.	3. This Statement covers From	05/01/16	to 07/17/16		
1. Committee I.D. Number	······································	4. Candidate Last Name	First Na	me	М.І.	
139420		Pozzi	Kristi		Ł	
		4a. Office Sought Including Dis	trict # or Community Se	rved (If applicable))	
2. Committee Name		Macomb Twp. Clerk				
CTE Kristi Pozzi		4b. County of Residence MA	COMB			
5. Committee's Mailing Address		6. Treasurer's Name & Reside	ntial Address			
47394 Rockwood Dr.		Harold Haugh				
Macomb, Mi. 48044		19464 Candlelight		- 200		
		Roseville, Mi. 48066	3	HAC.	16	
Area Code and Phone (586) 329-9111 If the address in this box is different from the commit	ittee				٥	
mailing address on the Statement of Organization, r be sent to this address by the filing official.		Area Code & Phone (586) 29		HEC.	22	!
7. Treasurer's Business Address		Designated Record keeper Designated Record keeper)	s Name and Mailing Add	dress (If the pound	nittee has	} }
19464 Candlelight		Designated Record Reeper)		2≺0	x	•
Roseville, Mi. 48066				¥c. E.S	$\ddot{\omega}$	
				A R	5	
				#		
				_		
Area Code and Phone (586) 296-6350		Area Code and Phone			_	
9. TYPE OF STATEMENT			9e. Dissolution of Ca	andidate Commi	ltee	
9a. X Pre-Election OR 9b. Post-Election		NLY if candidate ballot for the	By checking this it	em I/We certify a	ny outstandii	ng debt
Pre-Election or Post-Election Statement relates to:	current year	:	by the committee to the by discharged and forg	given, and no long	er collectible	from
	July Quar	terly	the committee. The co			ssets,
Primary			Owes no lates lees of n	as any oustanding	g debt.	
General	October C	Quarterly	Further, if the dissolution	on cannot be gran	ted, that this	be
Convention			considered a request fo	or the Reporting v	valver.	
Special	9c	al Statement ()				
School		Coverage Year	Effective date	e of dissolution		
Caucus	9d. Amer	ndment to Campaign Statement				
		plete Item 9a, 9b, 9c or 9e to ate which Statement is being	Note: The disposition of		nust be repo	rted on
	amen		Schedule 1B and the S	Summary Page.		
Date of Election, Convention or Caucus						
08/02/16						
AO MARGANIA BANGA ANG ANG ANG ANG ANG ANG ANG ANG ANG		in the appropriate of this statem		ulas (if any) and t	a the heat of	
10. Verification: IVWe certify that all reasonable dilige my\u00edour knowledge and belief the contents are true, a	ence was used accurate and c	omplete.	ent and attached schedt	lies (ii ariy) ario (o the best of	
Current Treasurer or Harold Haugh		1/ 1/2	12-01	7/01	2/2046	
Designated Record keeper	l 	, paroce	8 _ 0	Date	2/2016	
Type or Print Name		Signature	-			
Kristi Pozzi		Kust to	1/11	7/2	2/2016	
Candidate Type or Print Name		Signature	X7 -	Date		
Authority granted under P.A. 388 of 1976		 			, , , , , , , , , , , , , , , , , , , 	
• •		, , , , , , , , , , , , , , , , , , , ,				



SUMMARY PAGE **CANDIDATE COMMITTEE**

2. Committee Name CTE Kristi Pozzi

RECEIPTS	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 20,159.77	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$_\$20,159.77	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$20,159.77	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$18,889.82	
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.) \$ \$18,889.82	(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.)\$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	(24.) \$
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$	(24.) \$
a. Owed by the Committee (Schedule 1E)	(12a.) \$ \$7,000.00	
b. Owed to the Committee (Schedule 1E)		
	(12b.) \$ BALANCE STATEMENT	<u> </u>
13. Ending Balance of last report filed	(13.) \$ \$0.00	_
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$ \$20,159.77	
(Line 5, Total Contributions & Other Receipts)	(15.) = \$_\$20,159.77	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period		_
(Add lines 9 and 11)	(16.) - \$ \$18,889.82	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$1,269.95	_•



CANDIDATE COMMITTEE

1. Committee I.D. Number 139420

2. Committee Name CTE Kristi Pozzi

CANDIDATE COMMITTEE 2. Committee Name	C 12/13/1	1000
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 6/9/2016 AND THEW HAUGH 30563 HIDDEN PINES LANE 1(05eville, MI 48066 5. If over \$100.00 cumulative, please provide: Occupation ADMINISTRATOR Employer WAYNE County Business Address 500 Grision Direct Loan from a person Fund Raiser	\$ <u>500,00</u> Click Here for	\$ Memo Itemization ▼
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 6/9/2016 Name & Address RYAN HAULH 13966 Breezy 57621NC Heights, MI 48315 5. If over \$100.00 cumulative, please provide: Occupation MANACEL Employer MICHIGAN TETHER Business Address 43600 ELIZABETH RD CUNTIN TWSP Type of Contribution: Direct Loan from a person Fund Raiser	\$ <u>\$00.00</u> Click Here for	\$ Memo Itemization ☑
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 6/9/2016 Name & Address: CATHY If AUGH GYGY CANDIELIS IT KOSEVII/E M' 48016 5. If over \$100.00 cumulative, please provide: Occupation Council MAN Employer CIFY of Lose VII/E Business Address 29777 GIATIOT RSVL Type of Contribution: Direct Loan from a person Fund Raiser	\$ <u>500.00</u> Click Here for	\$ Memo Itemization ▼
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 6/9/2016 Name & Address If ARCLD ITA46H I 9464 CANDLE 45ht RSVL, MI 48016 5. If over \$100.00 cumulative, please provide: Occupation Refired Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	\$ 300.00 Click Here for	\$ Memo Itemization ▼
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page	Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

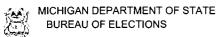
1. Committee I.D. Number 139420

2. Committee Name CTE Kristi Pozzi

Enter contributor's name and address. If contribution is from an individual, enter last name, first namiddle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	me, 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/07/16 Name & Address: Robert Hindman 49522 Keycove St Chesterfield, MI 48047	 §_200.00
5. If over \$100.00 cumulative, please provide:	
Occupation DWNER Employer American Graphics	Click Here for Memo Itemization
Business Address 34895 Growsbeck CLINTON TWEP. 48036	_
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/08/16 Name & Address	
Lawrence Scott 12900 HALL RD. SUIFE 350	_{\$} 100.00
SUITE 930 STERLING HTS, TT, 48313 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 06/01/16 Name & Address:	
Robert Mixa 5321 S. Nocturne Ln Shelby Twp, MI 48316	<u>\$60.00</u> <u>\$</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	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/09/16 Name & Address Whitney Standhardt 2414 E Lincoln Ave Royal Oak, MI 48067	
5. If over \$100.00 cumulative, please provide:	Click Horo for Maria Hamiratian
Occupation Employer	Click Here for Memo Itemization ——
Business Address	_
Type of Contribution: Direct Loan from a person Fund Raiser	
Page S	ubtotal 390.00
Grand Total of All Schedu	
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Page 2 of 25

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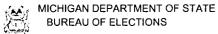
CANDIDATE COMMITTEE

1. Committee I.D. Number

139420

CTE Kristi Pozzi

	x to indicate if cont	ribu	tion is from a Political Co		iter last name, first name, see or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Michael Sposita 2521 Heritage C Milford,MI 4838			YES 4. Date of R	Receipt	06/09/16	§30.00	
5. If over \$100.00 cum		vid	ə :			•	
			Employer			Click Here fo	or Memo Itemization
Business Address							
Type of Contribution:	Direct		Loan from a person	'	Fund Raiser		
Contribution #2 Name & Address	PAC Receipt?		YES 4. Date of R	eceipt	06/09/16		
Thomas Kuebes 4660 Mill Creek Rochester, MI 4	Ct					§30.00	\$
5. If over \$100.00 cum		vide	: :			Click Here fo	r Memo Itemization
Occupation		_ Er	nployer		-		
Business Address							
Type of Contribution:	Direct		Loan from a person	V	Fund Raiser		
Contribution # 3 Name & Address:	PAC Receipt?		YES 4. Date of F	Receip	06/09/16		
Sharon Maas 52225 Marcello Macomb, MI 48						§30.00	\$
5. If over \$100.00 cum	ulative, please pro	vid	: :			Click Here fo	r Memo Itemization ▼
Occupation		_ [Employer				
Business Address Type of Contribution:	Direct		Loan from a person	~	Fund Raiser		
Contribution # 4 Name & Address	PAC Receipt?		YES 4. Date of	Receip	ot <u>06/09/16</u>		
Jan Haggerty 18710 Rockport Roseville, Mi 48						§30.00	\$
5. If over \$100.00 cum	ulative, please pro	vid	e ;			Click Here fo	r Memo Itemization
Occupation		_	Employer				L
Business Address							
Type of Contribution:	Direct		Loan from a person	~	Fund Raiser		
Page 3 of 25	•		(0		Page Subtotal nd Total of All Schedules 1A te on last page of Schedule)	Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number _

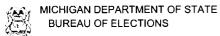
139420

CTE Kristi Pozzi

3. Contribution # 1 PAC Receipt?		ox to indicate if con	tribution is from a	Political Comm	enter last name, first na ittee or an Independent		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Click Here for Memo Itemization Susiness Address Click Here for Memo Itemization Click Here for Memo Itemization	Name & Address: Patricia Pelleccl 43233 Hillcrest	nia Dr	YES 4	I. Date of Rece	ipt 06/09/16		_{\$} 30.00	\$
Direct Loan from a person	5. If over \$100.00 cum	ulative, please pr	ovide:				Click Here fo	r Memo Itemization
Type of Contribution: Direct Loan from a person	Occupation		Employer				Ollok Fiere to	I Wello Remization
Name & Address Craig Pearce 20320 Ballantrae Dr Macomb, MI 48044 5. If over \$100.00 cumulative, please provide: OccupationEmployer		Direct	Loan from a	person	Fund Raiser			
20320 Ballantrae Dr Macomb, MI 48044 5. If over \$100.00 cumulative, please provide: CccupationEmployer	Name & Address	PAC Receipt?	YES 4	. Date of Rece	pt 06/09/16			
DoccupationEmployer	20320 Ballantra						\$30.00	\$
Business Address Type of Contribution: Direct Loan from a person	5. If over \$100.00 cum	ulative, please pro	ovide:				Click Here fo	r Memo Itemization ▼
Type of Contribution: Direct Loan from a person V Fund Raiser 3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/09/16 Michael Gustafson 47310 Rockwood Dr Macomb, MI 48044 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person V Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/09/16 Name & Address Annmarie Farchone 50819 Lempke New Baltimore, MI 48047 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization V \$30.00 \$ Click Here for Memo Itemization V	Occupation		Employer			=		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/09/16 Name & Address: Michael Gustafson 47310 Rockwood Dr Macomb, MI 48044 5. If over \$100.00 cumulative, please provide: Occupation Employer	Business Address				_			
Michael Gustafson 47310 Rockwood Dr Macomb, MI 48044 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct	Type of Contribution:	Direct	Loan from a	person 🗸	Fund Raiser			
47310 Rockwood Dr Macomb, MI 48044 5. If over \$100.00 cumulative, please provide: Occupation Employer	l	PAC Receipt?	YES	4. Date of Rece	eipt 06/09/16	 		
5. If over \$100.00 cumulative, please provide: Occupation	47310 Rockwoo	od Dr					\$30.00	\$
Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/09/16 Name & Address Annmarie Farchone 50819 Lempke New Baltimore, MI 48047 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization	5. If over \$100.00 cum	ulative, please pro	ovide:				Click Here for	Memo Itemization ▼
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/09/16 Name & Address Annmarie Farchone 50819 Lempke New Baltimore, MI 48047 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization	Occupation		Employer					
Name & Address Annmarie Farchone 50819 Lempke New Baltimore, MI 48047 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization	l	Direct	Loan from a	person	Fund Raiser	_		
50819 Lempke New Baltimore, MI 48047 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization	ł	PAC Receipt?	YES	4. Date of Rec	eipt 06/09/16			
Click Here for Memo Itemization	50819 Lempke						§30.00	\$
	5. If over \$100.00 cum	ulative, please pr	ovide:				Click Here for	Memo Itemization
	Occupation		Employer				Chok Holo lol	Momo Romization
Business Address	Business Address							
Type of Contribution: Direct Loan from a person Fund Raiser	Type of Contribution:	Direct	Loan from a	person 🗸	Fund Raiser			•
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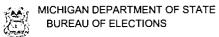


CANDIDATE COMMITTEE

1. Committee I.D. Number _____139420

CTE Kristi Pozzi

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/09/16 Name & Address: Patricia Toscano 33759 Pine Ridge Dr W	§ 30.00	_
Fraser, MI 48026	<u>\$ 00.00</u>	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	or Memo Itemization 🔻
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/09/16 Name & Address		
Richard Heinz 19926 Townsend Dr Macomb Twp, MI 48044	_{\$} 30.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/09/16		
Alan Haugh 20301 Yale St St. Claire Shores, MI 48081	_{\$} 50.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here to	Memo Itemization ▼
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/09/16 Name & Address		
Raymond Contesti 39209 Columbia St Harrison Twp, MI 48045	_{\$} 50.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization ▼
Occupation Employer	CHCK TIETE TO	Wellio Remization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 5 of 25	Enter this total on line 3a of Summary Page.	



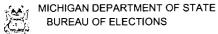
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1. Committee I.D. Number _

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2. Committee Name CTE Kristi Pozzi

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/09/16 Name & Address: Thomas Cavanaugh, Fr. 47198 Rockwood Dr Macomb Twp, MI 48044	_{\$} 60.00	\$
5. If over \$100.00 cumulative, please provide:	Clieb Lloro fe	Name Heminetian
Occupation Employer	Click Here to	or Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/09/16 Name & Address		
Colleen McCartney 27861 Brinker Roseville, MI 48066	_{\$} 60.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/09/16 Name & Address:	****	
Michael Logghe 16062 Blue Spruce Ln Clinton Twp, MI 48035	§ 60.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization ▼
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/09/16 Name & Address Michael Busch 20021 Wallace Roseville, MI 48066	_{\$} 60.00	\$
5. If over \$100.00 cumulative, please provide:	Cliek Here fo	- Mama Itamization
Occupation Employer	Click Here to	r Memo Itemization ▼
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 6 of 25	Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

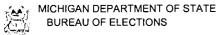
139420 1. Committee I.D. Number

CTE Kristi Pozzi

	ox to indicate if contri	ontribution is from an indivi ibution is from a Political C egardless of amount.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Evans Pozios 19460 Concetta Macomb, MI 48		YES 4. Date of	Receip	06/09/16	_{\$} 60.00	\$
5. If over \$100.00 cum	ulative, please prov	vide:			Click Haro f	or Memo Itemization
Occupation		Employer		·····	Click Hele I	or Memo Remization
Business Address				<u> </u>		
Type of Contribution:	Direct	Loan from a person	1	Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	YES 4. Date of	Receip	t <u>06/09/16</u>		
Marco Mazzola 47299 Anchor D Macomb, MI 48					_{\$} 60.00	\$
5. If over \$100.00 cum	ulative, please prov	vide:			Click Here for	or Memo Itemization 🔻
Occupation		Employer				
Business Address		_				
Type of Contribution:	Direct	Loan from a person	1	Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YES 4. Date of	Recei	ot 06/09/16	-	
Justine Vetor 14650 25 Mile R Shelby Twp, Ml					_{\$} 60.00	_ \$
5. If over \$100.00 cum	ulative, please prov	vide:			Click Here fo	or Memo Itemization ▼
Occupation		Employer				
Business Address						
Type of Contribution:	Direct	Loan from a person	4	Fund Raiser		
3. Contribution # 4 Name & Address Dominic Misurad 48181 Valley Fo Macomb, MI 48	rge	YES 4. Date o	f R e ce	pt <u>06/09/16</u>	_§ 60.00	_
5. If over \$100.00 cum	ulative, please prov	vide:			Click Here fo	or Memo Itemization
Occupation		Employer			ORON HOLE IC	A MONIO ROMIZATION
Business Address						
Type of Contribution:	Direct	Loan from a person	V	Fund Raiser		
				Page Subtota	240.00	
				and Total of All Schedules 1A		
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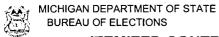


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139420 1. Committee I.D. Number

2. Committee Name CTE Kristi Pozzi

	ox to indicate if conf	ribu	bution is from an individual, enter last name, first name, tion is from a Political Committee or an Independent rdless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Laura Keeth 26541 Laurie Ct Woodhaven, MI			YES 4. Date of Receipt <u>06/09/16</u>	_{\$} 100.00	\$
5. If over \$100.00 cum	ulative, please pro	vid	9:	Olinta I I ann f	
Occupation		_	Employer	Click Here to	or Memo Itemization
Business Address					
Type of Contribution:	Direct		Loan from a person Fund Raiser		
Contribution #2 Name & Address	PAC Receipt?		YES 4. Date of Receipt <u>06/04/16</u>		
Eric Peterson 415 North Van I Kansas City, M				<u>\$ 100.00</u>	\$
5. If over \$100.00 cum	ulative, please pro	vide	::	Click Here fo	r Memo Itemization ▼
Occupation		_ Er	nployer		_
Business Address					
Type of Contribution:	Direct		Loan from a person Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?		YES 4. Date of Receipt 06/09/16		
John Chirkun 31229 Merrily Roseville, MI 4	8066			<u>\$ 100.00</u>	s 200.00
5. If over \$100.00 cum	ulative, please pro	vid	: :	Click Here fo	r Memo Itemization ▼
Occupation State R	epresentative	<u> </u>	Employer		
Business Address					
Type of Contribution:	Direct		Loan from a person Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?		YES 4. Date of Receipt <u>06/09/16</u>		
Christopher Car 24863 Crocker Harrison Twp, N	•			_{\$} 100.00	\$
5. If over \$100.00 cum	ulative, please pro	vid	9 :	Click Horo fo	r Mama Itamization
Occupation		_	Employer	Click Here to	r Memo Itemization
Business Address			_		
Type of Contribution:	Direct		Loan from a person Fund Raiser		
			Page Subtota	400.00	
			Grand Total of All Schedules 1A (Complete on last page of Schedule		
Page <u>\$</u> of <u>25</u>	<u>-</u>			line 3a of Summary Page.	,

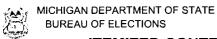


CANDIDATE COMMITTEE

1. Committee I.D. Number 139420

2. Committee Name CTE Kristi Pozzi

Enter contributor's nam- middle initial. Check be Committee (PAC) Repo	x to indicate if contr	ibutio	on is from a Political Co		ter last name, first name, se or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Robert Taylor 8 30 3 HA 2 Zoseville / 2 5. If over \$100.00 cumo	1 4806b	vide:		eceipt	06/09/16	\$	\$ or Memo Itemization ▼
Business Address Type of Contribution:	Direct		oan from a person		Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	_			06/09/16	<u></u>	
Madelyn Pozzi 53887 Sunderlai Shelby Twp, MI						_{\$} 100.00	\$
5. If over \$100.00 cumu Occupation real esta			oloyer Century 21			Click Here fo	r Memo Itemization
Business Address			, , , , , , , , , , , , , , , , , , , ,				
Type of Contribution:	Direct	L	oan from a person	V	Fund Raiser		
3. Contribution # 3 Name & Address: Raymond Herna 41704 Fairmouth Clinton Twp, MI 5. If over \$100.00 cums Occupation	n Park Dr 48038	رناde:				\$ 100.00 Click Here for	\$ Memo Itemization ▼
Business Address Type of Contribution:	Direct	L	oan from a person	V	Fund Raiser		
3. Contribution # 4 Name & Address Kristin Haugh 18292 Port Sale Macomb, MI 480 5. If over \$100.00 cum	44 ulative, please pro	vide:		Receip	t 06/09/16	\$100.00 Click Here for	\$ Memo Itemization ▼
Occupation Manag	er	~	Employer Kroger				(manual)
Business Address Type of Contribution:	Direct		_oan from a person	V	Fund Raiser		
Page 9 of 25	-		(C		Page Subtotal Ind Total of All Schedules 1A te on last page of Schedule)	Enter this total on line 3a of Summary Page.	_



CANDIDATE COMMITTEE

1. Committee I.D. Number _____139420

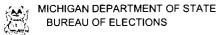
2. Committee Name CTE Kristi Pozzi

5/4(15)15/(12 55)11/11/12		
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/09/16 Jame & Address: Sheila Bucci 56490 Fairchild Rd Macomb, MI 48042	_{\$} 100.00	\$
5. If over \$100.00 cumulative, please provide: Occupation Judicial Service Officer Employer Circuit Court	Click Here for	Memo Itemization
Business Address		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/09/16 Address		
Kathy Hessler 23771 Harrellson St Macomb, MI 48042	<u>\$ 100.00</u>	\$
5. If over \$100.00 cumulative, please provide: Occupation Medical Enforcement Employer Circuit Court	Click Here for	Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/09/16		
Phillip Hernandez 30698 N. River Rd Harrison Twp, MI 48045	_{\$} 125.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Susiness Address 1990 E. 9 Mile Rd. St Clair Shors, Mile Representation: Direct Loan from a person Fund Raiser	48080	
Asme & Address PAC Receipt? YES 4. Date of Receipt 06/09/16		
Donald Broussard 18736 Lafayette Macomb, MI 48044	_{\$} 150.00	\$
5. If over \$100.00 cumulative, please provide: Occupation Plant M&R Employer PTM CORP.	Click Here for	Memo Itemization
Business Address 6560 Bethuy Rd. TLA Twf, MI 48023 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	475.00	
Grand Total of All Schedules 1A	7 70.00	•

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(Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.



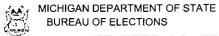
CANDIDATE COMMITTEE

1. Committee I.D. Number 139420

Committee Name CTE Kristi Pozzi

CANDIDATE COMMITTEE 2. Committee Name		<u> </u>
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/09/16 Name & Address: Joseph Lentine 5843 Juliann Ct Washington Twp, MI 48094	_{\$} 200.00	\$
5. If over \$100.00 cumulative, please provide:	Oliala I I ama ɗa	- M #
Occupation OWNER Employer LECOM	Click Here to	r Memo Itemization
Business Address 29377 HODVER Rd. WARREN 48093		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/09/16 Name & Address		
Frank Pozzi 53265 Wolf Dr Shelby Twp, MI 48316	_{\$} 250.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization ▼
Occupation retired Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 Name & Address: J ORAM PO Box 252755 West Bloomfield, MI 48325 5. If over \$100.00 cumulative, please provide: Occupation OWNER Employer SELF Business Address P.O. BOX 252755 W. BLOOMFIELD 483- Type of Contribution: Direct Loan from a person Fund Raiser		\$ Memo Itemization ▼
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/09/16 Name & Address Kerlin Blaise 17786 Parkshore Dr Northville, MI 48168 5. If over \$100.00 cumulative, please provide:	§500.00	\$
Occupation owner Employer Blaze Contracting	Click Here for	Memo Itemization
Business Address 5640 57. SEAN DETROIT 482/3 Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	1250.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Enter this total on line 3a of Summary Page.



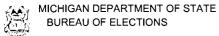
CANDIDATE COMMITTEE

1. Committee I.D. Number

139420

CTE Kristi Pozzi

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/09/16 Name & Address: Jesse Berger 26351 - 25 Mile Rd Chesterfield, MI 48051	_{\$} 30.00	\$
5. If over \$100.00 cumulative, please provide:	Clieb Horn fo	Name Itemiration
Occupation Employer	Click Here it	or Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/01/16 Name & Address		
Thomas Guastello 34120 Woodward Birmingham, MI 48009	_{\$} 100.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		_
Business Address		j
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/31/16 Name & Address:		
Timothy Haugh 8178 Sunburst Centerline, MI 48015	\$30.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization ▼
Occupation Employer		
Business Address		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/02/16 Name & Address Jere Diebold 3393 Round Tree Cir China Twp, MI 48054	_{\$} 30.00	\$
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here to	r Memo Itemization ▼
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	190.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary	
Page 12 of 25	Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number <u>1394</u>20

2. Committee Name

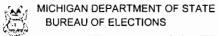
, I E	E Kristi Pozz	ZI
	6. Amount	7. Cumulative for

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/09/16 Name & Address: Vincenzo Galati 49695 Golden Park Dr Shelby Twp, MI 48315	_{\$} 500.00	\$
5. If over \$100.00 cumulative, please provide: Occupation Owner Employer excel homes inc. Business Address 52796 FLURENCE D1. SHELBY TWSf. 485		r Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser		,
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/03/16 Name & Address Jack Grillo 23943 Hagen Rd Macomb, MI 48042	\$ 100.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization ▼
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/27/16 Name & Address: Melissa King 34222 Pioneer Fraser, MI 48026 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	\$ 100.00 Click Here for	\$ Memo Itemization ▼
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/25/16 Name & Address Roy Rose 55620 Woodbridge Dr Shelby Twp, MI 48316 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Fund Raiser	s 100.00 Click Here for	\$Memo Itemization
Page Subtotal Grand Total of All Schedules 1A	800.00	

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Enter this total on line 3a of Summary Page.



CANDIDATE COMMITTEE

1. Committee I.D. Number _

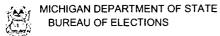
13940

2. Committee Name CTE Kristi Pozzi

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	6. Amount	7. Cumulative for Election Cycle for Each
Committee (PAC) Report <u>all</u> contributions regardless of amount.		Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/30/16 Name & Address: Ryan Plovie 47170 Rockwood Dr		
Macomb, MI 48044	_{\$} 200.00	\$
5. If over \$100.00 cumulative, please provide: Occupation financial advisor Employer merrill Lynch	Click Here fo	r Memo Itemization
Business Address 47/70 ROCKWOOD Dr. MACOMB 48044 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/25/16 Name & Address		
Timothy Tomlinson 42850 Garfield Ste 101 Clinton Twp, MI 480388	_{\$} 500.00	\$
5. If over \$100.00 cumulative, please provide:		r Memo Itemization
Occupation attorney Employer YORK, POLAN, TONLINSON Business Address 42850 GARFIELD RD. SAITE IOL CLINION TWS	. VUn28	
	ip 78430	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/26/16 Name & Address:		
James Stajos 3011 Crofton Dr. Dewitt , MI 48820	§ 250.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation OいルER Employer SELF		
Business Address 3011 CLOFTON DI. DOWITT HI 48820 Type of Contribution: Direct Loan from a person V Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/24/16 Name & Address		
Dennis J. Morier 23636 West Lake Cr Brownstown, MI 48183	_{\$} 500.00	\$
5. If over \$100.00 cumulative, please provide: Occupation SELF EmployerOUNER	Click Here for	Memo Itemization
Business Address 601 Abbott Detroit 48120		
Type of Contribution: Direct Loan from a person Fund Raiser Page Subtotal	1450.00	
Grand Total of All Schedules 1A	7750.00	-
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line 3a of Summary Page.



CANDIDATE COMMITTEE

1. Committee I.D. Number _

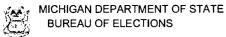
13940

2. Committee Name CTE Kristi Pozzi

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/25/16 Name & Address: Alice Slavin 39394 Wanda Ave Sterling Heights, MI 48313	_{\$} 30.00	₩
5. If over \$100.00 cumulative, please provide:	Clink Lloro fo	Mama Itamization
Occupation Employer	Click Here to	or Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/24/16 Name & Address		
Raymond Haugh 641 Gravel Ridge Rd Leonard, MI 48367	_{\$} 100.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization 🔻
Occupation EmployerTino's maintenance		_
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/24/16 Name & Address:		
Sherry Truman 36636 Main St New Baltimore, MI 48047	\$30.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/26/16 Name & Address		
Angelo Fabiilli 50946 N, Hampton Ct Macomb Twp, MI 48044	_{\$} 30.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		William Remization
Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	/90.00	

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line 3a of Summary Page.



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ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number

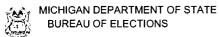
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CTE Kristi Pozzi 2. Committee Name

Enter contributor's nan middle initial. Check b Committee (PAC) Rep	ox to indicate if cont	ribution is fro	m a Political (nter last name, first name, ee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Kathleen Mazza 825 Lakeland A Grosse Pointe,	ve	YES	4. Date of	Receipt	06/09/16	_{\$} 50.00	\$
5. If over \$100.00 cum	ulative, please pro	vide:					
Occupation		_ Employe	r			Click Here to	or Memo Itemization
Business Address					•		
Type of Contribution:	Direct	Loan fro	om a person	~	Fund Raiser		
Contribution #2 Name & Address	PAC Receipt?	YES		Receipt	06/10/16		
Larry Kuzak 2544 Summerlir Rochester Hills,						_{\$} 100.00	\$
5. If over \$100.00 cum	ulative, please pro					Click Here fo	or Memo Itemization
Occupation		_ Employer_	ousiness	owne	Γ		
Business Address							
Type of Contribution:	Direct	Loan fro	m a person	V	Fund Raiser		
3. Contribution # 3 Name & Address: Daniel Fitzgeral 15845 Frisco Di Macomb, MI 48	•	YES	4. Date of	f Receip	06/09/16	_{\$} 75.00	\$
5. If over \$100.00 cum		vide:				Click Here for	r Memo Itemization ▼
Occupation		_ Employer					
Business Address	—] _D						
Type of Contribution:					Fund Raiser		
3. Contribution # 4 Name & Address Stephen Saph, Jr. 44 Macomb Pl. P.O. Box 46907 Mt. Clemens, MI 4 5. If over \$100.00 cum Occupation Address	nulative, please pro	vide:	huoina		vner	\$100.00 Click Here for	\$ r Memo Itemization ▼
Business Address Type of Contribution:	Direct	L oan fro	om a person	V	Fund Raiser		
Type of Continuation.	☐ pilect	L	a porson		Page Subtotal	325.00	
				Grad	nd Total of All Schedules 1A	343,00	-
					ete on last page of Schedule)	Enter this total on	_



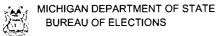
CANDIDATE COMMITTEE

1. Committee I.D. Number __13940

Page.

2. Committee Name CTE Kristi Pozzi

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/09/16 Name & Address: Jennifer Vazana 47366 Rockwood Dr		
Macomb, MI 48044	_s 200.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation project manager Employer Blue Cross Blue Shield	Olick Fiere to	I Wello Remization
Business Address 600 E. LAFAYETTE DETRUIT 48226		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/24/16 Name & Address		
Nancy Haugh 29230 Nottingham Circle West Warren, MI 48092	\$30.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		لبسا
Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/21/16 Name & Address:		
Michael Mione 41260 Donna Dr CLinton Twp, MI 48038	§ 30.00	\$ F
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 V Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/14/16 Name & Address Gerald Brzezinski 7171 Golden Eagle Ct Apt 1113 Fort Meyers, FL 33912	_{\$} 50.00	\$
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here for	Memo Itemization ▼
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
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Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	j



CANDIDATE COMMITTEE

1. Committee I.D. Number _

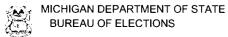
13940

2. Committee Name CTE Kristi Pozzi

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/17/16 Name & Address: Thomas Mazzola 60 S Deeplands Grosse Pointe, MI 48236	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:	Click Horo for Mama Itamization
Occupation State Farm	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 06/16/16 Name & Address	-
Hank Riberas 4607 BARCROFT WAY 67. Heights 48310	<u>\$250.00</u> <u>\$</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization ▼
Occupation ADMINISTRATUR Employer RUNCELLI CONST.	
Business Address 6471 METRO PARK WY. STERLING 1415 48312	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 06/16/16 Name & Address:	_
Gregory Bischer 20417 Windham Drive Macomb, MI 48044	\$ 100.00 \$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization ▼
Occupation Employer Great Lakes Recycling	
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/17/16 Name & Address	-
Kimberely Enders 56859 Aberdeen Dr Shelby Twp, MI 48316	_{\$} 100.00 _{\$}
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization ▼
Occupation Employer	- Click Here for Wellio Remization
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
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Grand Total of All Schedules 1 (Complete on last page of Schedu	A

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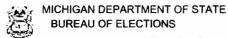
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CANDIDATE COMMITTEE

1. Committee I.D. Number 139420
2. Committee Name CTE KRISTI POZZI

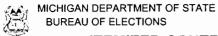
	x to indicate if conti	ibution is from a Political		nter last name, first name, ee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: BRETT HAUK 16514 GIGN CUINTON TWP 5. If over \$100.00 cumo			f Receipt	6/9/16	\$ 60.00	\$or Memo Itemization
Occupation		_ Employer			Click Here it	or Memo Remization
Business Address						
Type of Contribution:	Direct	Loan from a person	V	Fund Raiser		
3. Contribution #2 Name & Address JEVONA W 19327 Sai Detroit, M	PAC Receipt? [27SOM nta RUSA 1 48221	YES 4. Date o	f Receipt	6/9/16	\$ 30.00	\$
5. If over \$100.00 cum	ılative, please pro	vide:			Click Here fo	or Memo Itemization
Occupation		Employer				
Business Address						
Type of Contribution:	Direct	Loan from a person	W	Fund Raiser		
Rusiness Address	INBYOOK P, MI 482 Ilative, please pro	어		1 6/9/16	\$ 50.00 Click Here fo	\$r Memo Itemization
Type of Contribution:	Direct	Loan from a person	abla	Fund Raiser		
3. Contribution #4 Name & Address Kuthy Hes 23771 Ha Mucomb, 1 5. If over \$100.00 cum	PAC Receipt? Sleve rrelson MJ 480 4 Ulative, please pro	2	of Recei	ot 6/9/16	\$ 100.0	
					Click Here fo	r Memo Itemization
Occupation		_ Employer				
Business Address						
Type of Contribution:	Direct	Loan from a person	V	Fund Raiser		
Page / 9 of 25	-			Page Subtotal and Total of All Schedules 1A ate on last page of Schedule)	Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number 139420
2. Committee Name CTE KRUSTI POZZI

	to indicate if contri	ontribution is from an individu ibution is from a Political Cor egardless of amount.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: SONIA LUC 49 038 DU Macomb, 1	PAC Receipt?	YES 4. Date of Re	eceipt	6/9/16	s (30. 00	\$
5. If over \$100.00 cumu					Click Here fo	r Memo Itemization
Occupation		Employer			Olick Here to	Wello Rellization
Business Address						
Type of Contribution:	Direct	Loan from a person	V	Fund Raiser		
3. Contribution #2 Name & Address Leslic Reir 36853 Sc Stevling Hts	PAC Receipt? [TIOK TI	YES 4. Date of Re	eceipt	6/9/16	s 40.00	\$
					Office Have Co	
5. If over \$100.00 cumu					Click Here to	Memo Itemization
Occupation		Employer				
Business Address				_		
Type of Contribution:	Direct	Loan from a person	W	Fund Raiser		
	oore, PI/ 4	vide: Employer			\$ 30.00 Click Here for	\$Memo Itemization
Business Address Type of Contribution:	Direct	Loan from a person	W	Fund Raiser		
3. Contribution # 4 Name & Address Shoppy TVU 3 16636 Me New Baltit 5. If over \$100.00 cumu	PAC Receipt? Lman 2 in St. More, MI	☐ YES 4. Date of F 48047	Receip	6/9/16	s	\$ Memo Itemization
Occupation		_ Employer				
Business Address						
Type of Contribution:	Direct	Loan from a person	TY	Fund Raiser		
Page 20 of 25				Page Subtotal d Total of All Schedules 1A te on last page of Schedule)	Enter this total on line 3a of Summary Page.	



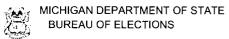
CANDIDATE COMMITTEE

1. Committee I.D. Number ____13940

Page.

2. Committee Name CTE Kristi Pozzi

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/16/16 Name & Address: Robert Synod 38500 TRILLIUM	E00.00	
HARRISON TWSP. 48005	_{\$} 500.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization ▼
Occupation business owner Employer REDEMPTIVE MEDICAL EAST.	Click Here to	i Memo itemization
Business Address 16190 13 MI RD. RSVL 48066		
Type of Contribution: Direct Loan from a person V Fund Raiser		
3. Contribution #2 PAC Receipt? VYES 4. Date of Receipt 7/16/2016 Name & Address MARILYN LANE CLANE PAC) 16558 WOUDLANE		
16558 WODDLANE	~	
FRASER, MI 48026	\$ 500.0E	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization ▼
Occupation STATE REP. Employer STATE OF MI		
Business Address LANSING HI		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? VES 4. Date of Receipt 7/14/2016 Name & Address:		:
HAROLD HAUGH LEADERSHIP FUND	16977	s 469.17
19464 CANDLELISHT	\$ / 6/. / /	s 469.77
RSVC, M1 48066	Click Here for	Memo Itemization ▼
5. If over \$100.00 cumulative, please provide:		leani
Occupation RefireD Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt		
l.,		
Rochester HILLS, MI 483 09.2981	\$ 50.00	\$
5. If over \$100.00 cumulative, please provide:	Clieb Llege for	Mama Hamization
Occupation Employer	Click Here for	Memo Itemization ▼
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	1219.77	
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 13940
2. Committee Name CTE KRISTI POZZI

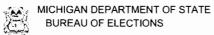
2. 36 million 122	
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? VYES 4. Date of Receipt 6/03/16 Name & Address: PIPEFINERS LOCAL 636 Political Ation Committee 30100 Northwestern Hwó- Farmington Hils, MI 48334 5. If over \$100.00 cumulative, please provide:	\$ 500.0° \$
Occupation Employer	Click Here for Memo Itemization
Business Address/	
Type of Contribution: V Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/3//16	
Name & Address LUCIDO FOR ABRIGHTER TOMORROW PAC 6303 26 mile Rol Suite 203 Washington, MI 48094	\$
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	
Name & Address: LEGISTRALS PAC LOCAL 58, ILEW 1358 Abboutst Detroit, MI 48226 5. If over \$100.00 cumulative, please provide:	\$ /00.00 \$ Click Here for Memo Itemization
Occupation Employer	
Business Address	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 6/6/16	
Name & Address TEAMSTERS 299 Political ACTION COMMITTEE 1741 TRUMBULL NE Demoit, MI 48216 5. If over \$100.00 cumulative, please provide:	\$ 100 5 \$ Click Here for Memo Itemization
Occupation Employer	Click Here for Memo Remization
Business Address /	
Type of Contribution: Direct Loan from a person Fund Raiser	
Page Subtotal	80000
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 22 of 25	Enter this total on line 3a of Summary Page.

CANDIDATE COMMITTEE

1. Committee I.D. Number 139420
2. Committee Name CTE KRISTI Pozzi

Page.

CANDIDATE COMMINITALE 2. Commine 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? LYES 4. Date of Receipt 6-8-2016 Name & Address: CTE doth CHIRKUN 31229 MERRILY ST. Roseville, MI 48066	\$ 100.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation STATE REP Employer STATE of MICHIGAN		
Business Address LANSINL 11		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? PES 4. Date of Receipt 5/27/2016 Name & Address TNOEPEN DENT VOTERS PAC		
P.U. BUX 665 MT. CLEMENS, MI 48046	\$ 30.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	_	_
3. Contribution #3 PAC Receipt? I YES 4. Date of Receipt 5/22/2016 Name & Address: FRIENDS OF MACOMB 3. 9856 BLYLOR CT. CLINFONTUSP. M. 48038 5. If over \$100.00 cumulative, please provide:	\$ /00.02	②
Occupation Employer		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? PYES 4. Date of Receipt Name & Address SWIFALSKE LEADERSHIP FUND 3/4/2 GAY LOS EVILLE MI 48046 5. If over \$100.00 cumulative, please provide:	\$ <i> 00.00</i> Click Here fo	\$r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:	220 -	
Page Subtotal	330.00	-
Grand Total of All Schedules 1A (Complete on last page of Schedule)		_
	Enter this total on line 3a of Summary	



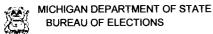
CANDIDATE COMMITTEE

1. Committee I.D. Number 139420
2. Committee Name CTE KY15T1 Pozz1

CANDIDATE COMMITTEE 2.00	minilitée Name <u>972</u>		
Enter contributor's name and address. If contribution is from an individual, enter las middle initial. Check box to indicate if contribution is from a Political Committee or a Committee (PAC) Report <u>all</u> contributions regardless of amount.	an Independent	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/Name & Address: SCOTT LOCKWOUD 950 SOUTHDOWN RD BLOOMFIELD MI 48304	13/2016	\$ 200.00	\$
5. If over \$100.00 cumulative, please provide:		00.1.1.	
Occupation Engineer Employer AEW		Click Here for	Memo Itemization ▼
Business Address 5130/ Schoenher RD.			
	Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 1/1	15/246		
VANESSA HAYES 47092 BrennAN Dr. MACOMB, MI 48044		\$ 200.00	\$
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Engineer Employer AEW			الخشا
Business Address 51301 Schoenher Dr.			
	d Raiser		
Roy C. ROSE 55620 WOOPRIDGE DS. SHELBY TWSP. MI 4831b 5. If over \$100.00 cumulative, please provide: Occupation ENSINEER Employer AEW Business Address 51301 Schoenher RD	7/15/2016 nd Raiser		s 300.00 Memo Itemization
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7 Name & Address GRDDN B WILSON 49572 Compass POINT Pr. CHESTER FIELD, Mr. 48047 5. If over \$100.00 cumulative, please provide: Occupation Engineer Employer AEW Business Address 51301 Schoenher RD. Type of Contribution: Direct Loan from a person Func	1 Raiser	\$ <i>Zoo. oo</i> Click Here for l	\$ Memo Itemization ▼
	Page Subtotal	800.00	
	tal of All Schedules 1A last page of Schedule)		

Page 24of 25

Enter this total on line 3a of Summary Page.



1. Committee I.D. Number 139420

CTE Kristi Pozzi **CANDIDATE COMMITTEE** 2. Committee Name Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount Cumulative for Election Cycle for Each middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount. Contributor (Through date of receipt) 3. Contribution # 1 PAC Receipt? 4. Date of Receipt 07/16/16 Name & Address: Laura Pangori 8106 Rosebud Ln. , 200.00 Clarkston, Mi. 48348 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Employer AEW Occupation Engineer Business Address 51301 Schoenher Rd. Type of Contribution: Direct Loan from a person **Fund Raiser** 4. Date of Receipt 07/16/16 3. Contribution #2 PAC Receipt? Name & Address Cindy Cochran , 30.00 20342 Country Side Dr. Macomb, Mi. 48044 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Occupation _ **Business Address** Fund Raiser Type of Contribution: ✓ Direct Loan from a person 3. Contribution #3 PAC Receipt? 4. Date of Receipt 07/01/16 Name & Address: Kristi Pozzi ,7000 47394 Rockwood Dr. Macomb, Mi. 48044 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: **Employer Macomb County Circuit Court** Occupation Med Program Specialist Business Address 40 N. Main Street, Mt. Clemens, Mi. 48046 Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution #4 PAC Receipt? 4. Date of Receipt Name & Address 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation, **Business Address** Type of Contribution: Loan from a person Fund Raiser Direct Page Subtotal \$7,230.00

Page 25 of 25

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

\$20.159.77

Enter this total on line 3a of Summary Page.



SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number ______

2. Committee Name CTE Kristi Pozzi

3. Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Manhattan Mailers		06/03/16	s 500.00
Address	Purpose: literature	Date	
51132 Milano Drive		Here for Memo it	emization Type
Macomb, MI 48042			,,
Fund Raiser	Check box if this expenditure is payment or debt or obligation reported on previous statement		
Expenditure #2			,
Name Burning Tree		06/09/16	\$ 2802.40
	Purpose: fundraiser	Date	
Address	Purpose:		
22871 21 Mile Rd Macomb, MI 48044	Click	Here for Memo It	emization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	f	
Expenditure #3	Statement		
Name The Italiane Tribune		07/08/16	
The italiane moune		Date	\$ <u>277.00</u>
Address	Purpose: advertisement	Date	
PO Box 380407	Click	Here for Memo I	temization Type
Clinton Twp, MI 48038	Check box if this expenditure is payment of	of	ĺ
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4	Statement		
Name Manhattan Mailers		06/23/16	
Warmattan Wallers	***************************************	Date	\$ <u>4289.00</u>
Address	Purpose: literature mailing		
51132 Milano Dr	Click	Here for Memo I	temization Type
Macomb, MI 48042	1		
	debt or obligation reported on previous	JI	
Fund Raiser	statement		
Expenditure #5			
Name Italian American		06/23/16	\$300.00
Address 43843 ROMED PLANKED. CLINTON TWSP, MI 48138	Purpose: banner	Date	¥ <u>300.00</u>
CLIMENTUSP, MI 48038		k Here for Memo	Itemization Type
	Check box if this expenditure is payment debt or obligation reported on previous	of	
Fund Raiser	statement		
	Su	btotal this page	\$8,168.40
	• • • • • • • • • • • • • • • • • • • •	all Schedules 1B	
	(Complete on last p	age of Schedule)	

Enter this total on line 8a of Summary Page

Page ______ of _________



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 139420

2. Committee Name CTE Kristi Pozzi

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		07/04/40	
Name C&G Newspaper		07/04/16	s 528.00
Address	Purpose: adverttisement	Date	
		lere for Memo Ite	emization Type
Warren, MI 48089	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name C&G Newspaper		07/11/16	s 1520.00
Address	Purpose: advertisement	Date	
13650 11 MITERA.		lere for Memo Ite	emization Type
WARLEN, M1 48089			السما
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name Handy Bindery Company, Inc		07/06/16	\$ 1093.31
Address	Purpose: labels	Date	
23170 Giacoma Ct	Click H	lere for Memo it	emization Type
Clinton Twp, MI 48036	Check box if this expenditure is payment of		<u> Januari</u>
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name Manhattan Mailer		07/06/16	4 4 400 05
	Purpose: literature/mail	Date	\$ 1,180.05
Address 51132 Milano Dr	Purpose:		_
Macomb, MI 48042	Click I	Here for Memo II	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name Office Depot		05/08/16	• DE 44
Address	Purpose: name badges	Date	\$ <u>25.41</u>
44835 Schoenherr Rd		Here for Memo	Itemization Type
Sterling Hts., MI 48313	Check box if this expenditure is payment of		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Fund Raiser	debt or obligation reported on previous statement		
L Tano reason		total this page	\$4,346.77
	Grand Total of all	Schedules 18	
	(Complete on last page	ge of Schedule)	F-444-1-4-1
			Enter this total

Enter this total on line 8a of Summary Page



SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 139420

2 Committee Name CTE Kristi Pozzi

2. 00	Official desire		
Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Kroger		05/23/16	. 0.40
Niogei	w	Data	\$ <u>9.40</u>
Address	Purpose: postage stamps	Date	
21555 21 mile rd		ore for Name !	emization Trees
Macomb, MI 48044	Click H	iere ior Memo It	emization Type
	Check box if this expenditure is payment of		
Fund Pairer	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2			
Name BP Gas Station		05/24/16	. 10 00
Di Guo Giallori		Date	s <u>18.80</u>
Address	Purpose: postage stamps	Date	
43561 Groesbeck HWY			
Clinton Twp, MI 48036	Click H	ere for Memo It	emization Type
CHILLOTT 1 WP, IVII 40000	Chaok how if this area did.		
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name Roseville POST OFFICE			
Roseville / U) / U' / CE		05/19/16	\$47.00
	Purpose: postage	Date	- 17.00
Address	Purpose: Possago		
30550 Gratiot Ave	Click H	ere for Memo It	emization Type
Roseville, MI 48066	l 1		~ L_1
	LCheck box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name Party City		06/09/16	
i aity Oity			\$ 49.72
Address	Purpose: fundraiser decor	Date	V'L
12220 Hall Rd	, uipose.		
	Click H	lere for Memo It	temization Type
Sterling Hts., MI 48313	 _		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	debt or obligation reported on previous statement		
Name Roseville POST OFFICE			
Name Roseville 1051 011100		06/29/16	. 47.00
	Purpose: postage	Date	\$47.00
Address 30550 Gratiot Ave	ruipuse.		
30550 Gratiot Ave	Click H	lere for Memo I	temization Type
Roseville, MI 48066	Check box if this expenditure is payment of		لسما
	debt or obligation reported on previous		
Fund Raiser	statement	,	
	Subto	otal this page	\$171.92
	A	Schodules 45	
	Grand Total of all ((Complete on last page		
	(Complete on last pag	_ J. Juneaule)	

Enter this total on line 8a of Summary Page

Page ______ of _______



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 139420
2. Committee Name CIE KRISTI POZZI

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name AMERICAN GRAPHICS Address 34895 GROESBECK. CLINTON TUNNSHIP HI 48038	Purpose: SIENS	Date Pere for Memo II	\$ <u>5 6 45 . 5 l</u> emization Type
Fund Raiser Expenditure #2	statement		
Name MARKET PLACE Promotions Address 39789 GARFIELT CLINTON TWSP. MI 48038	Purpose: T-SHILIS	Date	\$ <u>55 7.17</u> emization Type ▼
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name Address	Purpose:Click He	Date ere for Memo It	\$emization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Address	Purpose:Click H	Date ere for Memo l	\$temization Type ▼
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name			•
Address Fund Raiser	Purpose: Click H Check box if this expenditure is payment of debt or obligation reported on previous statement	Date lere for Memo	\$temization Type ▼
	Subto	tal this page	6202.73
	Grand Total of all 9 (Complete on last page		6202.73 18,88982

Enter this total on line 8a of Summary Page



DEBTS AND OBLIGATIONS	1. Committee I.D. Number	20		
SCHEDULE 1E	2. Committee Name CTE Kristi	Pozzi		
CANDIDATE COMMITTEE	2. Committee Name			
This Schedule itemizes: a Debts and obligations owed by or forgiven the	committee OR b. Debts (Check either a or b. Use only for the pu	s and obligations owed <u>to</u> or rpose checked.)	r forgiven <u>by</u> the con	nmittee.
Name and Mailing Address of person, vendor of financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, plead provide information regarding the endorsers or guarantors, if any.	(Description) 5. Indicate date debt was incurred	7. Date and amount of each payment	Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: Kristi Pozzi 47394 Rockwood Dr. Macomb, Mi. 48044	4. Type: Loan 5. Date Debt Was Incurred: 07/01/16 6. Original Amount of Debt: \$ 7,000.00	\$ \$ \$	\$	\$
If bank loan, name of endorser or guarantor:		\$Ame	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: 5. <u>Date Debt Was Incurred</u> : 6. <u>Original Amount of Debt</u> : \$	\$ \$ \$ \$	\$	\$FORGIVEN
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type: 5. <u>Date Debt Was Incurred</u> : 6. <u>Original Amount of Debt</u> : \$	\$ \$ \$ \$ \$	\$	\$FORGIVEN
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$_	
	(Complete on last page of Schedule s	Grand Total	(Outstanding debt) of all Schedules 1E or to the committee)	\$7,000.00 \$7,000.00 Enter this total on line 12a "ower
				by"" or line 12b

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

"owed to" of the Summary Page

Page _1 ___ of _1



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number

2. Committee Name	CTE Kristi Pozzi	

	- USE A	SEPARATE SH	EET FOR EACH E	VENT -	
3. Date Event Was Held		of Individuals Attending ting (whichever is	5. Type of Fund Raising A	ctivity	6. Address and Name (If any) of the place where the activity was held.
06/09/16	greater)	160	Dinner		22871 21 Mile Rd. Macomb, Mi. 48044 Private Residence
7. Total Contributions		\$10,330.00			
8. Other Receipts					
9. Gross Receipts (Add lines 7	and 8)	\$10,330.00			
Total Cost of Event Total Cost includes In-Kind Co	ntributions	\$2,802.40	Made For the Event		
11. Check if event was a jo		·			
Co-Sponsor(s)		Contribution S (%)	plit		Expenditure Split (%)
	_				
	-				
	-				
	-				
The committee is require	ed to file a	senarate Fund Daise	or Schodula for each fu	ind raising	s event held during the

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

Page	1	of	1
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