



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

1. Committee I.D. Number 138012		3. This Statement covers From: 7/18/16 to 8/22/16	
2. Committee Name CTE Richard Stathakis		4. Candidate Last Name Stathakis First Name Richard M.I. 4a. Office Sought Including District # or Community Served (If applicable) Township Supervisor, Shelby Township 4b. County of Residence Macomb	
5. Committee's Mailing Address 13883 Timberview Dr. Shelby Twp. MI 48315 Area Code and Phone 586-612-7700 <small>If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.</small>		6. Treasurer's Name & Residential Address Richard Stathakis 13883 Timberview Dr. Shelby Twp. MI 48315 Area Code & Phone 586-612-7700	
7. Treasurer's Business Address N/A Area Code and Phone _____		8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) N/A Area Code and Phone _____	
9. TYPE OF STATEMENT 9a. <input type="checkbox"/> Pre-Election OR 9b. <input checked="" type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus Date of Election, Convention or Caucus 8/2/16		Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly 9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)	
		9e. Dissolution of Candidate Committee <input type="checkbox"/> By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt. Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Effective date of dissolution _____ Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.	
10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.			
Current Treasurer or Designated Record keeper RICK STATHAKIS Type or Print Name		Signature [Signature] Date 8-29-16	
Candidate RICK STATHAKIS Type or Print Name		Signature [Signature] Date 8-29-16	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 138012

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name CTE Richard Stallings

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>7200</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>7200</u>	(18.) \$ <u>62,604</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u>0</u>	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>7200</u>	(20.) \$ <u>62,604</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$		(21.) \$ <u>1500</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$		(22.) \$
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>4719.69</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$		
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>2.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>4721.69</u>	(23.) \$ <u>61,032.24</u>
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			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>12,604</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$		
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>69.92</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>7200.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>7269.92</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>4721.69</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>2548.23</u>	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138012
2. Committee Name CTE Richard Stathakis

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7/19/16

Name & Address: Paula Filae
5300 24 Mile Rd.
Shelby Twp. MI 48316

\$ 1000 \$ 1000

5. If over \$100.00 cumulative, please provide:

Occupation Trustee Employer Shelby Twp.

Business Address 52700 Van Dyke, Shelby Twp. MI 48316

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 2 PAC Receipt? ☐ YES 4. Date of Receipt 7/19/16

Name & Address: David Filae
5300 24 Mile Rd.
Shelby Twp MI 48316

\$ 1000 \$ 1000

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7/19/16

Name & Address: Thomas Filae
41890 Echo Forest
Canton, MI 48188

\$ 1000 \$ 1000

5. If over \$100.00 cumulative, please provide:

Occupation Attorney Employer Self

Business Address " "

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7/19/16

Name & Address: Steve Schbielski
4426 Sunset Rd.
Royal Oak, MI 48073

\$ 1000 \$ 1000

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

Page Subtotal

4,000

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138012
2. Committee Name CTE. Richard Stathakis

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7/19/16
Name & Address: Virginia Filna
7121 Chatsworth Dr.
Shelby Twp MI 48317

\$ 2000

\$ 2000

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7/21/16
Name & Address: Richard Stathakis
13543 Timberline
Shelby Twp. MI 48315

\$ 800

\$ 800

5. If over \$100.00 cumulative, please provide:

Occupation Supervisor Employer Shelby Twp.

Business Address 52700 Van Dyke, Shelby Twp MI 48316

Type of Contribution: ☒ Direct ☒ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 8/2/16
Name & Address: Raymond Debusk
48554 Kings Dr.
Shelby Twp MI 48315

\$ 200

\$ 200

5. If over \$100.00 cumulative, please provide:

Occupation owner Employer Debusk Const.

Business Address 6006 Auburn Rd, Shelby Twp MI 48317

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 8/2/16
Name & Address: Bob Wolfbauer
45248 Seabrook
Canton, MI

\$ 200

\$ 200

5. If over \$100.00 cumulative, please provide:

Occupation Manager Employer Ford Motor Co.

Business Address 1 American Rd, Dearborn, MI

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

[Click Here for Memo Itemization](#)

Page Subtotal

3200

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

7200

Enter this total on
line 3a of Summary
Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 138012
2. Committee Name cte Richard Statkakis

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Manhattan Mailers</u> Address <u>51132 Milan Dr.</u> <u>Macomb, MI 48042</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Mail Flyers</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/22/16</u> Date	<u>\$ 1667.12</u>
Expenditure #2 Name <u>OASIS Promotions</u> Address <u>35360 Forton Ct.</u> <u>Clinton Twp. MI 48035</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>T-Shirts</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/24/16</u> Date	<u>\$ 295.74</u>
Expenditure #3 Name <u>Elite Photo</u> Address <u>14129 Rick Dr.</u> <u>Shelby Twp. MI 48315</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Photos</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/28/16</u> Date	<u>\$ 250.00</u>
Expenditure #4 Name <u>American Speedy</u> Address <u>46723 Van Dyke</u> <u>Shelby Twp MI 48316</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Painting</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/24/16</u> Date	<u>\$ 127.25</u>
Expenditure #5 Name <u>USPS</u> Address <u>7755 22 Mile Rd.</u> <u>Shelby Twp. MI 48316</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Postage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/24/16</u> Date	<u>\$ 345.00</u>

Subtotal this page

2,685.11

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 138012
2. Committee Name CTE Richard Statthakis

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>SANS LLC</u> Address <u>2642 Depew</u> <u>W. Bloomfield, MI 48324</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Consulting</u> <u>no other vendor</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/2/16</u> Date	<u>\$ 500</u>
Expenditure #2 Name <u>Utley Bros Inc.</u> Address <u>567 Robbins Dr.</u> <u>Troy, MI 48063</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/29/16</u> Date	<u>\$ 416.58</u>
Expenditure #3 Name <u>John Johnson</u> Address <u>49149 Bayshore</u> <u>Cheshetull, MI 48047</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Consulting</u> <u>no other vendor</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/11/16</u> Date	<u>\$ 500</u>
Expenditure #4 Name <u>Anthony Apore</u> Address <u>52849 Stevens Oaks</u> <u>Shelby Twp. MI 48316</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>CAG Ad.</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/22/16</u> Date	<u>\$ 151</u>
Expenditure #5 Name <u>Source Newspaper</u> Address <u>19176 Hall Rd. Ste 200</u> <u>Clinton Twp MI 48038</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Ad.</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/22/16</u> Date	<u>\$ 167</u>

Subtotal this page

1734.58

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

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 138012

2. Committee Name CTE Richard Stathakis

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Brandon Dabish</u> Address <u>50558 Brandenburg</u> <u>Macomb MI 48064</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Return of Contribution</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/19/16</u> Date	<u>\$ 300</u>
Expenditure #2 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	_____ \$
Expenditure #3 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	_____ \$
Expenditure #4 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	_____ \$
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	_____ \$

Subtotal this page

300

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

4719.69

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 138012

2. Committee Name CTE Richard Stathakis

This Schedule itemizes:

☒ a. Debts and obligations owed by or forgiven the committee OR ☐ b. Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 8 minus Item 8) <input type="checkbox"/> FORGIVEN
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Richard Stathakis</u> <u>13883 Timbercreek</u> <u>Shelby Twp. MI 48315</u>	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>2/1/16</u> 6. Original Amount of Debt: <u>\$14,804</u>	<u>5/12/16</u> \$ <u>500</u> <u>4/7/16</u> \$ <u>1500</u> <u>3/23/16</u> \$ <u>1000</u> \$ \$	<u>\$3000</u>	<u>\$11,804</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <u>Richard Stathakis</u> <u>11</u> <u>11</u>	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>7/21/16</u> 6. Original Amount of Debt: <u>\$800</u>	\$ \$ \$ \$ \$	\$ <u>0</u>	<u>\$800</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. Date Debt Was Incurred: _____ 6. Original Amount of Debt: _____	\$ \$ \$ \$ \$	\$ _____	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) 12,604

Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee) 12,604

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

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