

FILED

#### INDEPENDENT/POLITICAL COMMITTEE COVER PAGE

16 JUL 22 PH 1:38

Report must be legible, typed or printed in ink and sign by the treasurer or designated record keeper	ed COMPLETS.	covers From: 10/2///	5 To 7/20/16	
1. Committee I.D. Number	4. Committee's Ma			
139111	13883 TIN	13883 Timberuew		
2. Committee Name	Shelly Tup.	Shelly Tup. MI 48315		
Macon's Families & Business	Area Code and Ph	Area Code and Phone 583-232-4550		
Coalition		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.		
5. Treasurer's Name and Residential Address			2) tto ming omoun	
Vincent Viviano				
6705 Saint Andrews D.	2.			
Shelby Tup MI 48315		ea Code and Phone 5%4		
6. Treasurer's Business Address	7. Designated Reco	ord Keeper's Name and Mail	ing Address (If the committee has a Designated	
NA	NA		·	
Area Code and Phone			Area Code and Phone	
8. TYPE OF STATEMENT:  APPLICABLE TO INDEPENDENT AND POLITICAL COMMITTEES REGISTERED ON STATE LEVEL	APPLICABLE TO IND POLITICAL COMMITT ON COUNT	EES REGISTERED	APPLICABLE TO INDEPENDENT AND POLITICAL COMMITTEES REGISTERED ON	
8a. QUARTERLY STATEMENTS			STATE AND COUNTY LEVEL	
	8c. ANNUAL STATE		8f. AMENDMENT TO CAMPAIGN STATEMENT	
January 31	· · · · · · · · · · · · · · · · · · ·	erage Year) Local didates Exempted NOR	(Complete Item 8a, 8b, 8c 8d, 8e, 8f or 8h to indicate which Statement is being amended)	
July 25	8e. POST-ELECTIO	ON	, i	
<u> </u>	Pre-Election or I			
April 25	Statement rela		·	
October 25	PRIMARY	GENERAL	8g. DISSOLUTION OF COMMITTEE	
Cataba 25	CONVENTION	SCHOOL		
	SPECIAL	CAUCUS	Effective Date of Dissolution	
8b. SPECIAL ELECTION INDEPENDENT EXPENDITURE REPORT	Date of Election, Co	envention or Caucus:	By checking this item, I/We certify that the committee has no asset or outstanding	
EAFENDITORE REPORT	-1		debts, including late filling fees. Further, I request that if the dissolution cannot be	
	July 25 Quarterly		granted, that this be considered a request for the Reporting Waiver.	
	October 25 Quart	епу	Note: The disposition of residual funds must be reported on Schedule 2B and the Summary Page.	
9. Verification: I certify that all reasonable diligence wa		this statement and attached	schedules (if any) and to the best of my	
knowledge and belief the contents are true, accurate a	•	1/ / /		
Current Treasurer or VINCENT V	PANO 1	Signature	Date 7-72-16	
: Type of Title Name		Olgridalic		

1. Committee I.D. Number	3	9	$\ell \ell$	1	
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SUMMARY PAGE
ENT OR POLITICAL COMMITTEE

2. Committee Name Macons Families + Business Contition

INDEPENDENT OR POLITICAL COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative for Calendar Year
3. Contributions		C
a. Itemized Contributions     (Schedule 2A, Column 6 + Schedule 2A-2, Column 8	(3a.) \$ 30.600	
b. Uniternized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ 30,600	(18.)\$ 30,600
4. Other Receipts (Schedule 2A-1, Column 6)	(4.) \$	(19.)\$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add line 3c + Line 4) IN-KIND CONTRIBUTIONS	(5) \$ 30,600	(20.)\$ 30.600
In-Kind Contributions     a. Itemized (Schedule 2-IK, Column 7)	(6a.) \$	
b. Unitemized (less than \$20.01 each - no Schedule)	(6b.) \$ NOT APPLICABLE	
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b). EXPENDITURES	(7.) \$	(21.)\$
Expenditures     a. Itemized Direct (Schedule 2B, Column 7)	(8a.) 8 20,453.22	
b. Itemized Get-Out-the-Vote (Schedule B-G, Column 6)	(8b.) \$	
<ul> <li>In-Kind Expenditures- Purchase of Goods or Services (Schedule 2B-2, Column 7)</li> </ul>	(8c.) \$	
d. Uniternized (less than \$50.01 each - no Schedule)	(8d.) \$ <u>65.95</u>	2
e. Subtotal of Expenditures	(8e.) \$ 20,519.17	(22.)\$ <u>20,5/9.17</u> (23.)\$ <u>11,244.94</u>
9. Independent Expenditures (Schedule 2B-1, Column 7)	(9.) s 11,244,94	i i
10. TOTAL EXPENDITURES (Add Line 8e + Line 9) IN-KIND EXPENDITURES	(10.) \$ 31, 764. [/	(24.)\$ 31,769.11_
11.In-Kind Expenditures- Endorsements, Donations or Loans of Goods or Services (Schedule 2B-2, Column 8)  DEBTS AND OBLIGATIONS	(11.)\$	(25.)\$
12. Debts and Obligations a. Owed by the Committee (Schedule 2E)	(12a.) \$ 7850	
b. Owed to the Committee (Schedule 2E)  BALANCE STATEMENT	(12b.)\$	
13. Ending Balance of last report filed		
(Enter zero if no previous reports have been filed.)	(13.)\$ 4,458.47	
Amount received during reporting period     (Line 5, Total Contributions & Other Receipts - Column I)	(14.)+ 30,600	
15. SUBTOTAL Add lines 13 and 14	(15.) = 35,058-47	
16. Amount expended during reporting period (Line 10, Total Expenditures - Column I)	(16.)-31 764.11	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.)\$ 3,294.36	•

<sup>\*</sup>If your ending balance is negative, please recheck your math.



#### MICHIGAN DEPARTMENT OF STATE

BUREAU OF ELECTIONS

#### **ITEMIZED CONTRIBUTIONS** SCHEDULE 2A

1. Committee I.D. No	umber	39111		
2 Committee Name	Masaul	Endies	- Buswies	Contition

INDEPENDENT OR POLITICAL COMMITTEE 2.	Committee Name Malonb	Families 4	- business Coalifica
Please enter contributor's name and address. If contribution is from an individual and middle initial. Check box to indicate if contribution is from a Political Commit Committee (Both are commonly called PACs).		6. Amount	7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)
3. Contribution # 1 Is this contribution from a PAC? YES 4. Date of Receipt 7/17/	16		
Name & Address:		3 3 -	
Beth Case	\$_	2,200	\$ 2.200
525 Shelden Rd.			
5. If over \$100.00 cumulative, please provide:		Click Here for N	femo Itemization Type
Occupation owner Employer BPI Info Siste	ms		
Business Address 23875 Northwestern Highway, South field	ld M1 48075		
Type of Contribution: Oirect Loan from a person	Fund Raiser		
3. Contribution #2 Is this contribution from a PAC? YES 4. Date of Receipt 7/17 Name & Address:	116		
Rick Stathakis		\$ 3,000	\$3,000
Rick Stathakis 13583 Timbernew OR.		•	,
Shelby Tup. MI 48315		Click Here for M	lemo Itemization Type
5. If over \$100.00 cumulative, please provide:			
Occupation Suprembon Employer Shelly Tup.			
Business Address 52700 Van Ouke Shelby Tup MI 48	Sit.		
Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution #3			
Is this contribution from a PAC?  4. Date of Receipt 7/17/	(6		
Name & Address:			1
Rick Stathakis	\$	1,000	\$4,000
13863 timberuw OK.		Click Horo for M	lome Hamization Type
Shelby Tur. MI 48315		Click Here to tw	lemo Itemization Type
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 Is this contribution from a PAC?  YES  4. Date of Receipt 7/1/(0)	6		<del></del>
Name & Address:	\$	400	\$400
		Click Here for M	femo Itemization Type
		Office Field In	ionia nonnacion Typo
5. If over \$100.00 cumulative, please provide:			
11			
Occupation Employer			
Business Address —			
Type of Contribution: Direct Loan from a person	Fund Raiser		
	Page Subtota	6,600	
	Grand Total of All Schedules 2	A	
(Co	mplete on last page of Schedule	Enter this total	
	-	on line 3a of Summary Page	

Page Î of 5



### ITEMIZED CONTRIBUTIONS

SCHEDULE 2A	1. Committee I.D. Number	12[11]	
INDEPENDENT OR POLITICAL COMMITTEE	2. Committee Name Macon		Buttone Cochtina
Please enter contributor's name and address. If contribution is from an and middle initial. Check box to indicate if contribution is from a Political Committee (Both are commonly called PACs).	individual, enter last name, first name.	6. Amount	7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)
3. Contribution # 1 Is this contribution from a PAC? YES 4. Date of Receipt Name & Address:	6/30/16		date of receipt;
Shout Shirinian		\$ 2,500	\$ 2,500
23760 Ryan Rd.			
WARREN, MI 48091			
5. If over \$100.00 cumulative, please provide:		Click Here for N	Memo Itemization Type
Occupation Cure Employer Un-8 Cal	head		······································
Business Address			
Type of Contribution: Direct Loan from a perso	n Fund Raiser		
3. Contribution # 2 Is this contribution from a PAC?  YES  4. Date of Receipt _			
Name & Address:		, 5,000	. 5,000
March Kassab		\$	3
31550 worthwestern Huy		Click Here for M	lemo Itemization Type
Farmington, MI 48334  5. If over \$100.00 cumulative, please provide:			iona nonneamon 1,50
Occupation Agant Employer M Shapir	is Real Estate Group		
Business Address (1)	•		
Type of Contribution: Direct Loan from a person	on Fund Raiser		
3. Contribution # 3	1-1		
Is this contribution from a PAC?  4. Date of Receipt	5/24/16		
is alls contribution from a PAC:			
•			C solo
Name & Address: Rick Stathakis	,	\$ 600	\$ 5,000
•	,	-	V = 7
Name & Address: Rick Stathakis 13883 Trubernew DR.	,	-	\$ 5,000
Name & Address: Rick Stathakis	,	-	V - 7
Name & Address: Rick Stathakis 13883 Timberum DR. Shelby Tup. M. 48315  5. If over \$100.00 cumulative, please provide:	,	-	V = 7
Name & Address: Rick Starthackis 13883 Timbernew Dr. Shelby Tup. MI 48315	>.	-	V - 7
Name & Address: Rick Starthackis  13883 Trubaculew De.  Shelby Tup. MI 48315  5. If over \$100.00 cumulative, please provide:  Occupation Specuscus Employer Shelby Tup		-	V - 7
Name & Address: Rick Stathakis  13883 Timberulew DR.  Shelby Tup. MI 48315  5. If over \$100.00 cumulative, please provide:  Occupation Specusor Employer Shelby Tup  Business Address 52700 VAN Dyke, Shelby Tup	o. MI 48316	-	V = 7
Name & Address: Rick Stathackis  13883 Trubaculus DR.  Shelby Tup. MI 48315  5. If over \$100.00 cumulative, please provide:  Occupation Superuscus Employer Shelby Tuy  Business Address S2703 UAN Dyke, Shelby Tuy  Type of Contribution: Direct Loan from a person	o. M. 19316 Fund Raiser	-	V = 7
Name & Address: Rick Stathackis  13883 Timberulew DR.  Shelby Tup. MI 48315  5. If over \$100.00 cumulative, please provide:  Occupation Supervisco Employer Shelby Tup  Business Address 52700 UAN Dyke, Shelby Tup  Type of Contribution: Direct Loan from a person  3. Contribution #4  Is this contribution from a PAC?	o. M. 19316 Fund Raiser	-	V = 7
Name & Address: Rick Stathackis  13883 Trabaculus DR.  Shelby Tup. MI 48315  5. If over \$100.00 cumulative, please provide:  Occupation Specusor Employer Shelbs Tuy  Business Address 52700 UAN Dyke, Shelbs Tuy  Type of Contribution: Direct Loan from a person  3. Contribution #4  Is this contribution from a PAC? Name & Address:	o. M. 19316 Fund Raiser	Click Here for M	V = 7
Name & Address: Rick Stathackis  13883 Timberulew DR.  Shelby Tup. MI 48315  5. If over \$100.00 cumulative, please provide:  Occupation Supervisco Employer Shelby Tup  Business Address 52700 UAN Dyke, Shelby Tup  Type of Contribution: Direct Loan from a person  3. Contribution #4  Is this contribution from a PAC?	o. M. 19316 Fund Raiser	-	V = 7
Name & Address: Rick Stathackis  13883 Trabaculus DR.  Shelby Tup. MI 48315  5. If over \$100.00 cumulative, please provide:  Occupation Specusor Employer Shelbs Tuy  Business Address 52700 UAN Dyke, Shelbs Tuy  Type of Contribution: Direct Loan from a person  3. Contribution #4  Is this contribution from a PAC? Name & Address:	o. M. 19316 Fund Raiser	Click Here for M	V - 7
Name & Address: Rick Stathackis  13883 Trabaculus DR.  Shelby Tup. MI 48315  5. If over \$100.00 cumulative, please provide:  Occupation Specusor Employer Shelbs Tuy  Business Address 52700 UAN Dyke, Shelbs Tuy  Type of Contribution: Direct Loan from a person  3. Contribution #4  Is this contribution from a PAC? Name & Address:	o. M. 19316 Fund Raiser	Click Here for M	lemo Itemization Type
Name & Address: Rick Stathackis  13883 Trabaculus DR.  Shelby Tup. MI 48315  5. If over \$100.00 cumulative, please provide:  Occupation Specusor Employer Shelbs Tuy  Business Address 52700 UAN Dyke, Shelbs Tuy  Type of Contribution: Direct Loan from a person  3. Contribution #4  Is this contribution from a PAC? Name & Address:	o. M. 19316 Fund Raiser	Click Here for M	lemo Itemization Type
Name & Address: Rick Stathackis  13883 Trabaculus DR.  Shelby Tup. MI 48315  5. If over \$100.00 cumulative, please provide:  Occupation Specusor Employer Shelb Tup  Business Address S2703 UAN Dyks, Shelby Tup  Type of Contribution: Direct Loan from a person  3. Contribution #4  Is this contribution from a PAC? Name & Address:  11  5. If over \$100.00 cumulative, please provide:	o. M. 19316 Fund Raiser	Click Here for M	lemo Itemization Type
Name & Address: Rick: Stathackis  13883 Trabaculus DR.  Shelby Tup. MI 48315  5. If over \$100.00 cumulative, please provide:  Occupation Superuscus Employer Shelby Tuy  Business Address Saros Van Dyke, Shelby Tuy  Type of Contribution: Direct Loan from a person  3. Contribution #4  Is this contribution from a PAC? Name & Address:  11  17  5. If over \$100.00 cumulative, please provide:	o. M. 19316 Fund Raiser	Click Here for M	lemo Itemization Type
Name & Address: Rick Stathackis  13883 Timberules DR.  Shelby Tup. MI 48315  5. If over \$100.00 cumulative, please provide:  Occupation Specusor Employer Shelby Tup  Business Address 52700 UAN Dyks, Shelby Tup  Type of Contribution: Direct Loan from a person  3. Contribution #4  Is this contribution from a PAC? Name & Address:  11  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address	Fund Raiser	Click Here for M	lemo Itemization Type
Name & Address: Rick Stathackis  13883 Timbaculess DR.  Shelby Tup. MI 48315  5. If over \$100.00 cumulative, please provide:  Occupation Speculacian Employer Shelby Tup  Business Address Saros UAN Dyks, Shelby Tup  Type of Contribution: Direct Loan from a person  3. Contribution #4  Is this contribution from a PAC? YES 4. Date of Receipt 5  Name & Address:  11  5. If over \$100.00 cumulative, please provide:  Occupation Employer	Fund Raiser	Click Here for M	lemo Itemization Type
Name & Address: Rick Stathackis  13883 Timberulew DR.  Shelby Tup. MI 48315  5. If over \$100.00 cumulative, please provide:  Occupation Specusor Employer Shelby Tup  Business Address 52700 UAN Dyks, Shelby Tup  Type of Contribution: Direct Loan from a person  3. Contribution #4  Is this contribution from a PAC? YES 4. Date of Receipt 5  Name & Address:  11  5. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address	Fund Raiser	\$ 350 Click Here for M	lemo Itemization Type

Enter this total on line 3a of Summary Page

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### MICHIGAN DEPARTMENT OF STATE

BUREAU OF ELECTIONS

### ITEMIZED CONTRIBUTIONS SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE 2. Committee Name Macond Families & Brown's Coulition

1. Committee I.D. Number	137111	

2. Confinite reality ( Confinite to the		The Court is the
Please enter contributor's name and address. If contribution is from an individual, enter last name, first name and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).	6. Amount	7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)
3. Contribution # 1 Is this contribution from a PAC? YES 4. Date of Receipt 4/11/16 Name & Address:		
Rick Stathakis	\$ 200	\$ <u>5550</u>
13583 Timberiew Dr.		
5hulby Tup. M. 48315  5. If over \$100.00 cumulative, please provide:		
	Click Here for	Memo Itemization Type
Occupation Supervise: Employer Shelly Two.		
Business Address 5376 Un Dake Shelby Tup. PA 45346  Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 2 Is this contribution from a PAC? YES 4. Date of Receipt	<b></b>	
ti (/ )	\$ 800	s 6,350
	Click Here for	Memo Itemization Type
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Fund Raiser		
3. Contribution # 3  YES 4. Date of Receipt 1/25(16		
IS THIS CONTINUION FOR A PAC?		
Name & Address:	\$ 1500	\$7,850
	Click Here for	Memo Itemization Type
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address (1)		
Type of Contribution: Direct Coan from a person Fund Raiser		
3. Contribution #4 Is this contribution from a PAC?  YES  4. Date of Receipt 12/21/15		
Name & Address: James Hering 13861 Timbernes DR.	\$ 1,200	\$ 1,200
13861 Timberneus DR.	Click Here for	Memo Itemization Type
Shelby Tup, mi 48315		
5. If over \$100.00 cumulative, please provide:		
Occupation Ketisad Employer	-	
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser  Page Sub	total ·2 2 a=	
Grand Total of All Schedule	s 2A	
(Complete on last page of Scher	dule) [ Enter this tota	
	on line 3a of	

Page 3 of 5



### ITEMIZED CONTRIBUTIONS SCHEDULE 2A

INDEPENDENT	OR POLITICAL	COMMITTEE

1. Committee I.D. Number 139111

INDEPENDENT OR POLITICAL COMMITTEE 2. Committee Name Ma	icosis remalier &	BUSINESS COULTION
Please enter contributor's name and address. If contribution is from an individual, enter last name, first nam and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).	ne, 6. Amount	7. Curnulative for Calendar Year for Each Contributor (Through date of receipt)
3. Contribution # 1 Is this contribution from a PAC? YES 4. Date of Receipt 10/23/15		
A A A A A A A A A A A A A A A A A A A		
Name & Address: Gene D'Agostia	\$ 4,2es	\$4,200
38700 VAN 04/00		
Steeling Heights, Mi 48312		
5. If over \$199.98 cumulative, please provide:	Click Here for	Memo Itemization Type
Occupation Owner Employer Admini Homes	-	
Business Address 357 // //	-	
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 Is this contribution from a PAC?  YES  4. Date of Receipt 10/23/15  Name & Address:		
Ken stopczynski	\$150	\$150
49548 PARKSICLE Ct.	T	
Macond Top MI 4044	Click Here for N	Memo Itemization Type
5. If over \$100.00 cumulative, please provide:		
Occupation CFO Employer Crown of Michigan		
Business Address 2111 Walter Reuther, Warner, MI 48091	-	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3		
Is this contribution from a PAC?  4. Date of Receipt 7/17/6		
Name & Address:		
Edmond Mamou	\$ 2,500	\$ 2,500
172 Kingston Ct.	Click Here for N	Memo Itemization Type
Bloom field Tup. M1 48304 5. If over \$100.00 cumulative, please provide:		
Occupation Owner Employer Royal Oak Recyclery Business Address 6200 Elmpidge, Steeling Heights, M. 98313		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 4 Is this contribution from a PAC?  YES  4. Date of Receipt  7/17/16		
Name & Address: Rizzo Environmental Service's PAC 6200 Elmridge Steeling Heights, MI 48313	\$ 2,500	\$ 2,500
6200 Elmridge	Click Here for N	Memo Itemization Type
Steeling Heights MI 48313		•
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address	-	
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Su	btotal 9.350	
Grand Total of All Schedul	les 2A	
(Complete on last page of Sch	Enter this total	
	on line 3a of Summary Pag	9

Page 4 of 5



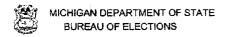
## ITEMIZED CONTRIBUTIONS SCHEDULE 2A

SCHEDULE 2A 1. Committee 1.D. Number 2
INDEPENDENT OR POLITICAL COMMITTEE 2. Committee Name May 1

1. Committee I.D. Number	<i>59111</i>		
2. Committee Name Macons	Families +	business	Coaletion

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).	9, 6. Amount	Cumulative for     Calendar Year for Each     Contributor (Through     date of receipt)
3. Contribution #1		
S. Contribution # 1  St this contribution from a PAC? YES 4. Date of Receipt 7/17/16  Name & Address:		
Name & Address: Derrick Hick's	s 2 500	s 2,500
18530 Made Ave *585	*	
Grosse Parnte: MI 48236		
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization Type
Occupation owner Employer ASAF Delivery		
Business Address		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution # 2 Is this contribution from a PAC?  YES  4. Date of Receipt  Name & Address:		
	\$	\$
	Offal- Utaan Free C	Mana kaminaka 7:
	Click Here for	Memo Itemization Type
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 YES 4. Date of Receipt		
Is this contribution from a PAC?	•	
Name & Address:	•	e ·
	\$	<u> </u>
	Click Here for I	Memo Itemization Type
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 YES 4. Date of Receipt		<del></del>
Is this contribution from a PAC?		
Name & Address:	\$	<u> </u>
	Official blown for	Mama Itamization Tuna
	Click nere for	Memo Itemization Type
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address —		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Sub	ototal 3,500	
Grand Total of All Schedule (Complete on last page of Sche		
(Complete on last page of Scriet	Enter this tota	
	on line 3a of	

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



## ITEMIZED DIRECT EXPENDITURES SCHEDULE 2B INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 12 Committee I.D. Number Familes +

2. Committee Name Marchal Burness Coalchin

Name and address of person or vendor to whom the expenditure was made	5. Candidate or Ballot Question Information	6. Date 7 Amount 8. Cumulative for Election or
the experiousie was made	5. Calididate of Ballot Question mormation	Election Cycle
	<u> </u>	1 1 2.00.00.00
Expenditure #1 Name & Address:	E	
Rick Statlakis	5Name of Candidate	7/13/16 \$ 300.00 \$ 300.00
Mick Status	Name of Candidate	1/13/16 \$ 300. \$ 500.
13843 Timbreview De.		Date
13013	Office Sought & District # or Jurisdiction	•
of I To us utage		
Shelby Tap. MI 48315		Click Here for Memo Itemization Type
	County	Olicit Flore for Works Refulled Cype
4. Purpose: Lon- Repayment		
7. 1 dipodo:	Ballot Proposal	
Fund Raiser	Check box if expenditure is payment of Debt	
Fulld Raisei	or Obligation reported on previous statement	
Expenditure #2	-	
Name & Address:	5.	-1 100
Boad Batis	Name of Candidate	7/12/16 \$1000 \$000
		Date
231 Gardendale	Office Sought & District # or Jurisdiction	
	Office dought a Double # of Juliacionon	Click Here for Memo Itemization Type
Frendule, MI 48220		Click flete for wietho tternization Type
teendule, MI	County	
4. Purpose: Cousulting	Ballot Proposal	
	Check box if expenditure is payment of Debt	
Fund Raiser NO Ofter vendor	or Obligation reported on previous statement	
Expenditure #3		
Name & Address:	5.	
Oasis Promotions	Name of Candidate	7/6/16 \$270.20 \$ 210.20
Dasis Promettons	· · · · · · · · · · · · · · · · · · ·	16/16 \$510.00\$
35360 Forton Ct		vate
35360 TOTOM -1	Office Sought & District # or Jurisdiction	Click Here for Memo Itemization Type
1 7 A3, 110 A5,		ORDICTION OF MORNS INSTITUTE OF THE STATE OF
Clinton Tup. MI 48055	County	
	•	
4. Purpose: <u>Floss</u>	Ballot Proposal	
4. Fai poso	Check box if expenditure is payment of Debt	
Fund Raiser	or Obligation reported on previous statement	
Expenditure #4		
Name & Address:	5.	
Tringle N	Name of Candidate	
John Johnson		7/1/16 \$2,500 \$2,500
49149 Bayshar	Office Sought & District # or Jurisdiction	Date
77177 - 1	Office Gongfit at District # of Various of State	
Chistorfield, MI 48047		Click Here for Memo Itemization Type
Charlet Control of the Control of th	County	
4. Purpose: Cousulting	Ballot Proposal	
Fund Raiser No other rendor	Check box if expenditure is payment of Debt	
The stor server	or Obligation reported on previous statement	
	Su	btotal this page 4 070.20
	A	<del> </del>
	Grand Total of a (Complete on last pa	all Schedules 2B
	(Complete on last pa	<u> </u>
		Enter this total
		on line 8a of the Summary Page
		Quinnaly rage

Page / of 6



#### ITEMIZED DIRECT EXPENDITURES **SCHEDULE 2B**

1. Committee I.D. Number 139/1/ 2. Committee Name Macones Families & Business Collete INDEPENDENT OR POLITICAL COMMITTEE 3. Name and address of person or vendor to whom 6. Date 7 Amount the expenditure was made 5. Candidate or Ballot Question Information for Election or Election Cycle Expenditure #1 Name & Address: 7/1/16 , 299 ,289 Name of Candidate SANS LLC 2642 Depen PR Office Sought & District # or Jurisdiction west Bloomfield, MI 48324 Click Here for Memo Itemization Type County 4. Purpose: Consulting **Ballot Proposal** Check box if expenditure is payment of Debt or Obligation reported on previous statement Expenditure #2 Name & Address: Macoms Special dympies 6/14/16 \$150 Name of Candidate 4084 John R Office Sought & District # or Jurisdiction Click Here for Memo Itemization Type Troy, MI 48085 County 4. Purpose: Donation **Ballot Proposal** Check box if expenditure is payment of Debt Fund Raiser or Obligation reported on previous statement Expenditure #3 Name & Address: 6/2/16 \$100 NWCF Blessing in Backpack Name of Candidate 1170 E. Lon Lake Ed. Office Sought & District # or Jurisdiction Click Here for Memo Itemization Type Tay, MI 48085 County 4. Purpose: Donation **Ballot Proposal** Check box if expenditure is payment of Debt Fund Raiser or Obligation reported on previous statement Expenditure #4 Name & Address: Name of Candidate America Speedy Reinting 4/1/16 : 266 : 266 46723 VAN DYKE AVE. Office Sought & District # or Jurisdiction Click Here for Memo Itemization Type Shelly Thip MI 48317 County 4. Purpose: Letbrehend **Ballot Proposal** Check box if expenditure is payment of Debt Fund Raiser or Obligation reported on previous statement Subtotal this page

Page 2 of 6

(Complete on last page of Schedule) Enter this total on line 8a of the Summary Page

Grand Total of all Schedules 2B



#### ITEMIZED DIRECT EXPENDITURES **SCHEDULE 2B**

2. Committee Name Marcas Families + Business Coalities INDEPENDENT OR POLITICAL COMMITTEE 3. Name and address of person or vendor to whom 7 Amount for Election or 5. Candidate or Ballot Question Information the expenditure was made **Election Cycle** Expenditure #1 Name & Address: SONS LLC ie/116 \$500 Name of Candidate 2612 Depen OR. Office Sought & District # or Jurisdiction in Bloomfield, MI 48324 Click Here for Memo Itemization Type County 4. Purpose: Cousulting Fund Raiser No 6 flu vendon Ballot Proposal
Check box if expenditure is payment of Debi or Obligation reported on previous statement Expenditure #2 Name & Address: Name of Candidate Shelly Tup Saros VAN Dyke Office Sought & District # or Jurisdiction Click Here for Memo Itemization Type Shelby Tup. MI 48316 County 4. Purpose: Twp. Coffee / Lunches **Bailot Proposal** Check box if expenditure is payment of Debt Fund Raiser or Obligation reported on previous statement Expenditure #3 Name & Address: Trinity Community Cure 500 Name of Candidate 47511 VAN Dyke Office Sought & District # or Jurisdiction Click Here for Memo Itemization Type Shilly Tup MI 48317 County 4. Purpose: Dowation **Ballot Proposal** Check box if expenditure is payment of Debt Fund Raiser or Obligation reported on previous statement Expenditure #4 Name & Address: The Popped Kernel Name of Candidate 5/20/16 \$ 100 48901 Hayes Rel. Office Sought & District # or Jurisdiction Shelby Tup. MI 48315 Click Here for Memo Itemization Type 4. Purpose: Food Ballot Proposal Check box if expenditure is payment of Debt Fund Raiser or Obligation reported on previous statement Subtotal this page 2285.42 Grand Total of all Schedules 2B

1. Committee I.D. Number 139 [[]

Page 3 of 6

(Complete on last page of Schedule) Enter this total on line 8a of the Summary Page



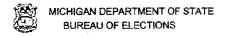
## ITEMIZED DIRECT EXPENDITURES SCHEDULE 2B INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 139111

2. Committee Name Macanb Families + Business Coalifier

Name and address of person or vendor to whom the expenditure was made	5. Candidate or Ballot Question Information	6. Date 7 Amount 8. Cumulative for Election or Election Cycle
Expenditure #1		
Name & Address:	5	1.1.
Maco & Special Olympics	Name of Candidate	5/9/16 \$150 \$300
4084 John R	Office Cought & District # or Jurisdiction	- Date
40.65	Office Sought & District # or Jurisdiction	
Trul, MI 48085	County	Click Here for Memo Itemization Type
4. Purpose: Danah - S		
	Ballot Proposal	
Fund Raiser	Check box if expenditure is payment of Debt or Obligation reported on previous statement	
Expenditure #2	or Obligation reported on previous statement	
Name & Address:	5.	1.
	Name of Candidate	4/19/16 \$125 \$125
Shelby TV		Date
52700 VAN DYKE	Office Sought & District # or Jurisdiction	
•		Click Here for Memo Itemization Type
Shelby Try. MI 48316	County	
,	•	
4. Purpose: 5 prayer videos	Ballot Proposal	
	Check box if expenditure is payment of Debt	
Fund Raiser	or Obligation reported on previous statement	
Expenditure #3 Name & Address:	5.	
Shelby Gran's Club	Name of Candidate	4/4/6 \$ 200 \$ 200
Shelby Crows (10		Date \$ 200
R.O. BOX 182075	Office Sought & District # or Jurisdiction	Click Here for Memo Itemization Type
Shelby Tup. Mi 48318		Oloc Flore for Metho leshization Type
i e	County	
4. Purpose: Dunation		
4. Purpose:	Ballot Proposal  Check box if expenditure is payment of Debt	
Fund Raiser	or Obligation reported on previous statement	
Expenditure #4	5.	
Name & Address:	Name of Candidate	
us Postmaster	Control of Marinesta	1/30/16 \$113.19 \$113.19
7755 22 Miles Rel	Office Sought & District # or Jurisdiction	Date
	•	
Shelby Tup MI 48317	County	Click Here for Memo Itemization Type
	Pollot Dennes	
4. Purpose: Stamps	Ballot Proposal  Check box if expenditure is payment of Debt	
Fund Raiser	or Obligation reported on previous statement	
	Su	btotal this page 588.19
	0	
	Grand Total of a (Complete on last pa	all Schedules 2B
	(Complete on last be	
		Enter this total on line 8a of the
1 1		Summary Page

Page 4 of 6



## ITEMIZED DIRECT EXPENDITURES SCHEDULE 2B

1. Committee I.D. Number 139111

2. Committee Name Marcan's Families & Business Cocietion

INDEPENDENT OR POLITICAL CO	MINITIEE 2. Committee Name / 1	Tankines ( ) = = = = = = = = = = = = = = = = = =
Name and address of person or vendor to whom the expenditure was made	5. Candidate or Ballot Question Information	6. Date 7 Amount 8. Cumulative for Election or Election Cycle
Expenditure #1		
Name & Address:	5	1/4/16 100 100
Shelly Community Foundation	Name of Candidate	1/4/16 \$ 100 \$ 100
52100 VAN PYKE	Office Sought & District # or Jurisdiction	
Shelly Tup. Mi 48316		Ottole Lines for Manne Manieration Time
	County	Click Here for Memo Itemization Type
4. Purpose: Donation		
	Ballot Proposal Check box if expenditure is payment of Debt	
Fund Raiser	or Obligation reported on previous statement	
Expenditure #2	-	
Name & Address:	5.	12/15/15 \$100 \$100
Jingle Bell Row	Name of Candidate	12/15/15 \$100 \$100
52702 VAN DYKE	Office of the Pintink and the Pinting	Bale
SITUE VAN VYICE	Office Sought & District # or Jurisdiction	Click Here for Memo Itemization Type
Shelby Tap. M. 48316	David.	, , , , , , , , , , , , , , , , , , ,
Side in the state of the state	County	
4. Purpose: Davation	Ballot Proposal	
	Check box if expenditure is payment of Debt	
Fund Raiser	or Obligation reported on previous statement	
Expenditure #3 Name & Address:	5.	
Hessell's Govenhouse	Name of Candidate	1-1- 200 200
Hessell, Golden 1800	1,44,75	12/7/15 \$ 200 \$ 300
14497 23 Miked.	Office Sought & District # or Jurisdiction	Click Here for Memo Itemization Type
Shelby Tup. MI 48315	County	
To the second se	County	
4. Purpose: Plants	Ballot Proposal	,
l —	Check box if expenditure is payment of Debt	
Fund Raiser	or Obligation reported on previous statement	
Expenditure #4 Name & Address:	5.	
Litheran's for life	Name of Candidate	11-0
Cithera		11 27 15 \$300 \$300
11015th Steet	Office Sought & District # or Jurisdiction	Date
A (5.00 ) . 1A (5-20)		Click Here for Memo Itemization Type
Nevada, 1A 50201	County	
4. Purpose: Dovatios	Ballot Proposal	·
4. Purpose: Dovario	Check box if expenditure is payment of Debt	
Fund Raiser	or Obligation reported on previous statement	
	Su	btotal this page 700
	Grand Total of	all Schedules 2B
	(Complete on last page	
		Enter this total
		on line 8a of the
		Summary Page

Page <u>5</u> of <u>6</u>

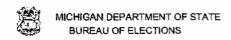
## ITEMIZED DIRECT EXPENDITURES SCHEDULE 2B INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 139111
2. Committee Name March Fander + Business Coalifics

3. Name and address of person or vendor to whom		8. Cumulative
the expenditure was made	Candidate or Ballot Question Information	6. Date 7 Amount for Election or Election Cycle
Expenditure #1	1	
Name & Address:	5	11/13/15
Mc conts Courty Chamber	Name of Candidate	\$ \$550 \$550
rest GB		Date
28 151 St St B	Office Sought & District # or Jurisdiction	
Mt. Cienus, MI 41043		
	County	Click Here for Memo Itemization Type
4. Purpose: Donation		
	Ballot Proposal Check box if expenditure is payment of Debt	
Fund Raiser	or Obligation reported on previous statement	
Expenditure #2	5.	
Name & Address:	Name of Candidate	10/27/15 \$ 289.41 \$555.41
Amere on Speedy	Name or Ganddate	Date \$ 30.07
44723 VAN DYR	Office Sought & District # or Jurisdiction	
-1 11 - 11 (18317)	Ollow Bodgill & Blother # 5. tallet	Click Here for Memo Itemization Type
Shelly Tup MI 48317	County	
1 '.		
4. Purpose: Printing	Ballot Proposal	
Fund Raiser	Check box if expenditure is payment of Debt	
Expenditure #3	or Obligation reported on previous statement	
Name & Address:	5.	
C+G Newspaper	Name of Candidate	7/17/16 \$11,155 \$11,155
13 650 € 11 Miles Rd.	Office Sought & District # or Jurisdiction	
1.14 141 1/0-00		Click Here for Memo Itemization Type
WARREN, MI 48089	County	
110 010		
4. Purpose: Ad for PAC	Ballot Proposal  Check box if expenditure is payment of Debt	
Fund Raiser	or Obligation reported on previous statement	
Expenditure #4	5.	
Name & Address:	Name of Candidate	
	,	\$ \$
	Office Sought & District # or Jurisdiction	Date
		Clinic blass for blass - Householder To-
	County	Click Here for Memo Itemization Type
	Dellas Deservation	
4. Purpose:	Ballot Proposal  Check box if expenditure is payment of Debt	
Fund Raiser	or Obligation reported on previous statement	
	Su	btotal this page 11,994.41
	Grand Total of	all Schedules 2B
	(Complete on last p	age of Schedule) 20, 453, 22

Page 6 of 6

Enter this total on line 8a of the Summary Page



## ITEMIZED INDEPENDENT EXPENDITURES SCHEDULE 2B-1 INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 139111
2. Committee Name Maconb Families y Bouss Confific

**Summary Page** 

Complete this form to report Independent Expenditures made for or against a candidate or a ballot issue. Do not use this schedule to report any direct expenditures to Candidate Committees or Ballot Question Committees, or the provision of in-kind goods or services to Candidate Committees or Ballot Question Committees.

3. Name and address of person or vendor paid	5. Candidate or Ballot Proposal Information	6. Date	7. Amount	8. Cumulative for Election or Election Cycle
Expenditure #1 Name & Address: Home Defot 8760 26 Mills Rd	5. Rick Statlates  Name of Candidate  To unsup Symmetric Staling Typ.  Office Sought & District # or Jurisdiction*	<u>Col 13/16</u> Date	\$ 1,694.95	s 1,694.94
Shelby Tup MI 48316  4. Purpose: Metal Sign Stakes  Support D Oppose D	Ballot Proposal  Macconb  County  Check box if expenditure is payment of Debt or Obligation reported on previous statement	Click Here	for Memo Itemiz	zation Type
Expenditure #2 Name & Address:  5ANS LLC  2C42 Dep-200 DR.	Name of Candidate  (/  Office Sought & District # or Jurisdiction	4/4/16 Date	\$ 700	\$ 1499
4. Purpose: Couse Hing no other Supports D Oppose Dural	Ballot Proposal  County  Check box if expenditure is payment of Debt or Obligation reported on previous statement	Click Here	for Memo Itemiz	zation Type
Expenditure #3 Name & Address:	5	3/1/16 Date		s. 2199
4. Purpose: Cansulting No attended Support Oppose verster	Ballot Proposal  County  Check box if expenditure is payment of Debt or Obligation reported on previous statement	Click Here	for Memo Itemi:	zation Type
	Subto Grand Total of all So (Complete on last page	hedules 2B-1 of Schedule)	Enter this total on tine 9 of the	



# ITEMIZED INDEPENDENT EXPENDITURES SCHEDULE 2B-1 INDEPENDENT OR POLITICAL COMMITTEE

1.	Committee I.D. Number _	13	9111			
2	Committee Name MALL	ځ يه	Families &	Bustanes	Cookela	_

Summary Page

Complete this form to report Independent Expenditures made for or against a candidate or a ballot issue. Do not use this schedule to report any direct expenditures to Candidate Committees or Ballot Question Committees, or the provision of in-kind goods or services to Candidate Committees or Ballot Question Committees.

Name and address of person or vendor paid	Candidate or Ballot Proposal Information	6. Date 7. Amount 8. Cumulative for Election or Election Cycle
Expenditure #1 Name & Address:  SAUS LLC  ACHIL Depen	5. Rick Statistics  Name of Candidate  To inslin Superson, Shelby Tup  Office Solight & District # or Jurisdiction	1/27/16 \$4350 \$3,549
4. Purpose: Consulting - No other vendon Support: Oppose O	Ballot Proposal  Maconb  County  Check box if expenditure is payment of Debt or  Obligation reported on previous statement	Click Here for Memo Itemization Type
Expenditure #2 Name & Address: Roi Business Suictions 31257 Wayner	Name of Candidate  Name of Candidate  Office Sought & District # or Jurisdiction	1/13/16 \$ 400 \$ 400
4. Purpose: Consulting - no other undic	County  Check box if expenditure is payment of Debt or Obligation reported on previous statement	Click Here for Memo Itemization Type
Expenditure #3 Name & Address:  SANS LLC  2612 Degen	5Name of Candidate  C(	12/27/15 \$ 2700 \$4899 Date
4. Purpose: Consulting - No other Support oppose oppose	Ballot Proposal  ( ' County Check box if expenditure is payment of Debt or Obligation reported on previous statement	Click Here for Memo Itemization Type
	Subtraction of all State of the Complete on last page	TT

Page 2 of 3



## ITEMIZED INDEPENDENT EXPENDITURES SCHEDULE 2B-1 INDEPENDENT OR POLITICAL COMMITTEE

1.	Committee I.D. Number 139///	0 -
2.	Committee I.D. Number 191111  Committee Name Macons Families & Business	Coalition

Complete this form to report Independent Expenditures made for or against a candidate or a ballot issue. Do not use this schedule to report any direct expenditures to Candidate Committees or Ballot Question Committees, or the provision of in-kind goods or services to Candidate Committees or Ballot Question Committees.

3. Name and address of person or vendor paid	Candidate or Ballot Proposal Information	6. Date	7. Amount	8. Cumulative for Election Cycle
Expenditure #1 Name & Address: Rol Business Solutions 31257 Wagner	5. Ricle Stateli, Name of Candidate Township Supering 2, Sheller Tup. Office Sought & District # or Jurisdiction	11/18/16 Date	\$/100	\$/5UD
4. Purpose: Consulfing - No Office Used Support Oppose	Ballot Proposal  Accomb  County  Check box if expenditure is payment of Debt or Obligation reported on previous statement	Click Here	for Memo Itemi:	zation Type
Expenditure #2 Name & Address:	5. (1) 1/			
Brad Botis 231 Gorden dale	Name of Candidate  C/  Office Sought & District # or Jurisdiction	12/15/15 Date	\$ 2500	\$ <u>3500</u>
Feerdale, MI 48220	Ballot Proposal	Click Here f	or Memo Itemiz	zation Type
4. Purpose: Co solding -no other veneral Support Oppose	County  Check box if expenditure is payment of Debt or Obligation reported on previous statement			
Expenditure #3	9 01			
Name & Address:	5	in the land	1621	150
Ron Robinson	Name of Candidate	12/1/15 Date	\$ 700	100
13842 Laksidi Chede	Office Sought & District # or Jurisdiction	Click Here	for Memo Itemi	zation Type
Steeling Heights, MI 48313	Ballot Proposal	0		
0.020, 1917, (130)	a Co			
4. Purpose: Vidto Sterris Support: Oppose	County  Check box if expenditure is payment of Debt or Obligation reported on previous statement			
	Sub	total this page	200	
	Grand Total of all S (Complete on last page	Schedules 2B-1	1,244.94	

Enter this total on line 9 of the Summary Page

Page 3 of 3



DEBTS AND OBLIGATIONS	1. Committee I.D. Numb	er_139/1/		
SCHEDULE 2E POLITICAL OR INDEPENDENT COMMITTE		lacons families n	ed Busine	is Coalithis
This Schedule itemizes:  a. Debts and obligations owed by or forgiven the (Check et al., 2007).	committee OR b.	Debts and obligations se checked.)	owed <u>to</u> or forgive	en by the committee.
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 endorsers 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 6 minus Item 8)
Debt#1 Corp? Yes Owed to or by: Rick Statlakis 13883 Timbernew Shilby Tup. M1 48315	4. Type: LOQN  5. Date Debt Was Incurred:  7/17/16  6. Original Amount of Debt	\$ \$ \$	\$_Ø_	\$ 3000
If bank loan, name of endorser or guarantor:	\$ 3000	\$ Ame	ount Endorsed: \$	FORGIVEN
Debt #2 Corp? Yes	4. Type: Low	7311	Linds dod. V	
Owed to or by:	5. Date Debt Was Incurred:  7/17/16  6. Original Amount of Debt	\$ \$ \$	\$_%	1000
	\$ 1,000	\$	<u> </u>	FORGIVEN
If bank loan, name of endorser or guarantor:  Debt #3 Corp? Yes		Amo	ount Endorsed: \$_	
Owed to or by:	4. Type: Cow  5. Date Debt Was Incurred:	\$ \$ \$	\$_\$	\$ <u>400</u>
If bank loan, name of endorser or guarantor:	6. <u>Original Amount of Debt:</u> \$	\$ \$	ount Endorsed: \$	FORGIVEN
		Page Subtotal (	Outstanding debt	4,400
(Cc	omplete on last page of Schedule s		fall Schedules 25 to the committee	

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.

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

Page / of 3



## DEBTS AND OBLIGATIONS

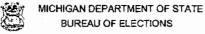
DEBIS AND OBLIGATIONS	<ol> <li>Committee I.D. Numb</li> </ol>	er		
SCHEDULE 2E	,	11. 1 to los	. 0	Cost
POLITICAL OR INDEPENDENT COMMITTE	E 2. Committee Name	Yacomb Families	4 DUSIALSS	CURTAGA
This Schedule itemizes:				
a. Debts and obligations owed by or forgiven the	committee OR b.	Debts and obligations	owed to ar forgive	n by the committee.
(Check ei	ther a or b. Use only for the purpos	se checked.)		
3. Name and mailing Address of person, vendor or	4. Type of Obligation	7. Date and amount of	8. Cumulative	9. Outstanding
financial institution to whom debt is owed.	(Description)	each payment	payment to date on debt	Balance at close of this period
Check box to indicate whether debt is owed to an	5. Indicate date debt was incurred		date on dept	(Item 6 minus Item 8)
incorporated business. If debt is a bank loan, please provide information regarding the endorsers or	6. Indicate original amount			
guarantors, if any.	of debt			
Debt #1 Corp? Yes	4. Type: /		<del> </del>	
Owed to or by:	4. Type: Law	\$	1	
Rick Stathakis	5. Date Debt Was Incurred:		\$	,600
	4	\$	4 '	T
13583 Timberien	5/24/16	\$	<u>.</u> ] '	
•	6. Original Amount of Debt	s		
Shelly Top. Me 48315			1	
Vi I	\$ 600	\$	_	FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$ _	
Debt #2 Corp? Yes	4. Type: Long			·
Owed to or by:		s		
	5. Date Debt Was Incurred:		$\exists s \mathscr{S}$	. 350
(( /)	5/10/16	\$	- *	<b>a</b>
	6. Original Amount of Debt	\$		
	6. Original Amount of Debt		7	}
	\$ 350	<u> </u>	-1	FORGIVEN
		\$		LITORGIVE
Khank to an area of andersor or suprestor		Δm	ount Endorsed: \$_	
If bank toan, name of endorser or guarantor.  Debt #3 Corp? Yes			T T T T T T T T T T T T T T T T T T T	
Owed to or by:	4. Type: Coon	\$	_	
			1.15	700
10 11	5. Date Debt Was Incurred:	9	\ <u>\$</u>	\$200
	4/11/16	. \$	4	
	6. Original Amount of Debt:	s		
	6. Original Amount of Debt.	*	-	FORGIVEN
	, 200	\$		LIFORGIVER
	*			
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	
		Page Subtotal	Outstanding debt	1150
				1730
			f all Schedules 2E	
(Complete on last page of Schedule showing amounts owed by or to the committee.)				7

129111

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.

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

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### DEBTS AND OBLIGATIONS

1. Committee I.D. Number	139	111	,
			•

DEBIG AND OBLIGATIONS	1. Committee I.D. Number	101		
SCHEDULE 2E		c	0	C 11"
POLITICAL OR INDEPENDENT COMMITTEE	2. Committee Name Mecous	tamelas +	Business	Coaleter
This Cahadula itaminas				

POLITICAL OR INDEPENDENT COMMITTEE	2. Committee Name //	(5 65 20)	7 -7 (1 -6.5)	C.C. (2. f. 6)			
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 eithe	er a or b. Use only for the purpos	e checked.)					
financial institution to whom debt is owed.	. Type of Obligation (Description)	Date and amount of each payment	8. Cumulative payment to	Outstanding     Balance at close of this period			
incorporated business. If debt is a bank loan, please	. Indicate date debt was incurred . Indicate original amount of debt		date on debt	(Item 6 minus Item 8)			
	1 T /						
Owed to or by:	1. Type: Low	\$	ci.	860			
Rick Statholis	5. Date Debt Was Incurred:	\$	\$	\$			
BSG TIMBERLIEW	911116	\$					
a 11 To 44 45315 6	6. Original Amount of Debt	\$					
Shelley loft fell love	\$ 800	\$		FORGIVEN			
If bank loan, name of endorser or guarantor: Amount Endorsed: \$							
Debt #2 Corp? Yes 4	4. Type: Com						
	0.00	\$					
	5. Date Debt Was Incurred:	•	s Ø	\$ 1500			
	1/25/16	3		<u> </u>			
	6. Original Amount of Debt	<u> </u>	4				
:	\$ 1500	\$	-	[			
		\$	j	FORGIVEN			
If bank loan, name of endorser or guarantor:	Amount Endorsed: \$						
Debt #3 Corp? Yes	‡. Type:	\$					
	5. Date Debt Was Incurred:	\$					
	Date Dept Was Incurred.	•	\$	\$			
			1				
6	6. Original Amount of Debt:	\$	-	FORONE			
	\$	\$	_	FORGIVEN			
	*						
If bank loan, name of endorser or guarantor.		Amo	ount Endorsed: \$				
If bank loan, name of endorser or guarantor:			ount Endorsed: \$ Outstanding debt)	2300			

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.

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

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