

### 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: August 23,20 to October 23, 2016		
1. Committee I.D. Number 139364		4. Candidate Last Name Kirk	First Name Catherine	м.i. М
		4a. Office Sought Including Dis	trict # or Community Served (If	applicable)
2. Committee Name		Board Member - Local	- Clinton Twp	Trustee
Committee to elect Cathy Kirk		4b. County of Residence MAC	COMB	
5 Committee's Mailing Address 19500 Hall Rd, STE 100		6. Treasurer's Name & Resider Robert W. Kirk	ntial Address	-I _
Clinton Twp, MI 48036		Robert W. Kirk 37539 Hidden Valley Ct.		
		Clinton Two Mi 48036		
				FILE
Area Code and Phone				770 <b>- 1</b>
If the address in this box is different from the commmailing address on the Statement of Organization,	ittee	Area Code & Phone		
be sent to this address by the filing official.		Area Code & Phone		(F -v1
7. Treasurer's Business Address 19500 Hall Rd		B. Designated Record keeper's     Designated Record keeper)	s Name and Mailing Address (I	f the committee has a
STE 100		,		*• <b>¾</b>
Clinton Twp, Mi 48038				
Area Code and Phone		Area Code and Phone		
9. TYPE OF STATEMENT		Alea Code and Thore	9e.	
9a. Pre-Election OR 9b. Post-Election		NLY if candidate ballot for the	By checking this item I/M	e certify any outstanding debt
	current year:			date or his or her spouse is here
Pre-Election or Post-Election Statement relates to:	July Quart	terly	the committee. The committee lowes no lates fees or has any	e has no oustanding assets,
Primary	October C	nuarterly		•
General		danciny	Further, if the dissolution canr considered a request for the F	not be granted, that this be Reporting Waiver.
Convention				•
Special Special	9c. Annua	al Statement () Coverage Year	Effective date of dis	solution
School				
Caucus	Com (Com	ndment to Campaign Statement plete Item 9a, 9b, 9c or 9e to	Note: The disposition of resid	ual funds must be reported on
	indica	ite which Statement is being ded.)	Schedule 1B and the Summa	
Date of Election, Convention or Caucus				
November 8,2016				
10. Verification: I\We certify that all reasonable dilig my\our knowledge and belief the contents are true,	ence was used accurate and c	in the preparation of this statem omplete.	ent and attached schedules (if	any) and to the best of
Current Treasurer or Robert Kirk Designated Record keeper		1	Date	10/26/2016
Type or Print Name		Signature	ŧ	
Catherine Kirk		, Cather Kul	Date	10/26/2016
Type or Print Name	)	Signature		

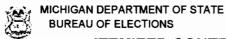


Committee L.D. Number	139364
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SUMMARY PAGE
CANDIDATE COMMITTEE

Committee To Elect Cathy Kirk

CANDIDATE COMMITTEE	2. Committee Name	
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		Sulfmative time distriction by the
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	
b. Uniternized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	14
c. Subtotal of "Contributions"	(3c.) \$ 14,100.00	(18.) \$ 14,100
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.)\$ O _
6. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ 14,100.00	(20.) \$ 14,100
IN-KIND CONTRIBUTIONS & EXPENDITURES		29
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ 2158.29 0	(21.)\$ 2,158.29
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures	10,229.62	
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ 0 0	
c. Uniternized (less than \$50.01 each - no Schedule)	(8c.) \$ 10,229.62	1077962
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	(23.)\$ 10,229.02
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)		-0-
DEBTS AND OBLIGATIONS	(11.) \$	(24.) \$
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ 0	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ 0	
(Enter zero if no previous reports have been filed.)	14 100 00	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	14,100.00	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	
16. Amount expended during reporting period	10.229.62	
(Add lines 9 and 11) 17. ENDING BALANCE	(16.) - \$	
(Subtract line 16 from line 15)	(17.) \$ 3870.38	•



Page 1 of 1

### **ITEMIZED CONTRIBUTIONS SCHEDULE 1A**

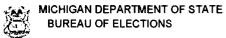
### **CANDIDATE COMMITTEE**

139364

1. Committee I.D. Number Committee To Elect Cathy Kirk

line 3a of Summary

CANDIDATE COMMITTEE 2. Committee Name		·
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
73. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/18/2016 Name & Address: YES 4. Date of Receipt 49536 Goulette Point Dr. New Baltimore, MI 48047	500.00	. 500-
5. If over \$100.00 cumulative, please provide:  Owner  Employer  Employer	\$Click Here f	or Memo Itemization
Business Address  49536 Goulette Point Dr., New Baltimore, MI 48047  Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/18/2016  Name & Address  Amy P. Hathaway  2000 Town Ctr STe 1490  Southfield, MI 48075-1308	\$	, 200 <u> </u>
5. If over \$100.00 cumulative, please provide:  Attorney  Self  Occupation  2000 Town Center Set-1490  Type of Contribution: Direct  Loan from a person  Fund Raiser	Click Here fo	or Memo Itemization
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 9/19/2016  Name & Address: Paul Torres 37230 Willow Lane Clinton Twp, Mi 48036  5. If over \$100.00 cumulative, please provide: Occupation	\$200.00 SClick Here fo	s 200— or Memo Itemization
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 9/19/2016 Name & Address Kristin Giacalone 39283 W. Royal Doulton Clinton Twp, MI 48038-2671	100.00 \$	100-
6. If over \$100.00 cumulative, please provide:  Occupation Employer  Business Address	Click Here fo	or Memo Itemization
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal  Grand Total of All Schedules 1A (Complete on last page of Schedule)	1000.00	



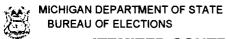
### **CANDIDATE COMMITTEE**

139364

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

Committee To Elect Cathy Kirk
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 9/22/2016 Name & Address: QUITINO D'AIESSANDO		-
125 SE TH CT Deerfield BCH, FL33441-4749	1000.00	\$1,000-
5. If over \$100.00 cumulative, please provide: Owner  Employer  Employer	Click Here for	or Memo Itemization
Business Address 28135 Groesbeck, Roseville Mi 48066		
Type of Contribution: V Direct Loan from a person V Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9/28/2016  Name & Address		
CTE Cecil St. Pierre District 3 32595 Sabrina Ct Warren, Mi 48093	100.00 \$	s 100 -
Waiteri, Wii 46093		
5. If over \$100.00 cumulative, please provide: Political Committee	Click Here fo	or Memo Itemization
Occupation Van Dyke, Sterling Heights, MI 48314		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 9/30/2016		
Mr. Ronald Estes 3232 East Breckenridge Lane	100.00	100.00
Bloomfield Township, MI 48301	\$	<b>.</b> \$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Lawyer Center Management Services		
Occupation 34122 Woodward, Birmingham MI 48009  Business Address		
Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/15/2016		
Name & Address Tony Gallo		
6303 26 Mile Rd	200.00	200-
Washington MI 48094	\$	. \$
5. If over \$100.00 cumulative, please provide:  Real Estate  Gallo Companies	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address 6303 26 mile Rd, Washington, MI 48094		
Type of Contribution: Direct Loan from a person Fund Raiser	104 100 00	
Page Subtotal	\$1400.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
	Enter this total on line 3a of Summary	Y
Page 2 of 17	Page.	



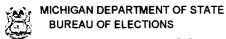
### **CANDIDATE COMMITTEE**

1. Committee I.D. Number

139364

Committee To Elect Cathy Kirk 2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
/3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 9/15/2016		
Name & Address: Maria Grot		
38966 Marlborough	100.00	
Sterling Heights, MI 48310	100.00 \$	\$ 100-
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer	Olick Flore Ic	Womo Romization
Business Address		
Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9/15/2016		
Name & Address		
Craig Wolanin	100.00	
4891 Gallagher	100.00 s	$100^{-}$
Rochester Hills, MI 48306		<u> </u>
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 9/15/2016 Name & Address: Charles Reaume 11235 Embassy Ct Shelby Township, MI 48315	100.00 \$	<u>s 100-</u>
	Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 9/15/2016		
Name & Address ———————————————————————————————————		!
5228 Caraway Dr.	100.00	. ~ ~ :—
Sterling Heights, MI 48314	\$	\$ 100
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$400.00	
	<b></b>	-
Grand Total of All Schedules 1A (Complete on last page of Schedule)		j
	Enter this total on	
Page $3$ of $1$	line 3a of Summary Page.	

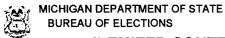


### **CANDIDATE COMMITTEE**

139364

1. Committee I.D. Number Committee To Elect Cathy Kirk 2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <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 09/15/2016		
Name & Address:		
347 Pine Ridge Dr.		
Bloomfield hills, MI	100.00	· 100 -
	\$	\$ 100
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		or monto normzanom
Business Address		
Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/15/2016		
Name & Address		
Paula Filar		
5500-24 Mile Rd	100.00	100-
Shelby Twp, Mi 48316	\$	. \$
	0" 1 1	M to
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/15/2016	<del> </del>	
Name & Address:		
Mark Plawecki	100.00	
26736 Cecile	\$ 100.00	, 100 -
Dearborn Heights, MI 48127		Ψ
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:   Direct Loan from a person   Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/15/2016		
Name & Address		
Keith Cermak	400.00	
14881 Stoney Brook	100.00	100-
Shelby Township, MI 48315	•	. \$
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		
Page Subtotal	400.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	L	┙
	Enter this total on line 3a of Summar	<b>v</b>
Pageof	Page.	•

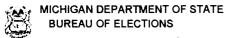


### **CANDIDATE COMMITTEE**

139364

1. Committee I.D. Number \_\_\_\_\_\_\_Committee To Elect Cathy Kirk
2. Committee Name \_\_\_\_\_\_

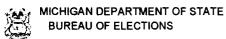
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/15/2016  Name & Address: Stan Grot  11927 Hiawatha Dr. Shelby Township, MI 48315	. 150.00	, 150-
5. If over \$100.00 cumulative, please provide:  Township Clerk  Occupation  11927 Hiawatha Dr, shelby Township, MI 48315  Type of Contribution:  Direct  Loan from a person  Fund Raiser	Click Here f	or Memo Itemization
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/15/2016  Name & Address Frank Lalama 56841 Copperfield Dr. Shelby Township, MI 48316	\$	s 100 T
If over \$100.00 cumulative, please provide:  Occupation Employer	Click Here fo	or Memo Itemization
Business Address	<del></del>	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/15/2016  Name & Address: Domenica Dinello 12870 Honey Locust Dr. Shelby Township, MI 48315	100.00 \$Click Here fo	sor Memo Itemization
5. If over \$100.00 cumulative, please provide:  Occupation Employer		
Business Address  Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/15/2016  Name & Address  Kurt BroadBridge  45619 thorn Tree Lane  Macomb, MI 48044	100.00	s 100 T
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser	.16450.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule		y



### **CANDIDATE COMMITTEE**

139364 1. Committee I.D. Number					
2. Committee Name	mmittee To E	lect Cathy Kirk	_		
nter last name, first name.	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)
73. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/15/2016 Name & Address: LINDA TOTP 38870 Ryan Ct	100.00	
Harrison TWP, MI 48045	100.00 \$	\$ 100-
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer	Ollow Flore 10	or world kornization
Business Address		
Type of Contribution:   Direct Loan from a person Fund Raiser	والمستوال المستوال	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/01/2016		
Name & Address Lawrence Scott		
12900 Hall Rd	100.00 s	$-\omega_1$
Sterling Heights, MI 48313	Y	<b>*</b>
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/01/2016		
Name & Address: Anthony Fanelli	100.00	
50466 Heatherwood Lane,	100.00 \$	s 100 -
Shelby Township, MI 48317	Click Here for	r Memo Itemization
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address  Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/01/2016		
Name & Address		
Viktor GjonAJ 14523 BOURNEMUTH DR.	200.00	2000
SHELBY TWONSHIP, MI 48315	\$	<u>s</u> 200-
5. If over \$100.00 cumulative, please provide:	Cliab Hara fa	r Memo Itemization
Reasl Etsate Broker LandMark Real estate Service	Olick Here to	i wemo kemization
27995 Halsted Rd #150, Farmington Hills, MI 48331		
Business Address		
Type of Contribution:   Direct Loan from a person Fund Raiser  Page Subtotal	\$500.00	
•		-
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
Page 6 of 17	line 3a of Summary Page.	,



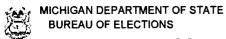
### ITEMIZED CONTRIBUTIONS SCHEDULE 1A

### **CANDIDATE COMMITTEE**

139364

1. Committee I.D. Num	ber
	Committee To Elect Cathy Kirk
2. Committee Name _	

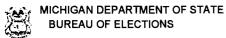
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 9/15/2016 Name & Address: VICO K. STOIIS		
205 North Gratiot Mt. Clemens, MI 48043	200.00 \$	£900-
5. If over \$100.00 cumulative, please provide:  Owner  Employer  Employer	Click Here fo	r Memo Itemization
Business Address 205 North Gratiot, Mt. Clemens, MI 48043		
Type of Contribution:   Direct  Loan from a person  Fund Raiser	M	į
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9/15/2016  Name & Address		
Gregory Buss		
12900 Hall Rd Sterling Heights, Mi 48313	\$	<u>\$ 200-</u>
5. If over \$100.00 cumulative, please provide:  Lawyer  Coccupation Employer	Click Here to	r Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 9/15/2016 Name & Address:		
Steve Mancini 37532 Hidden Valley Ct.	\$ 200.00	. 200-
Clinton Twp, MI 48036		\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation — Ric-man construction — Employer		
Business Address 6850 19 mile rd. Sterling heights, MI 48314		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 9/15/2016 Name & Address CTE Stanley Grot		
11927 Hiawatha Dr.	100.00	100 -
Shelby Township, MI 48315	\$	\$
5. If over \$100.00 cumulative, please provide:  Political Committee Occupation Employer	Click Here for	Memo Itemization
11927 Hiawatha Dr.Shelby Township, MI 48315-1244		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$700.00	
Grand Total of All Schedules 1A		-
(Complete on last page of Schedule)	Enter this total on	J
7 17	line 3a of Summary	



### **CANDIDATE COMMITTEE**

1. Committee I.D. Number	139364	
2. Committee Name	mmittee To El	ect Cathy Kirk
nter last name, first name, tee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through

	Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
	/3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 09/14/2016		
1	Name & Address: Guy Rizzo		
	65 Macomb Place Ste. F	200.00	200-
	Mount Clemens, MI 48043	\$	\$ 200-
	5. If over \$100.00 cumulative, please provide:  Occupation  Builder  Employer  Employer  Addition 100.000	Click Here fo	or Memo Itemization
l	Business Address 65 Macomb Place Mi 48043		
١	Type of Contribution:   Direct Loan from a person Fund Raiser		
I	3/ Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/14/206		
	Name & Address		
٩	Michael A. Chirco	100.00	
l	46600 Romeo Plank Rd. Ste 5 Macomb MI 48044	\$	s 100 -
l	Wacomb Wi Toott		
I	5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
۱	Developer/Builder Chirco Homes  Occupation Employer		
	46600 Romeo Plank Rd. Ste5, Macomb MI 48044		
	Type of Contribution:     Direct   Loan from a person   Fund Raiser		
	3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/14/2016  Name & Address:		
1	David Runyon	400.00	
	34901 Woodward,	100.00 \$	, 100 –
	Birmingham MI 48009		
	5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
١	<b>F</b> ood		
	Business Address  Type of Contribution:   Direct  Loan from a person  Fund Raiser		
	3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/14/2016		<del></del>
	Name & Address		
1	Frank Coppola		
	54620 Carnation Drive Macomb MI 48042	100.00	. 100 -
	Wacomb IVII 40042	4	. •
	5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
	Occupation Employer		
	•		
	Business Address		
	Type of Contribution:   Direct Loan from a person Fund Raiser		
	Page Subtotal	\$500.00	_
	Grand Total of All Schedules 1A		
	(Complete on last page of Schedule)	Enter this total on	_
	Page 6 of 17	line 3a of Summar Page.	у

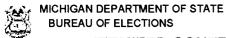


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139364

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Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/13/2016  Name & Address: Andrea Nocolella		
37548 Hidden Valley Ct. Clinton Township, MI 48036	300.00 \$	\$ 300 -
5. If over \$100.00 cumulative, please provide:  Homemaker  Occupation Employer	Click Here for	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 09/12/2016		
Name & Address  CTE Peter J. Lucido		
6303 26 Mile Rd. Ste 203	100.00	100 -
Washington, MI 48094	\$	\$ 100
5. If over \$100.00 cumulative, please provide: Political Committee	Click Here fo	or Memo Itemization
Occupation Employer Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/12/2016  Name & Address:		
Gino Morelli 22756 Macomb Industrial Drive	200.00	. 200-
Clinton Township, Mi 48036	\$	* 400
	Click Here fo	or Memo Itemization
5. If over \$100.00 cumulative, please provide:  Builder Self		
Occupation Employer 22756 macomb Industrial Drive, Clinton Twp, 48036		
Business Address  Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/12/2016		
Name & Address  Joseph Vicari		!
37523 Hidden Valley Ct,	150.00	15.7
Clinton Township, MI 48036	\$	. \$
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer Andiamos	2	
7096 E. 14 mile RD, Warren Mi 48092		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	750.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
(Complete on last page of Schedule)	Enter this total on line 3a of Summar	v
Pageof \ \ \	Page.	•



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### **ITEMIZED CONTRIBUTIONS SCHEDULE 1A**

#### **CANDIDATE COMMITTEE**

139364

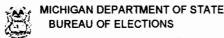
1. Committee I.D. Number

Committee To Elect Cathy Kirk

CANDIDATE COMMITTEE 2. Committee Name		·
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <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 09/06/2016  Yame & Address: Thomas Guastello 34129 Woodward  Birmingham MI 48009	100.00	. 100 ~
Birmingham Wi 40000	\$	<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 #2 PAC Receipt? YES 4. Date of Receipt 09/12/2016  Name & Address CTE Kim Meltzer 20585 Leelanau Trail Clinton Township, MI 48038	100.00	s 100 -
5. If over \$100.00 cumulative, please provide:  Political Committee  Coccupation	Click Here t	or Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/12/2016 Name & Address: Bruce Morris 13411 24 mile rd Shelby Township, MI 48315	 	<u>\$ 200 -</u>
5. If over \$100.00 cumulative, please provide:    Insurance	Click Here f	or Memo Itemization
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/12/2016 Name & Address Hank Riberas		
6471 Metropolitan PKWY, Sterling Heights, MI 48312	200.00 \$	; <u>200</u> -
5. If over \$100.00 cumulative, please provide:  Manager  Employer  Charling Maintain Manager  Charling Maintain Manager  Charling Manager  Charling Manager	Click Here f	or Memo Itemization
Business Address 6471 Metropolitan Parkway, Sterling Heights MI 48312		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtol	fal 600.00	
Grand Total of All Schedules 1	A (	

(Complete on last page of Schedule)

Enter this total on line 3a of Summary



139364

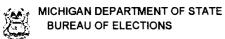
1. Committee I.D. Number Committee To Elect Cathy Kirk CANDIDATE COMMITTEE 2. Committee Name Enter contributor's name and address. If contribution is from an individual, enter last name, first name. 6. Amount 7. Cumulative for Election Cycle for Each middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount. Contributor (Through date of receipt) 09/06/2016 3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt Mame & Address: Phil Riggio 37564 Hidden Valley Ct. 200.00 Clinton Township, MI 48036 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Aunt Mids Produce Company Owner Employer Occupation 7939 Lafayette Blvd. Detroit, MI 48209 **Business Address** Type of Contribution: **Fund Raiser** Direct Loan from a person 4. Date of Receipt 09/06/2016 3. Contribution #2 PAC Receipt? YES Name & Address Joseph Oram 500.00 500-P.O.box 252755 West Bloomfield Hills, MI 48325 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: 5 Star Outdoor Owner **Employer** Occupation . p.o. box 252755 West Bloomfield Hills < mi 48325 **Business Address** Type of Contribution: **Fund Raiser** Direct Loan from a person 4. Date of Receipt 09/06/2016 3. Contribution #3 PAC Receipt? YES Name & Address: Luciano Gianino 40258 Emerald Lane Clinton Township, Mi 48038 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Employer\_ Occupation **Business Address** Direct Fund Raiser Type of Contribution: Loan from a person 4. Date of Receipt 09/06/2016 3. Contribution # 4 PAC Receipt? Name & Address Alfredo Deflavis 19657 Ashlev Ct. Livonia Mi 48152 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation\_ **Business Address** Type of Contribution: 1 Loan from a person **Fund Raiser** Direct 900.00 Page Subtotal

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

Enter this total on

line 3a of Summary Page.

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### **CANDIDATE COMMITTEE**

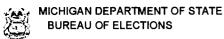
139364

1. Committee I.D. Number \_ Committee To Elect Cathy Kirk 2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent  Committee (PAC) Report all contributions regardless of amount.  7. Cumulative for Election Cycle for Each Contribution Cycle for Each Cycle fo				
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 09/01/2016				
Name & Address: Eugene C. Lovell				
24300 Little Mack				
st. Clair Shores, MI 48080	500.00 \$	s 500 -		
5. If over \$100.00 cumulative, please provide: President First State Bank	Click Here for	or Memo Itemization		
Occupation Employer				
Business Address 23600 Greater Mack Ave, St, Clair shores, MI 48080				
Type of Contribution:   Direct Loan from a person Fund Raiser				
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/06/2016				
Name & Address				
√Ai Lahood	400.00	_		
20233 Mack Avenue	100.00	. 100 -		
Grosee Pte Woods, MI 48236	Ψ	, <u> </u>		
	Cliak Hara fo	or Memo Itemization		
5. If over \$100.00 cumulative, please provide:    Real Estate Investor   Self/Owner	Click Here to	A MALLIO HALLISTER		
Occupation Employer				
Business Address 20233 Mack Avenue, Grosse Pte, Woods, MI 48236				
Type of Contribution: Direct Loan from a person Fund Raiser				
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/06/2016				
Name & Address:				
Roy Rose	100.00			
55620 Woodridge	\$ 100.00	, 100 -		
Shelby Township, MI 48316		• •		
	Click Here fo	r Memo Itemization		
5. If over \$100.00 cumulative, please provide:				
Occupation Employer				
Business Address				
Type of Contribution:   Direct Loan from a person Fund Raiser				
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/06/2016				
Name & Address				
Gordon b. Wilson	400.00	_		
49752 Compass point Dr.	100.00	100 -		
Chesterfield, mi 48047	<b>2</b>	. \$		
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				
Page Subtotal	800.00			
·		-		
Grand Total of All Schedules 1A (Complete on last page of Schedule)				
(Complete on last page of Schedule)	Enter this total on			

Page 12 of 17

line 3a of Summary Page.



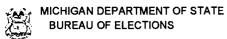
139364

1. Committee I.D. Number Committee To Elect Cathy Kirk **CANDIDATE COMMITTEE** 2. Committee Name Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount 7. Cumulative for Election Cycle for Each middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Contributor (Through Committee (PAC) Report all contributions regardless of amount. date of receipt) 09/12/2016 3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt Name & Address: Frank S. Aragona 3321 Vineyard Hill 100.00 Rochester Hills, MI 48306 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation Employer\_ Business Address Type of Contribution: Direct **Fund Raiser** Loan from a person 4. Date of Receipt 09/12/2016 IYES 3. Contribution #2 PAC Receipt? Name & Address Michael A. Locricchio 38202 Saddle Lane 200.00 Clinton Township, MI 48036 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Metzler, Locricchio Serra & cor Accountant Employer, Occupation 1800 W. Big Beaver Rd. #100 Troy, MI 48084 **Business Address** Type of Contribution: Direct **Fund Raiser** Loan from a person 4. Date of Receipt 09/12/2016 3. Contribution # 3 PAC Receipt? YES Name & Address: Joseph Paluzzi III 399 Fisher Rd. Grosse Pointe MI 48210 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: home builder Employer Occupation 399 Fisher Rd, Grosse Pte, MI 48210 **Business Address** Type of Contribution: Loan from a person **Fund Raiser** 4. Date of Receipt 09/12/2016 PAC Receipt? 3. Contribution # 4 Name & Address James George 19634 westchester 500.00 Clinton Township, MI 48038 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Developer Delta Management Occupation Employer 45511 Market Street, Macomb MI 48315 **Business Address Fund Raiser** Type of Contribution: Direct Loan from a person \$1050.00 Page Subtotal

Page 13 of 17

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

Enter this total on line 3a of Summary Page.



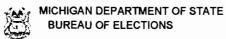
### **CANDIDATE COMMITTEE**

139364

1. Committee I.D. Number

Committee To Elect Cathy Kirk 2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <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 9/12/2016 Name & Address: Annette Nucci 37628 Hidden Valley Ct Clinton Twp, MI 48036-3669	100.00 s	s 100 -
5. If over \$100.00 cumulative, please provide:	Click Horo fo	or Memo Itemization
Occupation Employer	Click riele ic	or Memo Remization
Business Address  Type of Contribution:   Direct Loan from a person Fund Raiser		
Type of Contribution: Direct Loan from a person Fund Raiser  3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9/15/2016		
Name & Address Rob Huth	500.00	. 500-
19500 Hall Rd, Ste100, Clinton Twp,48038	<b>a</b>	\$
5. If over \$100.00 cumulative, please provide:  Lawyer  Kirk, Huth, Lange & Badalame	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		i
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 9/15/2016  Name & Address: Lawrence Campbell 6690 VernMoor Dr  Troy, MI 48098	\$	<u> 500 - </u>
	Click Here for	r Memo Itemization
5. If over \$100.00 cumulative, please provide: Owner Century 12 Campbell		
Occupation 1186 E 12 Mile Rd. Madison Heights, 48071		
Type of Contribution:   Direct  Loan from a person  Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 9/15/2016		
Anthony Apone-4741 24 Mile rd, LLC 51543 Van Dyke Ave Shelby Township, MI 48316	250.00	<u>250 -</u>
6. If over \$100.00 cumulative, please provide:  Real Estate Investor  Occupation  Employer	Click Here for	r Memo Itemization
4741 24 Mile rd, 51543 VanDyke Ave, Shelby Twp, MI Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	1350.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
Page LY of 17	line 3a of Summary Page.	,



### **CANDIDATE COMMITTEE**

139364

1. Committee I.D. Number

2. Committee Name

Committee To Elect Cathy Kirk

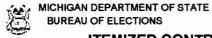
Enter contributor's nam middle initial. Check be Committee (PAC) Repo	x to indicate if con	hbu	tion is from a Political Co	ual, en mmitte	•	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Hachael Badlam	PAC Receipt?		YES 4. Date of R	eceipt	09/15/2016		
19500 Hall rd.	40000					500.00	<b>.</b>
Clinton Twp, MI	48036					500.00 \$	\$ 500 -
5. If over \$100.00 cum	ulative, please pro	vid				Cliek Hore fo	ou Marsa Itamization
Occupation Lawyer		_	Kirk, Huth Employer	La	nge, Baldamenta	Click Here to	or Memo Itemization
Business Address							
Type of Contribution:	✓ Direct		Loan from a person	<b>V</b>	Fund Raiser		
3. Contribution #2	PAC Receipt?		YES 4. Date of Re	eceipt	09/01/2016		
Name & Address	•			•			
John Russo							
37507 Hidden V	•					200.00	, 200-
Clinton Twp. MI	48036					V	<del></del>
5. If over \$100.00 cum	ılative, please pro	vid				Click Here fo	r Memo Itemization
Occupation Auto De	aler	Fr	self				
408	30 24th Aven	_	, Fort Gratiot Tow	nsh	ip. Mi 48059		
Business Address		_					
Type of Contribution:	Direct		Loan from a person	<b>∠</b>	Fund Raiser		
3. Contribution # 3	PAC Receipt?		YES 4. Date of R	eceipt	09/01/2016		
Name & Address: Rick Walkowiak							
20333 Hall Rd						200.00	, 200-
Macomb, MI 480	)44					\$	\$ <del>0</del> 00
						Click Here for	r Memo Itemization
5. If over \$100.00 cum Owner	ulative, please pro	vid	e: restaurant				
Occupation	00 11-11 1		mployer	•			
Business Address			comb MI 48044	_			
Type of Contribution:	Direct		Loan from a person	<b>✓</b>	Fund Raiser		
3. Contribution # 4	PAC Receipt?		YES 4. Date of F	Receip	t		
Name & Address							
		_				\$	\$
5. If over \$100.00 cum	ulative: please pro	bid	e:				
/	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•				Click Here for	r Memo Itemization
Occupation		-	Employer				
Business Address			`				
Type of Contribution:	Direct		Loan from a person		Fund Raiser		
<del>`</del>			<del> </del>		Page Subtotal	900.00	
				Cm	d Total of All Schedules 1A		-
			(C		te on last page of Schedule)	Catao this tatal	J
Page 15 17						Enter this total on line 3a of Summary	
Page of 1						Page	



### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_\_Committee To Elect Cathy Kirk
2. Committee Name \_\_\_\_\_

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/12/2016 Name & Address: RIZZO Environmental Services PAC 6200 Elmridge	1 000 00	
Sterling Heights, MI 48313	1,000.00 \$	\$ 1,000-
5. If over \$100.00 cumulative, please provide:	Click Here for	or Memo Itemization
Occupation Employer	RETURNE	d-See Jituess-IB
Business Address	sche	Altores - 7D
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/12/2016		
Name & Address Donna Hassig		
237 Church Št.	200.00	, 200-
Mt. Clemens MI 48043	<b>3</b>	. \$ 0
6. If over \$100.00 cumulative, please provide: Owner Glitz & Ears Employer	Click Here fo	or Memo Itemization
40817 Garfield, Clinton Twp. MI 48036		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/12/2016 Name & Address: Stephen H. Saph 44 Macomb PLace	<sub>§</sub> 100.00	. 100-
P.O> Box 46907	<u> </u>	. \$
Mt. Clemens 5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Insurance Agent Employer Nickel & Saph		
Business Address 49 MACOMB PIGC		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/12/2016 Name & Address Phil Ruggeri		
55764 St. Regis Shelby Township, ml 48315	100.00 \$	s 100 -
6. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer	Ollow Flore IC	omo nomeduon
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$1400.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this tetal a	
Page 16 of 17	Enter this total on line 3a of Summar Page.	y



#### **CANDIDATE COMMITTEE**

139364

1. Committee I.D. Nu	ımber
0.0	Committee To Elect Cathy Kirk
2. Committee Name	

	x to indicate if cont	ribution	is from a Political Comress of amount.	, enter last name, first name, nittee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: BOD KIRK 37539 Hidden Va	PAC Receipt?	YE	S 4. Date of Reco	os/19/2016		
Clinton Twp, MI					1000.00 \$	\$ 1.600 -
5. If over \$100.00 cum Coccupation Lawyer Business Address		_ Emp	self 00 Clinton Twp	MI	Click Here fo	or Memo Itemization
Type of Contribution:	<b>∕</b> Direct	Lo	an from a person	Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	YE	S 4. Date of Rece	pipt		
					\$	. <b>\$</b>
5. If over \$100.00 cumu	ılative, please pro	vide:			Click Here fo	or Memo Itemization
Occupation		Emplo	yer			
Business Address						
Type of Contribution:	Direct	Los	an from a person	Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YI	ES 4. Date of Rec	eipt		
					\$	. \$
5. If over \$100.00 cum	ılative, please pro	vide:			Click Here fo	r Memo Itemization
Occupation		Emp	oloyer	48-48-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		
Business Address		-				
Type of Contribution:	Direct	Lo	an from a person	Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?	Ш۲	ES 4. Date of Re	ceipt		
					<b>\$</b>	. \$
5. If over \$100.00 cum	ulative, please pro	vide:			Click Here fo	r Memo Itemization
Occupation		_ E	Employer			
Business Address	<del> </del>					
Type of Contribution:	Direct	له	an from a person	Fund Raiser		
				Page Subtota	\$1000.00	

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

Enter this total on

line 3a of Summary Page.

Page 17 of 17



### ITEMIZED OTHER RECEIPTS SCHEDULE 1A-1

### **CANDIDATE COMMITTEE**

1. Committee I.D.	139364 Number
	Committee To Elect Cathy Kirk

3. Name & Address From Who	m Bossius 4 Bats of Bossius	2. Committee Name
Receipt #1	m Received 4. Date of Receipt  Date of Receipt	5. Type of Receipt 6. Amount
Name & Address:	Date of Necelpt	Loan from a Lending Institution  Interest  \$
		Refund \Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
Receipt #2 Name & Address:	Date of Receipt	Loan from a Lending Institution
		Interest
		Refund \Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
Receipt #3 Name & Address:	Date of Receipt	Loan from a Lending Institution
		s
		Refund \Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
Receipt #4 Name & Address:	Date of Receipt	Loan from a Lending Institution
		\$
		Refund \Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
Receipt #5 Name & Address:	Date of Receipt	Loan from a Lending Institution
		Interest \$
		Refund \Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
Receipt #6 Name & Address:	Date of Receipt	Loan from a Lending Institution
		Interest \$
		Refund \Rebate Click for Memo Itemization Type
	Fund Raiser	Other (Specify)
Receipt #7 Name & Address:	Date of Receipt	Loan from a Lending Institution
		\$
		Click for Memo Itemization Type
	C Sund Salara	Other (Specify)
	Fund Raiser	Page Subtotal 0
		Grand Total of All Schedules 1A -1
		(Complete on last page of Schedule)

Enter this total on line 4 of Summary Page

Page  $\frac{1}{2}$  of  $\frac{1}{2}$ 



# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

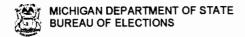
#### 139364

	100004
1. Committee I. D. Num	per
C	ommittee To Elect Cathy Kirk
O Committee Name	Similar to Elour Guary Turk

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount	
Expenditure #1 Name Younique Cards.com Inc		8/18/20	\$ 350.00	
Address 42816 Willsharon Sterling Heights, Mi 48314	Purpose:Click H	Date lere for Memo It	emization Type	
<b>√</b> Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement			
Expenditure #2 Name Barbara Bulic		08/16/20	<sub>\$</sub> 50.00	
Address 8400 Yardley #E Washington, Mi 48094	Invitations/response Ca Purpose:Click H	Date Here for Memo It	emization Type	
✓ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement			
Expenditure #3  Name Macomb County Clerk	filing fee	09/06/2( Date	\$ 70.00	
Address 40 North Main Street Mt. Clemens MI 48041	Purpose: Date Click Here for Memo Itemization Type			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement			
Expenditure #4 Name Graphics East	Printing/Mailing	09/09/20 Date	\$ <u>1177.66</u>	
Address 16005 Sturgeon St. Roseville, MI 48066	Purpose:	Here for Memo I	temization Type	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement			
Expenditure #5 Name Villa Penna	Fund Raiser food	09/14/2( Date	\$ <u>1371.10</u>	
Address 43985 Hayes Rd. Sterling Heights, MI 48313	Check box if this expenditure is payment of debt or obligation reported on previous		temization Type	
Fund Raiser	statement	otal this page	3018.76	
	Grand Total of all (Complete on last page			

Enter this total on line 8a of Summary Page

Page  $1_{\text{of}}$ 



# SCHEDULE 1B CANDIDATE COMMITTEE

#### 139364

	100001	
1. Committee I. D. N	umber	
	Committee To Elect Cathy Kirk	
2. Committee Name	•	

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		<del>, • · · · · · · · · · · · · · · · · · · </del>	
Name younique Cards.com		09/22/20	<b>.</b> 75.00
name yourname our worker.	Cards	Date	\$ 75.55
Address	Purpose:	Date	
Address 42816 Willsharon	Clint L	Here for Memo It	emization Type
Sterling Heights, MI 48314	CHCK F	IOIO IOI INIDINO II	omization Type
✓ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
	statement		
Expenditure #2		40/04/04	
Name C& G Newspapers		10/01/20	<sub>\$</sub> 389.00
	Advertising	Date	Φ
Address	Advertising Purpose:	24.0	
13650 East 11 Mile Rd		love & - A.	omiration T
Warren, MI 48089	Click F	lere for Memo It	emization type
	Check box if this expenditure is payment of		
<b></b>	debt or obligation reported on previous		
Fund Raiser	statement	Revise 1001011111111111111111111111111111111	
Expenditure #3			
Name G Tek Professional Services		10/01/20	0100.00
	Signa		<sub>\$</sub> 2130.60
Address	Signs Purpose:	Date	
Address 42888 Mound Rd.			
Sterling Heights, MI 48314	Click F	Here for Memo It	emization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
	statement		
Expenditure #4			
Name Clinton Township Goodfellows		09/19/20	s 168.00
	Donation	Date	\$ 168.00
Address	Purpose:	_4.0	-
P.O. Box 380643			
Clinton Twp Mi 48038	Click I	Here for Memo I	temization Type
	Check box if this expenditure is payment of		
	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name Graphics East Inc.		10/07/20	0000
	mailings		<sub>\$</sub> 2896.66
Address	Purpose:	Date	
16005 Surgeon St.	00-1-1	Here for Mome	temization Tune
Roseville, MI 48066	l		Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Unamed	Subtr	otal this page	5659.26
	Cubit		
	Grand Total of all		
	(Complete on last page	e of Schedule)	

Enter this total on line 8a of Summary Page

Page 2 of 3



## ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

#### 139364

1. Committee I. D. Number

Committee To Elect Cathy Kirk
2. Committee Name

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Graphics East inc	_ Mailings	10/13/2( 	\$ 551.60
16005 Sturgeon Roseville, Mi 48066	Purpose:		Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2  Name Rizzo Environmental Services	Deturned Centribution	10/22/2( 	\$ 1000.00
Address 6200 Elmridge Sterling Heights, MI 48313	Returned Contribution Purpose:		itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3 Name			
Address	Purpose:	Date	\$ 
Fund Raiser	Click H Check box if this expenditure is payment of debt or obligation reported on previous statement	ere for Memo I	temization Type
Expenditure #4 Name	Statement		
Address	Purpose:	Date	\$
	Check box if this expenditure is payment of	lere for Memo I	temization Type
Fund Raiser  Expenditure #5	debt or obligation reported on previous statement		
Name			\$
Address	Purpose:Click H	Date	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	\$1551.60

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

6124601

Enter this total on line 8a of Summary Page



### **ITEMIZED IN-KIND EXPENDITURES**

### SCHEDULE 1B - IK

#### 139364

SCHEDULE 1B - IK	1. Committee I. D. Number		
CANDIDATE COMMITTEE	2. Committee Name	o Elect Cathy Kir	k
Name and Address of person to whom goods or services were donated or transferred.	Type of In-Kind Expenditure     (Check appropriate box and fill in description)	5. Date:	6. Fair Market Value
Expenditure #1 Name & Address: Janice Nearon 22601 Lange	Donation of goods or services to a Ballot     Question Committee     Donation of assets to tax exempt charitable Institution	10/17/2016	100.00
St. Clair Shores, MI 48080	Donation of assets to Political Party Committee	Date	
		Click Here for Memo Item	nization Type
	Description Advertisement page in Lincoln din	<u>n</u> er	
Expenditure #2 Name & Address: Bob Kirk	4. Donation of goods or services to a Ballot Question Committee	08/25/2016	75.20
37539 Hidden Valley Ct	Donation of assets to tax exempt charitable institution	Date	)
Clinton Twp, Mi 48036	Donation of assets to Political Party Committee  Other	Click Here for Memo Item	ization Type
	Description: postage		
Expenditure #3 Name & Address:	Donation of goods or services to a Ballot     Question Committee		05.00
Bob Kirk 37539 Hidden Valley Ct	Donation of assets to tax exempt charitable institution	06/27/2016 	65.00 
Clinton Twp, MI 48036	Donation of assets to Political Party Committee  Other	Date  Click Here for Memo Item	nization Type
	Description: Name Tags		
Expenditure #4 Name & Address: Bob Kirk	4. Donation of goods or services to a Ballot Question Committee  Donation of assets to tax exempt charitable	07/09/2016	1634.19
37539 Hidden Valley Ct	institution  Donation of assets to Political Party Committee	Date	· · · · · · · · · · · · · · · · · · ·
Clinton Twp, Mi 48036		Click Here for Memo Item	ization Type
	Description: Jar openers		
Expenditure #5 Name & Address: Bob Kirk	Donation of goods or services to a Ballot Question Committee  Donation of assets to tax exempt charitable	10/07/201€ \$	283.90
37539 Hidden Valley Ct	institution	Date	
Clinton Twp, Mi 48036	Donation of assets to Political Party Committee  Other	Click Here for Memo Item	nization Type
	Description: Sign posts		
		Page Subtotal	\$2158.29
	Grand Tota	al of all Schedules 1B-IK	7 158 29

Enter this total on line 7 of the Summary Page

(Complete on last page of Schedule)

Page 1 of 1



## INCIDENTAL OFFICE EXPENSE DISBURSEMENTS SCHEDULE 1C

### CANDIDATE COMMITTEE (For use by officeholders only)

1. Committee I. D. Number

139364	
--------	--

	Committee To Elect Cathy Kirk
2. Committee Name	

3. Name and address of person to whom disbursement was made	Description of Disbursement     (Be specific & you may assign a     disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address:	Purpose		
Hallo d Addiess.			\$
		Date	·
		Click for Memo Ite	mization Type
_	Disbursement Code		
Check box if this disbursement is payment of debt or obligation	Fund Raiser		
reported on previous statement Disbursement # 2			
Name & Address:	Purpose		•
		Date	_ \$
		Duto	
		Click for Memo Ite	mization Type
Check box if this disbursement is payment of debt or obligation	Disbursement Code		
reported on previous statement	Fund Raiser		
Disbursement # 3	Purpose		
Name & Address:			<u> </u>
		Date	
		Click for Memo Ite	mization Type
		Olok for Wolffe Rel	medion typo
Check box if this disbursement is payment of debt or obligation	Disbursement Code		
reported on previous statement	Fund Raiser		
Disbursement # 4	Purpose		
Name & Address:			\$
		Date	
		Click for Memo Ite	mization Type
Check box if this disbursement is payment of debt or obligation	Disbursement Code		
reported on previous statement	Fund Raiser		
		Subtotal this page	0
	Grand Tota	al of all Schedules 1C ast page of Schedule)	

Enter this total on line 10a of Summary Page

\*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

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

Page  $\frac{1}{2}$  of  $\frac{1}{2}$ 



#### **EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES**

SCHEDULE 1 B - G

1. Committee I.D. Number

CANDIDATE COMMITTEE

Committee To Elect Cathy

2. Committee Name

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS,
CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY. Describe the specific Get-Out-The -Vote activity in Item 4f.

ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED

item 4f. ALL EXPENDITUR	ES ARE REQUIRED TO BE ITEMIZED		
Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
Expenditure #1	a. Election Day Busing of Voters To The Polls		
Name & Address:	b. Slate Cards c. Challengers		
	d. Poll Watchers e. Poll Workers	;	\$
	f. Get-Out-The Vote Activity (Specify):	Date	
For Activity Type b-f, check one:	Click	Here for Memo Item	nization Type
In-Kind Independent  If in support of, or in opposition to, a ballot proposal, check one	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Support Oppose			
Statewide Proposal Name	Local Proposal Name In	dicate County	
Expenditure #2 Name & Address:	a. Election Day Busing of Voters To The Polls b. Slate Cards c. Challengers d. Poll Watchers e. Poll Workers f. Get-Out-The Vote Activity (Specify):	Date Here for Memo Item	\$
For Activity Type b-f, check one:  In-Kind  Independent  If in support of, or in opposition to, a ballot proposal, check one:  Support  Oppose	Check boy if this expenditure is navment of		
Statewide Proposal Name	Local Proposal NameIndica	ate County	
Expenditure #3 Name & Address:	a Election Day Busing of Voters To The Polls b Slate Cards c Challengers d Poll Watchers e Poll Workers f Get-Out-The Vote Activity (Specify):	Date	\$
For Activity Type b-f, check one:		Here for Memo Itemi	ization Type
In-Kind Independent  If in support of, or in opposition to, a ballot proposal, check one:  Support Oppose	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Statewide Proposal Name	Local Proposal Name In	ndicate County	
	Su	btotal this page 0	
	Grand Total of all S (Complete on last p		
	(Southern Mark		nter total

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

Enter total on Line 8b Summary Page



## INCIDENTAL OFFICE EXPENSE DISBURSEMENTS SCHEDULE 1C

#### **CANDIDATE COMMITTEE**

(For use by officeholders only)

•	13	9	3	6	4

1. Committee I. D. Number	109007
Con	nmittee To Elect Cathy Kirk

3. Name and address of person to whom disbursement was made	Description of Disbursement     (Be specific & you may assign a     disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address:	Purpose		
Name & Address.			•
		Date	\$
		Click for Memo Ite	mization Type
			Zadon Typo
Charle have # this dishumanian his assument of dalah as all live is	Disbursement Code		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Fund Raiser		
Disbursement # 2	Purpose		
Name & Address:	•		e
		Date	
		Click for Memo Ite	mization Type
Check box if this disbursement is payment of debt or obligation	Disbursement Code		
reported on previous statement	Fund Raiser		
Disbursement # 3	Purpose		
Name & Address:			e
		Date	<u> </u>
		Click for Memo Ite	mization Type
<u></u>	Dishuraement Code		
Check box if this disbursement is payment of debt or obligation	Disbursement Code		
reported on previous statement	Fund Raiser		
Disbursement # 4	Purpose		
Name & Address:			\$
		Date	<u> </u>
		Click for Memo Iter	nization Type
			:
	Dishumanant O. da		
Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code		
reported on previous statement	Fund Raiser		
		Subtotal this page	0
	Grand Total	of all Schedules 1C	
	(Complete on las	st page of Schedule)	Enter this total

2. Committee Name

on line 10a of Summary Page

\*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

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

Page 1 of 1



### DEBTS AND OBLIGATIONS SCHEDULE 1E

139364

13 1	1. Committee I.D. Nu	nber	
- 2	2. Committee Name	Committee To Elect Cathy Kirk	

CANDIDATE COMMITTEE	Constitute Name			
This Schedule itemizes:  a Debts and obligations owed by or forgiven the committee.  Debts and obligations owed to or forgiven by the committee.				
	eck either a or b. Use only for the pu		rolgiven <u>by</u> ale cor	mille.
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	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:	4. Type:	s		
	5. Date Debt Was Incurred:	\$		
		\$	].	
	6. Original Amount of Debt:	<u> </u>	• — —	
	\$	<b>S</b>	İ	FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by:	4. Type:	\$		
	5. Date Debt Was Incurred:	\$		
	6. Original Amount of Debt:	s		s
	\$	s	, 4	FORGIVEN
		\$		FORGIVEN
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_	
Debt #3 Corp Yes Owed to or by:	4. Type:	<u> </u>		
	5. Date Debt Was Incurred:	\$		
		s		
	6. Original Amount of Debt:	\$\$	1 \$	\$
	\$	<b>s</b>		FORGIVEN
If bank loan, name of endorser or guarantor:		Ar	mount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	0
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				
				Enter this total

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 1 of 1



### FUND RAISER SCHEDULE 1F 1. Committee I.D. Number

#### 139364

CANDIDATE	<del>-</del> -	TEE .	CTE Cathy Kirk		
	- USE	A SEPARATE SH	EET FOR EACH EVENT	•	
or Partic greater)		er of Individuals Attending ipating (whichever is	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held Villa Penna, 43985	
09/14/2016		60	Dinner	Hayes rd, Sterling Heights MI 48313 Private Residence	
7. Total Contributions		\$12,400.00			
<ul><li>8. Other Receipts</li><li>9. Gross Receipts (Add lines 7 and 8)</li></ul>		0			
		\$12,400.00			
10. Total Cost of Event	10. Total Cost of Event				
(Total Cost includes In-Kind (	Contribution	ns and All Expenditures	Made For the Event)		
11. Check if event was a	joint fund r	raiser and complete the	e following:		
Co-Sponsor(s)		Contribution S (%)	Split	Expenditure Split (%)	
	<del></del>				
	<del></del>		Management of the second of th		
444.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.	_				
****	_			<u> </u>	
	<del></del>				
		<del></del>			
***************************************	····			**************************************	
<ul> <li>period covered by the</li> <li>Receipts and expend</li> </ul>	e Campaigr litures listed	n Statement. I on a Fund Raiser Scl	er Schedule for each fund raisi nedule must also be reported o le (1-IK), Itemized Expenditure	n the Itemized Contributions	
	participate	d in a joint fund raiser i	must file a Fund Raiser Schedu	le for the event.	
Page of					