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CANDIDATE COMMITTEE

CARMELLA SASAULH MACOMB COUNTY CLERK MT. CLEMENS, MICHIGAN FOR OFFICIAL USE ONLY

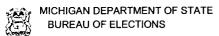
COVER PAGE	MT. CLEMENS	1.51 0.112 0. 6.54
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement covers From	n: 08/23/16 to 10/23/16
1, Committee I.D. Number	Candidate Last Name	First Name M.I.
139348	SIERAWSKI	ELISABETH M
2. Committee Name	4a. Office Sought Including Di COUNTY COMMISSION	istrict # or Community Served (If applicable)
Committee to Elect Liz Sierawski	4b. County of Residence MA	СОМВ
5. Committee's Mailing Address	6. Treasurer's Name & Resid	ential Address
10426 William Drive	Dean D. Alan	
Sterling Heights, MI 48313	21900 Chalon	
	St. Clair Shores, MI	48080
Area Code and Phone (586) 977-0143 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.	Area Code & Phone (586) 2	212-3449
7. Treasurer's Business Address		's Name and Mailing Address (If the committee has a
Dean D. Alan	Designated Record keeper)	
21900 Chalon		
St. Clair Shores, MI 48080		
	·	
(500) 040 0440		
Area Code and Phone (586) 212-3449	Area Code and Phone	
9. TYPE OF STATEMENT	ONLY if condidate	9e. Dissolution of Candidate Committee
9a. Pre-Election OR 9b. Post-Election is not on current year.	ONLY if candidate the ballot for the part of the part.	By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is her by discharged and forgiven, and no longer collectible from
Primary	uarterly	the committee. The committee has no oustanding assets, owes no lates fees or has any oustanding debt.
	r Quarterly	Further, if the dissolution cannot be granted that this be
Convention		Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.
	nual Statement () Coverage Year	Effective date of dissolution
School and Am	nendment to Campaign Statement	-
Caucus (Co	omplete Item 9a, 9b, 9c or 9e to icate which Statement is being ended.)	Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.
Date of Election, Convention or Caucus		
11/08/16		
10. Verification: I/We certify that all reasonable diligence was usiny/our knowledge and belief the contents are true, accurate and	ed in the preparation of this statemed complete.	ent and attached schedules (if any) and to the best of
Current Treasurer or Designated Record keeper Dean D. Alan	, ///	10/26/2016
Type or Print Name	Signature	
Candidate Elisabeth M. Sierawski	1 Junevski	nv 10/26/2016
Type or Print Name	Signature	

1. Committee I.D. Number 139348

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Committee To Elect LIZ SIERAWSKI

CANDIDATE COMMITTEE	2. Committee Name	
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 5,804.00	- androper variety of the second contract of the
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	_
c. Subtotal of "Contributions"	(3c.) \$ \$5,804.00	(18.) \$ \$37,054.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _\$0.00	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$5,804.00	\$ \$37,054.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$0.00	(21.) \$ \$0.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$0.00	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$15,794.93	_
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	_
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ \$0.00	_
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$15,794.93	(23.) \$ \$19,853.41
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$ \$0.00	_
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.)\$ \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(10.) \$ \$0.00	\$0.00
DEBTS AND OBLIGATIONS	(11.)	
12. Debts and Obligationsa. Owed by the Committee (Schedule 1E)	(12a.) \$ \$554.00	_
b. Owed to the Committee (Schedule 1E)	(12b.)\$ \$0.00	_
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ \$27,191.52	
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$ \$5,804.00	·
(Line 5, Total Contributions & Other Receipts)	(15.) = \$_\$32,995.52	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(16.) - \$ \$15,794.93	
(Add lines 9 and 11)		
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$17,200.59	•

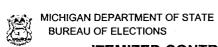


CANDIDATE COMMITTEE

1. Committee I.D. Number 139348

2. Committee To Elect LIZ SIERAWSKI

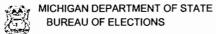
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt?	YES 4. Date of Red	ceipt 09/29/16		
Name & Address: William Boyer	 Santana kanangan kanangan a			ing and the second seco
43805 Van Dyke Ave.				500.00
Sterling Heights, MI 48314			_{\$} 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provi			Click Here fo	r Memo Itemization
Occupation attorney	Employer Boyer, Day	wson and St. Pierre	Click Fiere to	i wemo temzaton
Business Address Same				
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? Name & Address	YES 4. Date of Rec	eipt <u>09/29/16</u>		
Ronald Marsh				
43550 Elizabeth Rd.			_{\$} 200.00	_s 300.00
Clinton Township, MI 48036				· · · · · · · · · · · · · · · · · · ·
5. If over \$100.00 cumulative, please provide		•	Click Here for	Memo Itemization
Occupation attorney E	mployer self-employe	ed		
Business Address Same				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? Name & Address:	YES 4. Date of Rec	^{ceipt} 09/29/16	-	
Miller for Michigan			200.00	200.00
11139 Olive St			<u>\$200.00</u>	_{\$} 200.00
Warren, MI 48093			Oliela Henry fem	Mana
5. If over \$100.00 cumulative, please provid	le:		Click Here for	Memo Itemization
Occupation	Employer	· · · · · · · · · · · · · · · · · · ·		
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 PAC Receipt? Name & Address	YES 4. Date of Re	ceipt <u>09/29/16</u>		:
James Conrad				
6200 Chicago Rd. Warren, MI 48092			_{\$} 200.00	_s 200.00
5. If over \$100.00 cumulative, please provid	e:			
Occupation attorney	Employer self-emplo	oved	Click Here for	Memo Itemization
Occupation	Employer			
Business Address Same				ur.
Type of Contribution: Direct	Loan from a person	Fund Raiser		
		Page Subtotal	\$1,100.00	
	G	Grand Total of All Schedules 1A		
	(Com	plete on last page of Schedule) L	Enter this total on	
Pageof			line 3a of Summary Page.	



CANDIDATE COMMITTEE

2. Committee To Elect LIZ SIERAWSKI

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 09/29/16 Name & Address: David Joseph Flynn	Albert School Sc	and the second of the second
2957 Parkway Cir. Sterling Hts., MI 48310	_{\$} 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide:	Click Horo fo	or Momo Itomization
Occupation County commissioner Employer Macomb County	Click Here it	or Memo Itemization
Business Address 1 south main, Mt. Clemens, MI 48043		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/29/16 Name & Address	-	
Dave Flynn For County Comm. 2957 Parkway Circle Sterling Hts., MI 48310	<u>\$100.00</u>	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/29/16		
Mark S. Metry 81 N. Main Mt. Clemens, 48042	§ 200.00	_{\$} 250.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation attorney Employer self-employed		
Business Address same Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/29/16 Name & Address		
James A. Yarema 30504 Dell Lane Warren, MI 48092	_{\$} 200.00	_{\$} 300.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation businessman Employer Yarema Die	Ollok Fiere for	Wiemo Remization
Business Address 283 Minnesota Drive, Troy, MI 48083		
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)	Enter this total on	
Page 2_ of	line 3a of Summary Page.	

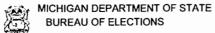


CANDIDATE COMMITTEE

1. Committee I.D. Number _____139348

2. Committee Name Committee To Elect LIZ SIERAWSKI

Enter contributor's name and address. If co middle initial. Check box to indicate if contri Committee (PAC) Report all contributions re	ibution is from a Political Com		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? Name & Address: Levin for Congress	YES 4. Date of Rec	eipt 10/21/16		en de la companya de La companya de la co
P.O. Box 37			050.00	250.00
Roseville, MI 48066			_{\$} 250.00	_{\$} 250.00
5. If over \$100.00 cumulative, please prov	ride:		OF LUCY	NA DE CORP.
Occupation	Employer		Click Here to	r Memo Itemization
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser	7	
3. Contribution #2 PAC Receipt? Name & Address	YES 4. Date of Rece	10/21/16		
UAW Michigan V-PAC				
8000 E. Jefferson			_{\$} 2,500.00	_{\$} 2,500.00
Detroit, MI 48214				
5. If over \$100.00 cumulative, please provi	ide:		Click Here for	Memo Itemization
Occupation	Employer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
Contribution # 3 PAC Receipt? Name & Address:	YES 4. Date of Reco	eipt 10/21/16		
Plumbers Local 98			400.00	400.00
555 Horace Brown Dr.			_{\$} 100.00	_{\$} 100.00
Madison Heights, MI 48071				
5. If over \$100.00 cumulative, please provi	de:		Click Here for	Memo Itemization
Occupation	Employer			
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 PAC Receipt? [Name & Address	YES 4. Date of Rec	eipt 10/21/16		
Rosemary Davis_				
20852 Marlinga Dr.			_s 200.00	, 200.00
Clinton Township, MI 48038				φ
5. If over \$100.00 cumulative, please provi			Click Here for	Memo Itemization
Occupation attorney	Employer Kirk,Huth,La	inge and Badalamenti		
Business Address 19500 Hall Road,	Clinton Township, I	MI 48038		
Type of Contribution: Direct	Loan from a person	Fund Raiser		
		Page Subtotal	\$3,050.00	
	Gr	and Total of All Schedules 1A		
	(Comp	olete on last page of Schedule)	Enter this total on	
7.7			line 3a of Summary	



CANDIDATE COMMITTEE

1. Committee I.D. Number ______139348

2. Committee Name Committee To Elect LIZ SIERAWSKI

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 10/21/16 Name & Address: Kenneth J. Debeaussaert	v start i v	
39856 Brylor Ct. Clinton Township, MI 48038	_{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer	CHOK FIETE IC	Wemo temzation
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/21/16 Name & Address		
Amer Hakim 47258 Milonas Dr. Shelby Twp., MI 48315	\$300.00	<u>\$</u> 300.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation attorney Employer Hakim and Toma		
Business Address 8424 E. 12 Mile Rd. Warren, MI 48093		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/21/16 Name & Address:	-	
Liz Sierawski 40426 William Drive Sterling Heights, MI 48313	§ 554.00	_{\$} 554.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Director of Nursing Employer Blue Angel Home Care		
Business Address 1000 John R. Rd., Troy, MI 48083		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt Name & Address		
	\$	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		mome nomization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
	\$904.00	,
	\$5,804.00	·
(Complete on last page of Schedule)	Ψ0,001.00	J

Page 4 of 7

line 3a of Summary Page.



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

139348

1. Committee I. D. Number

2. Committee Name Committee To Elect LIZ SIERAWSKI

2.0	Continue Name		
Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Sawicki and Son	la company of the second of th	09/27/16	e 2 0/2 15
Cawleki and Con	Signa	Date	\$ 2,043.15
*Address	Purpose: Signs	Date	
1521 W. Lafayette Blvd.	Click	Here for Memo	temization Type
Detroit, MI 48216			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2	- Statement		
		00/20/46	
Name City of Sterling Heights		09/30/16	s 30
	Purpose: voter list	Date	
Address	Purpose:		
40555 Utica Road	Click F	lere for Memo	Itemization Type
Sterling Heights, MI 48313			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3	Statement		
Name Mass Mailing		10/01/16	\$ 1108.94
	Purpose: Mailings	Date	¥ 1100.5 4
Address 35468 Mound Road	Purpose: Mannings		
	Click H	lere for Memo	Itemization Type
Sterling Hts., MI 48312			
	LCheck box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
^{Name} Mass Mailing		10/04/16	
Wass Walling			\$ 1268.78
Address	Purpose: Mailings	Date	
35468 Mound Road			
Sterling Hts., MI 48312	Click H	ere for Memo	Itemization Type
	Check box if this expenditure is payment of		
	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name Sawicki and Son		10/05/40	
Sawioni and Son		10/05/16	\$2973.30
Address	Purpose: Signs	Date	
1521 W. Lafayette Blvd.,			Manager Trans
Detroit, MI 48216		ere for Memo	Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
	Subtot	al this page	Ф7 404 47
	Subiol	a tino page	\$7,424.17
	Grand Total of all S	chedules 1B	
·	(Complete on last page	of Schedule)	

Enter this total on line 8a of Summary Page

Page $\int_{0}^{\infty} dt$



ITEMIZED EXPENDITURES **SCHEDULE 1B CANDIDATE COMMITTEE**

139348 1. Committee I. D. Number

2. Committee Name Committee To Elect LIZ SIERAWSKI

2.0	Committee Maine		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name American Graphics Printing		10/04/16	\$ 339.20
, anonean erapmeer many	Purpose: Brochures	Date	
Address	Purpose:		
34895 Groesbeck Hwy Clinton Township, MI 48035	Click	Here for Memo	Itemization Type
Childri Township, Wii 40000	Check box if this expenditure is payment of		
Truck Britan	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #2			
Name Mass Mailing		10/13/16	\$ 1108.94
	Purpose: Mailings	Date	_
Address	Purpose:		
35468 Mound Road	Click i	Here for Memo	Itemization Type
Sterling Hts., MI 48312			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name Postmaster		10/21/16	- 5200 20
, oomasis.	Postago	Date	\$ 5390.30
Address	Purpose: Postage	54.0	
7007 Metro Parkway	Click H	Here for Memo	Itemization Type
Sterling Hts. MI 48311	Check box if this expenditure is payment of		
	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name Mass Mailing		10/21/16	- 070 00
	Mailings	Date	\$ <u>978.32</u>
Address	Purpose: Mailings		
35468 Mound Rd.	Click	Here for Memo	Itemization Type
Sterling Hts., MI 48312		iere ioi memo	nemzadon Type
<u> </u>	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name The Italian Tribune		09/30/16	
THE Randil Tribuno			\$554.00
Address	Purpose: Display Ad	Date	<u></u>
P.O.Box 380407	Click F	Here for Memo	Itemization Type
Clinton Township, MI 48038	Check box if this expenditure is payment of		
C Sund Britan	debt or obligation reported on previous		
Fund Raiser	statement		A C C C C C C C C C C
	Subto	tal this page	\$8,370.76
	Grand Total of all S		\$15,794.93
	(Complete on last page	of Schedule) l	,

Enter this total on line 8a of **Summary Page**

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DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number

139348

CANDID	ATE C	OMMITTE	Έ
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Committee To Elect LIZ SIERAWSKI

CANDIDATE COMMITTEE				
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the com		s and obligations owed to o	r forgiven <u>by</u> the co	mmittee.
(Che	ck either a or b. Use only for the pu			
Name and Mailing Address of person, vendor or financial institution to whom debt is owed.	4. Type of Obligation (Description) 5. Indicate date debt was	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period
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.	incurred 6. Indicate original amount of debt			(Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: loan	\$\$		
Liz Sierawski	5. Date Debt Was Incurred:	\$		i
40426 William Drive	09/30/16	\$		
Sterling Heights, MI 48313		—	\$ 0.00	\$_554.00
	6. Original Amount of Debt:	\$		FORGIVEN
	\$	\$		LIFORGIVEN
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:	\$. \$	\$
	\$	\$		FORGIVEN
		\$		- TORONER
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type:	\$		
	5. <u>Date Debt Was Incurred</u> :	\$		
		\$		
	6. Original Amount of Debt:	\$	\$	\$
	\$	Ψ		FORGIVEN
		\$		
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$	
		Page Subtotal	(Outstanding debt)	\$554.00
(Co	omplete on last page of Schedule s	Grand Total o	of all Schedules 1E r to the committee)	\$554.00
				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.

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