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MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

## CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by andidate.	3. This Statement covers From	10-21-16 to 10-2	2-17
1. Committee I.D. Number		4. Candidate Last Name	First Name	M.I.
139034		Shannon	Nate	В
2. Committee Name		4a. Office Sought Including District # or Community Served (If applicable)		
		Sterling Heights City Council		
CTE Nathan Shanno	n	4b. County of Residence	C)	
5. Committee's Mailing Address 43313 Interlaken Dr Sterling Heights, MI 48313		6. Treasurer's Name & Resider Same	ntial Address	FILED 7 OCT 27 PM
Area Code and Phone If the address in this box is different from the commi mailing address on the Statement of Organization, r be sent to this address by the filing official.		Area Code & Phone		H 12: r 6
7. Treasurer's Business Address Same		8. Designated Record keeper's Designated Record keeper)	s Name and Mailing Address	nmittee has a
Area Code and Phone		Area Code and Phone		
9. TYPE OF STATEMENT		T	9e. Dissolution of Candidate Comm	nittee
9a. X Pre-Election OR 9b. Post-Election	Required ON is not on the current year:		By checking this item I/We certify by the committee to the candidate or h	his or her spouse is here
Pre-Election or Post-Election Statement relates to:	July Quart	erly	by discharged and forgiven, and no lor the committee. The committee has no owes no lates fees or has any oustand	
Primary X General	October G	luarteriy	Further, if the dissolution cannot be gra	anted that this be
			considered a request for the Reporting	Waiver.
Special	<sup>9c.</sup> Annua	al Statement ()	Effective date of dissolution	
School		Coverage Year		
Caucus	(Com	dment to Campaign Statement plete Item 9a, 9b, 9c or 9e to te which Statement is being ded.)	Note: The disposition of residual funds Schedule 1B and the Summary Page.	
Date of Election, Convention or Caucus				
10. Verification: I/We certify that all reasonable diligemy/our knowledge and belief the contents are true, a			ent and attached schedules (if any) and	to the best of
Current Treasurer or Designated Record keeper	non	, Nothan)	Date	)-,26-17
Type or Print Name		Signature	~ /	
Candidate Nathan Shannon		Wathan)	hannan 10	0-26-17
Type or Print Name		Signature		

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Authority granted under P.A. 388 of 1976



MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

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1. Committee I.D. Number 139034

SUMMARY PAGE CANDIDATE COMMITTEE	2. Committee Name CTE Nathan Shannon	
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>12,620.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$_\$12,620.00	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _\$0.00	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$12,620.00	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$100.00	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$100.00	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <b>\$8,876.94</b>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>\$0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>\$0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$8,876.94	(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) <b>\$</b>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.)\$ <u>\$0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ \$0.00	(24.) \$
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$0.00</u>	-
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>\$0.00</u>	
<ol> <li>Ending Balance of last report filed (Enter zero if no previous reports have been filed.)</li> <li>Arnount received during reporting period (Line 5, Total Contributions &amp; Other Receipts)</li> <li>SUBTOTAL Add lines 13 and 14</li> <li>Arnount expended during reporting period (Add lines 9 and 11)</li> <li>ENDING BALANCE (Subtract line 16 from line 15)</li> </ol>	BALANCE STATEMENT         (13.)       \$       \$54.12         (14.) +       \$       \$12,620.00         (15.) =       \$       \$12,674.12         (16.) -       \$       \$8,876.94         (17.)       \$       \$3,797.18	   

MICHIGAN DEPARTMENT OF STATE			
ITEMIZED CONTRIBUTIONS		139034	
JULE IA	Committee I.D. Number Comr	nittee To Elect	Nathan Shannon
CANDIDATE COMMITTEE 2	. Committee Name		
Enter contributor's name and address. If contribution is from an individual, enter middle initial. Check box to indicate if contribution is from a Political Committee 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	9/20/17		
BACKUS, GRACE			
4530 VANKER, UTICA MI		\$ 75.00	\$
48317 5. If over \$100.00 cumulative, please provide:		Click Horo for	Memo Itemization
Occupation Employer		Click Here for	
Business Address			
	und Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address	4/21/2017		
KERN, BRIAN			
54482 RIDGEVIEW		s(0)	: 200.cz
SHELBY TWP. Mi 48316			
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Employer			
Business Address			
	Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt Name & Address:	4/21/2017		
JOHN BOLOGNA		\$ 100	. 200.00
19135 SAXON DR.		\$ 100	\$
BEVERLY HILLS Mi 48025 5. If over \$100.00 cumulative, please provide:		Click Here for I	Memo Itemization
Occupation Employer			
Business Address			
	Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt Name & Address	4/24/2017		
Alan CASMERE			
28836 PANAMA		\$ 200.00	\$
WARREN Mi 48092 5. If over \$100.00 cumulative, please provide:			
Occupation OWNER Employer CASMERE (	20	Click Here for	Memo Itemization
Business Address 33400 MAPLELANE DR. STEPH	LINE HTS MI		
	und Raiser		
	Page Subtotal	47500	
	Total of All Schedules 1A		
Complete		Enter this total on	
Pageof		line 3a of Summary Page.	

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS	
	139034 hittee I.D. Number
	Committee To Elect Nathan Shannon
Enter contributor's name and address. If contribution is from an individual, enter last na middle initial. Check box to indicate if contribution is from a Political Committee or an I Committee (PAC) Report <u>all</u> contributions regardless of amount.	ame, first name, 6. Amount 7. Cumulative for
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 4/2 Name & Address: TVRNBULL, CHARLES	24/17
53957 SUTHERLAND CT. SHELBY TWD MI 48316 5. If over \$100.00 cumulative, please provide:	s Z S . 2 S Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Ra	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt	-4/17
ANDREWS, CLARK	
53985 SUTHERLAND LA	s 75.00 s
SHELBY TWP MI 48316	
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 R	aiser
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt	<u>u/24/17</u>
SCOTT, LAWRENCE	200.00
12900 HALL RD	<u>\$150,00</u> <u>\$</u>
STERLING HEIGHTS, MI 48313 5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation ATTORNEY Employer O'REILLY RAI	valuo
Business Address 12900 HALL PD STERUNG HT Type of Contribution: Direct Loan from a person	N
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt	24/2017
KASZUBSKI, MARC	
1096 BROMPTON	\$ 150.00 \$
ROCHESTER HILLS MI 48309 5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation ATTORNEY Employer OFEILLY RAD	-LOULD
Business Address 12900 HALLAD STEPLING HTS	MI
Type of Contribution: Direct Loan from a person Fund Ra	iser
	Page Subtotal f All Schedules 1A page of Schedule) Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS		
ITEMIZED CONTRIBUTIONS	139034	
SCHEDULE 1A 1. Committee I.D. Number		t Nathan Shannon
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 <u>4/25/17</u> Name & Address:		
DENAULT, DONALD		
15731 MARCIE	\$ 75,00	\$
FRASER, MI 48026 5. If over \$100.00 cumulative, please provide:		r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 4/25/17 Name & Address		
MANCINI, EDWARD		
6850 19 MILE RD.	\$ 100,00	\$
STERLING HEIGHTS MI 48314 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 <u>4/25/17</u> Name & Address:		
NITZ, JOHN		200
57477 WILLOW WAY CT.	\$ 100 00	s
WASHINGTON, MI 48094 5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 4/25/17 Name & Address		
MCGRAIL-BELAU, LINDA		
43561 SALT CREEK DR	\$ 75.00	\$
CLINTON TWD, Mi 48038 5. If over \$100.00 cumulative, please provide:	Olisia Lissa far	Mama Itemization
Occupation Employer	Click Here for	Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	3500	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	<b>_</b>
Page 3 of 25	line 3a of Summary Page.	

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS	
	139034 D. Number
SCHEDULE 1A       1. Committee I         CANDIDATE COMMITTEE       2. Committee N	Committee To Elect Nathan Shannon
Enter contributor's name and address. If contribution is from an individual, enter last name, fi middle initial. Check box to indicate if contribution is from a Political Committee or an Indeper Committee (PAC) Report <u>all</u> contributions regardless of amount.	
3. Contribution # 1       PAC Receipt?       YES       4. Date of Receipt       4/25         Name & Address:       FLVNN, RICK         43225       CHARDONNAY         STERUNG       HELGHTS       Mi         5. If over \$100.00 cumulative, please provide:       Occupation       Employer         Business Address	/17 <u>\$ 50 00</u> <u>\$</u> Click Here for Memo Itemization <u>\$ 100 00</u> <u>\$</u> Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 4/28 Name & Address: PLOGGERI, PHILLIP SS764 SAINT REGIS DR. SHELBY TWP MI L18315 5. If over \$100.00 cumulative, please provide: Occupation SELF Employer ATTORNEY Business Address 43231 SCHOEN HERR STERLING HTS N Type of Contribution: Direct Loan from a person Fund Raiser	s 50000 s 600,00 Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 4-24 Name & Address SWANECK, ROANNE 923 N. BRYS RD GROSSE POINTE WOODS, M'I 48236 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: A Direct Loan from a person Fund Raiser	s 100 90 s Click Here for Memo Itemization

MICHIGAN DEPARTMENT OF STATE	
ITEMIZED CONTRIBUTIONS	139034
SCHEDULE 1A 1. Committ	ee I.D. Number Committee To Elect Nathan Shannon
CANDIDATE COMMITTEE 2. Committ	
Enter contributor's name and address. If contribution is from an individual, enter last nam middle initial. Check box to indicate if contribution is from a Political Committee or an Inde Committee (PAC) Report <u>all</u> contributions regardless of amount.	
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt $\frac{4}{2.5}$ Name & Address:	3/17
GUASTELLO, THUMAS 34120 WOODWARD BIRMINGHAM, MI 48009 5. If over \$100.00 cumulative, please provide:	SIOO 20 SUCO
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raise	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt $4/2$ Rame & Address	<u> </u>
DENARDIS, CYNTHIA	80
36664 RIDGECRUFT	<u>s 50 °°</u> s
STERLING HEIGHTS MILLABIZ	Olisia Lang for Mono Itemination
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 Rais	er
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt	2/17
MOCERI, DOMENIC & FRANCES 2540 SILVERBELL	<u>\$ 30092</u> <u>\$ i</u>
CAILLAND TWP. 48306 5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation_PETILED Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Rais	ser
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 5/2	2/17
MACDONALD, MICHAEL 18890 SAN QUENTIN DR.	\$ 15000 \$ 200.00
LATTHRUP VILVAGE MI 48076 5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation ENGINEER Employer HRC	
Business Address SSS HULET BLOOMField Hills N	11 48303
Type of Contribution: Direct Loan from a person Fund Raise	
(Complete on last p	Enter this total on line 3a of Summary
Page 5 of 29	Page.

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS	
ITEMIZED CONTRIBUTIONS	139034
SCHEDULE 1A 1. Committee I.D. Number _ Con	nmittee To Elect Nathan Shannon
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 <u>S(2/17</u> Name & Address:	
SHANNON, NATHAN 43313 INTERLAKEN DR. STERLING HEIGHTS MI 48313	\$ 60 <u>00</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       5/3/17	
Name & Address	
BROOKS, ROBERT 44 WILSON RD	<u>s100000 s Z00</u>
LALUSSE POINTE SHORES MI 48236	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:	
Occupation Employer	
Type of Contribution:	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 5/7/17	
ORAN, JOE	<u>s 100.00</u> s 300
W. BLOOMFIELD MI 48323	
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 5(8/17	
40700 WOODWARD	\$ 100 00 \$
BLOOMFIED HILLS MI 48304 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	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page of	Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS	
ITEMIZED CONTRIBUTIONS	139034
SCHEDULE 1A 1. Committee I.D. Number _	nmittee To Elect Nathan Shannon
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 Flection Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 5/8/17 Name & Address:	
BROWN, MARTIN 14300 IS MILE RD STERLING HEIGHTS MI 48312 5. If over \$100.00 cumulative, please provide: Occupation Employer	s 25 20 s 50-00 Click Here for Memo Itemization
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/9/17 Name & Address MIJAC, ROBERT 43710 VIA ANTUNIO STERLING HEIGHTS MI 48314	s 50 00 s
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 5/12/17	
KOTLARZ, GARY 23456 LIBERTY ST. CLAIR SHORES MI 48080	Sclick Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:	
Occupation       OWNER       Employer       POGERS       RODST         Business Address       S36225       SCITOENTERP       STEPLING       HTS       Mi         Type of Contribution:       X Direct       Loan from a person       Fund Raiser	48312
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 5/13/2017 Name & Address	
UJKIC, PASHKO	202.00
38346 PHYLISS STERLING HEIGHTS MI 48312 5. If over \$100.00 cumulative, please provide:	SOD.00 SCIICK Here for Memo Itemization
Occupation OWNER Employer DODGE PARIC CONRY	
Business Address 35252 DODGE PARIL, STERLING HTS MI	48312
Type of Contribution: Direct Loan from a person Fund Raiser	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 7 of 25	

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS	
ITEMIZED CONTRIBUTIONS	139034
SCHEDULE 1A 1. Committee I.D. Number . Cor	nmittee To Elect Nathan Shannon
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 Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 5/18/17	
FREISMUTH, CHARLES	
28007 WESTWOONS	
CHESTERFIELD MI 48047	\$ 250 22 \$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation ATTORNEY Employer D'ANGOSTINI, SADLE \$ EUGS	eri
Business Address 48723 HAYES SHELBY TWP MI 48315	
Type of Contribution: Direct Loan from a person 🕅 Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/12/17	
Name & Address	
CMTE. JOBEPH V. ROMANTO 12236 GRINTLEY	\$ 7500 \$
STERLING HEIGHTS MI 48312	\$_ <u>()</u> \$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Business Address	
Type of Contribution: Direct Loan from a person Y Fund Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 5/12/17	
SKRZYNIARZ, DOUG	
802 SHADY HOLOW DZ.	\$ 100 00 \$
BLOOMFILD HILLS MI 48304	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:	
Occupation Employer	
Business Address	
Business Address	
Business Address	
Business Address         Type of Contribution:       Direct         Loan from a person       Fund Raiser         3. Contribution #4       PAC Receipt?         YES       4. Date of Receipt	
Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt <u>S/18/17</u> Name & Address HANA, FADI 41374 MARKSWAY CT.	, 500 <sup>ce</sup>
Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 5/18/17 Name & Address HANA, FAD	\$ 500 °C \$
Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt <u>S/18/17</u> Name & Address HANA, FADI 41374 MARKSWAY CT. STERLING HEIGHTS MI 48314 5. If over \$100.00 cumulative, please provide:	, Click Here for Memo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt <u>S/18/17</u> Name & Address HANA, FADI 41374 MARKSWAY CT. STERLING HEIGHTS MI 48314	, Click Here for Memo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 5/18/17 Name & Address HANA, FADI 41374 MARKSWAY CT. STERLING HEIGHTS MI 48314 5. If over \$100.00 cumulative, please provide: Occupation CEO Employer NEW PASSION CONSUL	, Click Here for Memo Itemization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 5/12/17 Name & Address HANA, FADI 41374 MARKSWAY CT. STERLING HEIGHTS MI 48314 5. If over \$100.00 cumulative, please provide: Occupation CEO Employer NEW PASSION CONSUL Business Address 11662 MARTIN RD. WARLEN MI 48093	, Click Here for Memo Itemization
Business Address	, Click Here for Memo Itemization
Business Address         Type of Contribution:       Direct       Loan from a person       Fund Raiser         3. Contribution #4       PAC Receipt?       YES       4. Date of Receipt       ST2/12/17         Name & Address       HANA / FADI       41374       MARKSWAY CT.       STERUINE HEIGHTS MI 48314         5. If over \$100.00 cumulative, please provide:       Occupation CEO       Employer       NEW PASSION CONSUL         Business Address       1662       MARTIN PA - WARLEN MI 48093       Type of Contribution:       Direct       Loan from a person       Fund Raiser	, Click Here for Memo Itemization
Business Address	, Click Here for Memo Itemization

MICHIGAN DEPARTMENT OF STATE	
ITEMIZED CONTRIBUTIONS	139034
SCHEDULE 1A 1. Committee I.D. Number	
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 <u>S/18/17</u> Name & Address:	
CYNOWA, GAIZY 45451 FIELDING MACUMB TWP. MI 48042 5. If over \$100.00 cumulative, please provide:	s 5020 s 100.00 Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person K Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt <u>5/18/17</u> Name & Address NITZ, JOHN	
57477 WILLOW WAY CT.	s 100 = s 200
WASHINGTON TWP. Ni 48094	
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Pund Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt <u>S/12/17</u> Name & Address:	
MUNEM, JOSEPH	
36327 GREGORY	\$\$
STERUNG HEIGHTS MI 48312	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:	
Occupation Employer	
Business Address	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 57 H& 17	
ORAM, JOSEPH	
4585 ARUNE OR.	\$ 100 = \$ 300.00
W- BLOOMAED MI 48323 5. If over \$100.00 cumulative, please provide:	
Occupation Employer	Click Here for Memo Itemization
Business Address         Type of Contribution:       Direct         Loan from a person       Image: Contribution in the second secon	
	250 00
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on line 3a of Summary
Page 9 of 25	Page.

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MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS		
ITEMIZED CONTRIBUTIONS	139034	
SCHEDULE 1A 1. Committee I.D. Number	·····	
COR CANDIDATE COMMITTEE 2. Committee Name	mmittee to Elec	ct Nathan Shannon
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 57 18 / 17		
Name & Address: CAMPBELL, LAWRENCE		
6690 VERNMOUR DR.	\$ 250 00	æ
TROY, MI 480 9/8 5. If over \$100.00 cumulative, please provide:	* <u>************************************</u>	۶
Occupation <u>OWN 22</u> Employer <u>CAMPDELL</u> CONMERCIAL	Click Here fo	or Memo Itemization
Business Address 1186 12 MILE RD., MADISUN HTS NI 48071	e con	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt	<b>.</b>	
Name & Address		
	\$	\$
	Oliak Llara fa	r Mama Itamization
5. If over \$100.00 cumulative, please provide:	Click Here to	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         Name & Address:		
	\$	\$
	Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please provide:	Click Tiere IOI	Merrio Remization
Occupation Employer	1	
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt		
	\$	\$
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		
Page Subtotal	250,00	
Grand Total of All Schedules 1A		
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Bass 10 of 25	line 3a of Summary Page.	

MICHIGAN DEPARTMENT OF STATE	
ITEMIZED CONTRIBUTIONS	139034
SCHEDIILE 1A 1. Committee I.D. Number	
CANDIDATE COMMITTEE 2. Committee Name	ommittee To Elect Nathan Shannon
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 Flection Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 5/18/17 Name & Address: KOMER, LINDA	_
3672 NEW BOSTON DR.	55
SPERLING HEIGHTS MI 48314 5. If over \$100.00 cumulative, please provide:	S 30 00 S Click Here for Memo Itemization
Occupation Employer	Click Here for Merrio Remization
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/18/17 Name & Address	
48728 JAMIE CIR.	\$ 50 00 \$
SHELBY TWD. MI 48317	· <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 # 3 PAC Receipt? YES 4. Date of Receipt <u>S/18/17</u>	_
BELANGER, PATRICIA 14938 ALMA DR.	\$ <u>10000</u> \$
STERLING HEIGHTS MI 48813 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       Yes	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 5/20/17	
STERLING HEIGHTS FIREFIGHTERS UNION	
38911 VAN DYKE	
STERLING HEIGHTS Mi 48312	<u>\$ 1000 co</u> <u>\$</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
Page Subtot	al 1186 <u>~</u>
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MICHIGAN DEPARTMENT OF STATE	
ITEMIZED CONTRIBUTIONS	139034
SOMEDOLL TA	mittee I.D. Number Committee To Elect Nathan Shannon
CANDIDATE COMMITTEE 2. Com	mittee Name
Enter contributor's name and address. If contribution is from an individual, enter last middle initial. Check box to indicate if contribution is from a Political Committee or an Committee (PAC) Report <u>all</u> contributions regardless of amount.	
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt <u>S</u>	23/17
BRULEY, EN	
38157 RADDE	\$ 25.00 \$ 50.00
CLINTON TWD. Mi 48036 5. If over \$100.00 cumulative, please provide:	S 25,00 S Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: $\chi$ Direct Loan from a person Fund R	aiser
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 6/	1/17
KALAYDIJAN, ARMENAG	
845 ORCHARD RIDGE	\$ 200.00 \$ 550.00
BLOOMPIEUD, M'I	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:	Click Here for Metho itemization
Occupation SELF-EMPLOYED Employer SEZE	
Business Address	
Type of Contribution:     Direct     Loan from a person     Fund F       3. Contribution # 3     PAC Receipt?     VES     4 Date of Receipt	
Name & Address:	8/17
GAUD, TONY	\$ 700. cm \$
6303 26 MILERD.	\$\$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation OWNER Employer GALLO COMPAN	185
Business Address 6303 26 MULE RD. NASHINGTON	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt Q	
Name & Address	<u>e</u> [ ] - [
ELZHENI, IBRAHIM	
4222 POND VIEW Dr. STERLING HEIGHTS M'I 48314	\$ \$
5. If over \$100,00 cumulative, please provide:	Click Here for Memo Itemization
Occupation ENGINEER Employer FORD MUT	C C
BUSINESS Address 4/111 VAN DYKE STEPLING HTS	Mi 48314
Type of Contribution: Direct Loan from a person Fund R	
	Page Subtotal 925 9
	of All Schedules 1A
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Page 12 of 25	line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE		
ITEMIZED CONTRIBUTIONS	139034	
SCHEDULE 1A 1. Committee I.D. Number _ Con	mittee To Elec	t Nathan Shannon
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 <u>9/6/17</u>		
KOMER, LINDA		
3672 NEW BOSTON	\$ 75.00	\$ \$ 55 00
STEP-UNB HEIGHTS MI 48314 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 #2 PAC Receipt? YES 4. Date of Receipt 9/7/17		
GUASTELLO, TOM		\$ 700.00
34120 WOODWARD	s 40000	s
BIRMINGHAM MI 48009	<u></u>	
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation OWNER Employer CENTER NGMT.		
Business Address 34120 WOODWARD BIRMINGHAM MI 48009		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 9/12/17		
Name & Address:		
13833 HAUECK	\$ 35.00	\$
STERLING HEIGHTS MI 48313	Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please provide:	Click Here IO	Memo Remization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? XYES 4. Date of Receipt 9/12/17		
NORTH MACUMB, DEMOCRATIC CLUB		
45451 FIELDING	\$ 200.00	\$
MACOMB, MI 48042 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	11 - 00	1
Page Subtotal	660.00	-
Grand Total of All Schedules 1A (Complete on last page of Schedule)		_
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Page 13 of 24	Page.	

MICHIGAN DEPARTMENT OF STATE	
ITEMIZED CONTRIBUTIONS	139034
SCHEDULE 1A 1. Committee I.D. Number _	nmittee To Elect Nathan Shannon
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 Flection Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 9/18/17	
Name & Address:	
38157 RADDE	
CUNTON TWP. MI 48036	<u>s 25.00</u> <u>s SD.00</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: X Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt <u>9/19/117</u>	
RUGGERI, PHILLIP 55764 ST. REGIS	
55764 ST. REGIS	<u>s 100 °°°</u> <u>s 600 °°</u>
SHELBY TWP. MI 48315	Olish Llows for Mamo Itomization
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	· · · · · · · · · · · · · · · · · · ·
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 9/19/17 Name & Address:	
BROOKS, ROBERT	
44 WILSON RA.	\$ 10000 \$ 20000
GLOSSE POINTE STORES MI UB236 5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: X Direct Loan from a person Fund Raiser	
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 9/19/17 Name & Address	
GUASTELLO, THOMAS	
34120 WOODWARD	\$ 600 20 \$ 600 20
BIRMINGHAM, Mi 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	
Page Subtotal	325 90
Grand Total of All Schedules 1A	
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Page 14 of 25	line 3a of Summary Page.

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		SCHEDU	LE 1A		1. Committee I.D. Number	·	ct Nathan Shannon
	CA		COMMITTEE		2. Committee Name		
middle initia	al. Check bo	to indicate if cont		itical Comm	enter last name, first name, ittee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribu Name & Addr		PAC Receipt?	YES 4. D	ate of Rece	ipt 9/20/17	_	
Scot-	T, LA	WRENCE					
12900	D 1-1A	LL RD.				\$ 50.00	\$ Z00.00
STER	ring	HEIGHTS	Mi 4831	3		\$	\$_200
5. If over \$1	100.00 cumu	lative, please pro				Click Here for	or Memo Itemization
Occupation			_ Employer				
Business Add	dress				-1		
Type of Con	ntribution:	Direct	Loan from a per	son	Fund Raiser		
3. Contributio		PAC Receipt?	YES 4. Da	ate of Rece	ipt 9/22/17		
Name & Addr		•					
KERN	•		$\sim$				. 200
SHAR	L KIU	GEVIEW	DR.			\$ 100 00	<u>\$_200</u>
SIEUD	יעט גע אין עעיי	P、Mi 48 lative, please pro	316 vide:			Click Here fo	r Memo Itemization
				VORN	ENTERPRISES		
			,				
		71 17	III, STER	<u>LING t</u>	trs 48314		
Type of Cont	tribution: 🖒	Direct	Loan from a pers	son	Fund Raiser		
3. Contributio		PAC Receipt?	YES 4. C	ate of Rece	eipt 9/24/17		
Name & Addr		aru				_	
		ING ST.				\$ 50.00	\$ 100 00
		Mi 4804	n				
		lative, please pro	•			Click Here for	r Memo Itemization
Occupation			Employer				
Business Ad							
Type of Con		Direct	Loan from a per	son	Fund Raiser		
3. Contributio		PAC Receipt?	YES 4.1	Date of Rec	eipt 9/24/17		
Name & Add		AICHAEL					
12890	SAN	QUENTI	. 1			, 50 <u>50</u>	200.2
		WAGE M				<u>\$_}0</u>	\$
		lative, please pro				Oliok Lloro fo	r Mama Itamization
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Business Ac	-						
Type of Co	ontribution:	Direct	Loan from a pe	rson	Fund Raiser		
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Page <u>15</u>	_of_24		•			Page.	

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS			
ITEMIZED CONTRIBUTIONS		139034	
SCHEDULE 1A	1. Committee I.D. Number _	mittee To Elec	t Nathan Shannon
CANDIDATE COMMITTEE	2. Committee Name		
Enter contributor's name and address. If contribution is from an individual, ent middle initial. Check box to indicate if contribution is from a Political Committee 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 Name & Address: MAMOU, HABIB 313 E. HUDSON AUE ROYAL OAK M'I 48067 5. If over \$100.00 cumulative, please provide: Occupation <u>PLESIDENT</u> Employer <u>POYAL OAK</u> Business Address <u>313 E. HUDSON ROYAL OAK</u> Type of Contribution: <u>PDirect</u> Loan from a person <u>1</u> 3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address PIPCATTENS LOCAL 636 FAC 30100 NORTHWESTERN HWY FARMINGTON HUS, M'I 48334 5. If over \$100.00 cumulative, please provide:	RECYCLINE M: 48067 Fund Raiser	\$ <u>200 40</u>	<pre>\$</pre>
Occupation Employer Business Address Type of Contribution: Opirect Loan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Dale of Receipt Name & Address: PAN GOTT, STEPHEN BIOG ROSEBUD W. CLARESTON, M'L 48348 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person	9/20 (17 Fund Raiser	s So 💬 Click Here for	<pre>\$</pre> Memo Iternization
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt Name & Address BRADY, JANER ST676 CHURCHILL SHELBY TWF Mi 48316 5. If over \$100.00 cumulative, please provide: Occupation Employer		s <u>10</u> Click Here for	\$ Memo Itemization
Grand	Fund Raiser Page Subtotal d Total of All Schedules 1A e on last page of Schedule)	Enter this total on line 3a of Summary Page.	

MICHIGAN DEPARTMENT OF STATE	
ITEMIZED CONTRIBUTIONS	139034
SCHEDULE 1A 1. Comm	nittee I.D. Number Committee To Elect Nathan Shannon
CANDIDATE COMMITTEE 2. Comm	nittee Name
Enter contributor's name and address. If contribution is from an individual, enter last namiddle initial. Check box to indicate if contribution is from a Political Committee or an I Committee (PAC) Report <u>all</u> contributions regardless of amount.	
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 9 Name & Address: SCABATH, JEANNE	127/17
13393 CLOVERLAWN DR.	
STERLING itrs. Mi 5. If over \$100.00 cumulative, please provide:	Sclick Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: K Direct Loan from a person Fund Ra	iser
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt	28/17
FROLING, CAROL	
S440 BROOKDALE	\$ 100 <u>00</u> \$
Bluomfuld Hills Mi 48304 5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution:	aiser
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt	28/17
RIBERAS, HANK	
6471 METRO PEWY	\$ 10000 \$
STERLING HEIGHTS, MI 48312 5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	aiser
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt	28/17
FLYNN, RICK	
43225 CHARDONNAY	\$ 100 00 \$ 130.00
STERLING HEIGHTS Min 48314	
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 Ra	
	Page Subtotal 330 20
	t page of Schedule)
Page 17 of 24	Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE	
ITEMIZED CONTRIBUTIONS	139034
SCHEDULE 1A 1. Committee I.D. Number _	nmittee To Elect Nathan Shannon
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 Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 9/29/17	
BOLOGNA, JOHN	
19135 SAXON DR.	\$ 100 m \$ 200 m
BEVERLY HILLS MI 48025	\$ 100 00 \$ 20000
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: V Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 9/29/17 Name & Address	
LALONDE, LED 24801 ROSALIND	
	s 25000 s
EASTPOINTE M'1 48021	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:	
Occupation <u>RETIRED</u> Employer	
Business Address	
Type of Contribution:JirectLoan from a person X Fund Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/2/17	
ELZHENNI, HUSSEIN	
SO38 CARAWAY	\$ ZO <u>20</u> \$
STERLING HEIGHTS MI 48314	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:	
Occupation Employer	
Business Address	
3. Contribution # 4       PAC Receipt?       YES       4. Date of Receipt       9-12-11         Name & Address	
HEATLEY, LANCE	
7700 MARYLOUCT.	s 10 99 s
SHELBY TWP MI 46317 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	
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Page 18 of 25	line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE	
ITEMIZED CONTRIBUTIONS	139034
	Committee To Elect Nathan Shannon
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.	e, 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1       PAC Receipt?       YES       4. Date of Receipt       10/2/17         Name & Address:       POSE , ROY       SST620 WOODBRIDGE         SHELBY TWP Mi 48316       S. If over \$100.00 cumulative, please provide:         Occupation       Employer         Business Address	s <u>100 cro</u> s Click Here for Memo Itemization
Name & Address       MEA       LOCAL 1       PAC         32550       GARAIDO SUITETO.         CUNTON       TWP.       Mi       48038         5. If over \$100.00 cumulative, please provide:       Occupation       Employer         Business Address	s <u>100</u> s Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/4 12 Name & Address: DALLO, (AAL 49136 VAN DYKE SHEBY TWP, MI 48314 5. If over \$100.00 cumulative, please provide: Occupation <u>OWNER</u> Employer <u>1714</u> ST. BAR 3 GRILL Business Address <u>3905 17 MILE RD.</u> STEPLING HTS MI 483 Type of Contribution: Direct Loan from a person Fund Raiser	S 200 S S Click Here for Memo Itemization
3. Contribution # 4       PAC Receipt?       YES       4. Date of Receipt 10/4/17         Name & Address       CTE       LiZ       SIERAWSKI         40426       WIWIAM       DR.         STERUNG HEIGHTS       Mi< 48313	S 100 00 S
Page Sub Grand Total of All Schedules (Complete on last page of Sched Page 19 of 24	

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS			
ITEMIZED CONTRIBUTIONS		139034	
SCHEDULE 1A	1. Committee I.D. Number		t Nathan Shannon
CANDIDATE COMMITTEE	2. Committee Name		r Nathan Shannon
Enter contributor's name and address. If contribution is from an individual, e middle initial. Check box to indicate if contribution is from a Political Commit Committee (PAC) Report <u>all</u> contributions regardless of amount.	nter last name, first name, ee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receip Name & Address:	10/4/17		
JUNCENIC, DINO			
43500 UPICA RA.		\$ 200 90	\$
STERLING HEIGHTS MI 48317 5. If over \$100.00 cumulative, please provide:	•	·	• Mana Itania dia a
Occupation OWNER Employer UTICA VAN			r Memo Itemization
Business Address 43500 UTICA R.P. STEPLING	HTS MI 48317	•	
Type of Contribution: )irect Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address	10/4/17		
WEISS, HARVEY			
32220 WOODWARD STE 200		\$ 30000	\$
ROYAL OAK MI 48073			
5. If over \$100.00 cumulative, please provide: Occupation AWNER Employer NEISS PLO	NS & THES	Click Here for	Memo Itemization
Business Address 32820 WOODWARD, ROYAL (	•		
Type of Contribution:rect Loan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receip Name & Address:	10/4/17		
ORAM, JOE	,		
4585 ARLINE DR.		\$ 100 92	\$ 300.00
W. Bloomfield Mi 48323		Click Here for	Memo Itemization
5. If over \$100.00 cumulative, please provide:			
Occupation Employer			
Business Address	Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt	10/4/17		
BARNWELL, LOME			
30130 GRUENBEURG DR.		~~ C))	
WARDEN MI 48092		\$ 50 2	\$
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		
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Page ZO of ZI		line 3a of Summary Page.	

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS	
ITEMIZED CONTRIBUTIONS	139034 mmittee I.D. Number
	Committee To Elect Nathan Shannon
Enter contributor's name and address. If contribution is from an individual, enter las middle initial. Check box to indicate if contribution is from a Political Committee or a Committee (PAC) Report <u>all</u> contributions regardless of amount.	t name, first name, 6. Amount 7. Cumulative for
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10 Name & Address: VANDERMAAS, MARY 14351 PERNELL STERLING HEIGHTS M'I 48313 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Kund	۲۲۲۱۲ <u>s SO. ۲</u> Click Here for Memo Itemization Raiser
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10 Name & Address VJKIC, PASHKO 38346 PHYLUS STEPLING HEIGHTS MI 48312 5. If over \$100.00 cumulative, please provide: Occupation <u>CINNER</u> Employer <u>DODGE PARK</u> Business Address <u>35252 DODGE PARK</u>	<i>I</i>
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10 Name & Address: KIRK, ROBERT 19500 HALL RD #100 CUNTON TWP M1 48038 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person Func-	S 100 ∞ s Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10 Name & Address ESTES, RONALO 3232 BRECICEN PLDGE BLOOMFIEDD HLUS MI 48301 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: JDirect Loan from a person Fund	s 50 ° s Click Here for Memo Itemization
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MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS		
	139034 Committee I.D. Number	
SCHEDOLE IA	Committee To Elect Nat	than Shannon
<b>CANDIDATE COMMITTEE</b> 2. Enter contributor's name and address. If contribution is from an individual, enter	committee Name6, Amount 7, Cu	Imulative for
middle initial. Check box to indicate if contribution is from a Political Committee of Committee (PAC) Report <u>all</u> contributions regardless of amount.	r an Independent Elect Contr	ion Cycle for Each ributor (Through of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 1 Name & Address:	216/17	
KALAYDJIAN, ARMENAG		
845 ORCHARD RIDGE RD. Bloomfield Hills 48304	<u>s 150 <u>oo</u></u> <u>s</u>	350.00
5. Il over \$100.00 cultularive, please provide.	Click Here for Mem	no Itemization
Occupation SELF - EM (2.07ED Employer SELF		
Business Address		
Type of Contribution: K Direct Loan from a person Fu	d Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt	216/17	
BRUWN, MARTIN		
14300 IS MILE RD.	\$ 25.00 \$	5000
STERLING HEIGHTS MI 48312	× ×	
5. If over \$100.00 cumulative, please provide:	Click Here for Mem	o Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fe	nd Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt	0/7/17	
DENARDIS, CYNTHIA		
36664 RIDGECROFT	\$ 30.00 \$	
STERLING HEIGHTS MI 46312 5. If over \$100.00 cumulative, please provide:	Click Here for Memo	o Itemization
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person F	Ind Raiser	
Name & Address	217117	
INKS, NATHAN 1050 CLOVELLAWN		
LINCOLN PARK MI 48146	<u>\$5000</u> <b>\$</b> _	
5. If over \$100.00 cumulative, please provide:	Click Here for Memo	o Itemization
Occupation Employer		
Business Address         Type of Contribution:         Direct         Loan from a person	nd Raiser	
	Page Subtotal 255 😤	
Grand T	otal of All Schedules 1A	
	Enter this total on	
Page 22 of 24	line 3a of Summary Page.	

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS			
ITEMIZED CONTRIBUTIONS		139034	
SCHEDULE 1A	1. Committee I.D. Number		t Nathan Shannon
CANDIDATE COMMITTEE	2. Committee Name		
Enter contributor's name and address. If contribution is from an individual, en middle initial. Check box to indicate if contribution is from a Political 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 #2 PAC Receipt? YES 4. Date of Receipt Name & Address PECISTRARS PAC IBEN SS 1358 ABBOTT DETROUT MI 48226 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address	Fund Raiser $10/12/17$	s <u>250</u> @	<pre>\$</pre>
Type of Contribution:	Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt Name & Address: CTE DEREIL MILLER PO BOX 143 WARREN M' 48090 5. If over \$100.00 cumulative, please provide:	10/14/17	\$_50.00 Click Here for	\$ Memo Itemization
Occupation Employer			
Business Address			
Type of Contribution:     Image: Direct     Loan from a person       3. Contribution # 4     PAC Receipt?     YES     4. Date of Receipt	Fund Raiser		
CH1, CAROLE			
35325 MORAVIAN DR.		\$ 25,00	
STEPLING HEIGHTS MI 48312 5. If over \$100.00 cumulative, please provide:			S Memo Itemization
Occupation Employer			
Business Address			
	Fund Raiser		
Gran	Page Subtotal Id Total of All Schedules 1A te on last page of Schedule)	425 2 Enter this total on line 3a of Summary Page.	

MICHIGAN DEPARTMENT OF STATE	
	139034 ee I.D. Number
SCHEDULE 1A       1. Committe         CANDIDATE COMMITTEE       2. Committe	Committee To Elect Nathan Shannon
Enter contributor's name and address. If contribution is from an individual, enter last nam middle initial. Check box to indicate if contribution is from a Political Committee or an Inde Committee (PAC) Report <u>all</u> contributions regardless of amount.	
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 5/15 Name & Address: MCCRACKEN, DEBBI	
39161 BYERS Diz. STEP-UNG HEIGHTS MI 48310 5. If over \$100.00 cumulative, please provide:	\$ <u>70,000</u> \$
Occupation Employer	Click Here for Memo Itemization
Business Address	r QM
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt	1-17
MIMOR, FRETS	•
162 RIVERSIDE	\$ ZS. == \$
MT. UEMERS MI 48043 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 Raise	er
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/1 Name & Address: UA LOCAL 98 PAC	18/17_
SSS HURACE BROWN DR. #1	<u>\$ 100 cc</u> <u>\$</u>
MADISON HTS MI 48071 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 Rais	er
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt	<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 Raise	
Grand Total of Al (Complete on last pa	ge of Schedule) Enter this total on
Page ZU of ZT	line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE			
ITEMIZED CONTRIBUTIONS	1. Committee I.D. Number	139034	
		nmittee To Elec	t Nathan Shannon
Enter contributor's name and address. If contribution is from an individual, ent middle initial. Check box to indicate if contribution is from a Political Committee Committee (PAC) Report <u>all</u> contributions regardless of amount.	er last name, first name,	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt Name & Address: SHEET METAL WURKER LOCAL 80 17100 W. 12 MILE RD 2 <sup>ND</sup> Fluch SUTHFIELD M'. 48076 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address	9-29-1	<u>م د ۲۵۵</u> <u>د ان ۲۵۵</u> Click Here fo	\$r Memo Itemization
	Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address		\$	\$
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Employer			
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt Name & Address:		\$	\$
		Click Horo for	Memo Itemization
5. If over \$100.00 cumulative, please provide:			Merrio Remization
Occupation Employer			
Business Address Type of Contribution: Direct Loan from a person			
	Fund Raiser	<u> </u>	······································
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			
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser	<b>y</b>	· · · · · · · · · · · · · · · · · · ·
	Page Subtotal d Total of All Schedules 1A e on last page of Schedule)	100. 2 12620. O Enter this total on line 3a of Summary Page.	

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS		
ITEMIZED IN-KIND CONTR SCHEDULE 1-IK	139034	
	CTF Nathan Sha	annon
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	<ol> <li>Type of In-Kind Contribution (Check applicable box)</li> <li>Date of Receipt</li> <li>Name &amp; Address of Vendor from whom goods or services were purchased</li> </ol>	7. Amount or Fair Market Value Value
Contribution # 1 PAC Receipt? Yes Name & Address: Nathan Shannon 43313 Interlaken DR Sterling Heights, MI 48313 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description Ad Promotion Load Promotion Government Of Receipt: 09/01/17 Government Of Receipt: Click Facebook.com Hacker Lane	00.00 <u>\$ 100.00</u> k Here for Memo Itemization
Fund Raiser Contribution Contribution # 2 PAC Receipt? Yes Name & Address	<ul> <li>Menlo Park, CA 94025</li> <li>4. Endorsement or Guarantee of Bank Loan</li> <li>Goods Donated or Loaned Services Donated</li> <li>Goods or Services Purchased by Candidate or Others</li> <li>Goods or Services Purchased by Candidate or Others- LOAN</li> </ul>	\$
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description 5. Date Of Receipt: 6. Vendor Name & Address: Clic	k Here for Memo Itemization
Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Name & Address:	Endorsement or Guarantee of Bank Loan     Goods Donated or Loaned Services Donated     Services Donated     Goods or Services Purchased by Candidate or Others     Goods or Services Purchased by Candidate or Others-LOAN	\$
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description 5. Date Of Receipt: 6. Vendor Name & Address: Clic	ck Here for Memo Itemization
Fund Raiser Contribution	Page Subtotal Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	\$100.00 \$100.00 \$100.00
	,	Enter this total on line 6 of Summary Page

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ITEMIZED EXPENDITURES SCHEDULE 1B	139034 1. Committee I. D. Number		
	Committee To Elect Nathan Shannon		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. Date 6. Amount		
Expenditure #1 Name C \$ 6 PUBLISHING Address	Purpose: NEWSPAPER ADS Date Date		
13650 E. 11 MILE RD.	Click Here for Memo Itemization Type		
WARREN MI 48009 Fund Raiser Expenditure #2	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Name VANTIV E - COMMERCE	<u>10/11/17</u> \$ 17.83 Date		
Address 900 Chelms Ford Lowell MA 01352 Fund Raiser	Purpose: <u>Payment processing</u> Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3 Name ACT BLUE Address PO BOX 441146	Purpose: <u>Credit Cave processing</u> Date Strate		
SOMERVILLE, MA 02144 Fund Raiser	Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4 Name USPS Address TOOT METRO PKWY STEPLING HTS MI 48311	Purpose: $POSTAGE$ Purpose: $POSTAGE$ Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous		
LIFUND Raiser Expenditure #5 Name CHIUS MARCHIUNE Address 415270 GRANT PAMC	Purpose: CONSULTING B/9/17 \$ 10000		
UTILA Mi	Check box if this expenditure is payment of debt or obligation reported on previous statement		
•	Subtotal this page 1489.34		

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

ITEMIZED EXPENDITURES	139034
SCHEDULE 1B	1. Committee I. D. Number Committee To Elect Nathan Shannon
CANDIDATE COMMITTEE	2. Committee Name
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. Date 6. Amount
Expenditure #1	-1-1
Name CHKIS MARCHIONE	$\frac{5/2/17}{Date} = \frac{1500}{2}$
Address	Purpose: CONSULTING Date
45270 GRANT PARIL	Click Here for Memo Itemization Type
UTICA MI 48317	Check box if this expenditure is payment of debt or obligation reported on previous
Fund Raiser	statement
Expenditure #2	ula cluz
Name MODELN AGE	<u>4/29/17</u> \$ <u>301.39</u> Date
Address	Purpose: DESIGN WOLL Date
120 E HUDSON AVE	Click Here for Memo Itemization Type
ROYAL OAK MI 48067	Check box if this expenditure is payment of
Fund Raiser	debt or obligation reported on previous statement
Expenditure #3	
Name ROGEBS ROOST	5/18/17 \$ 541.59
Address	Purpose: FUNDRAISUR Date
33626 Schoenherr	Click Here for Memo Itemization Type
STERLING HTS MI 48312	Check box if this expenditure is payment of
Fund Raiser	debt or obligation reported on previous statement
Expenditure #4	
Name Polish Century Club	$\frac{\frac{1}{5}}{17} = \frac{11800}{100}$
Address	Purpose: Meet & Greet Date
33204 MAPLE LA.	Click Here for Memo Itemization Type
STEIZLING HTS MI 48312	Check box if this expenditure is payment of
	debt or obligation reported on previous statement
Expenditure #5	
Name MASS MAILING	7/17/17 511.1721
Address	Purpose: MAILING Date \$ 1647.24
35468 MOUND RD	Click Here for Memo Itemization Type
STERLING HTS MI 48310	Check box if this expenditure is payment of
Fund Raiser	debt or obligation reported on previous statement
· ·	Subtotal this page 4108.22

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

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ITEMIZED EXPENDITURES	139034	
SCHEDULE 1B	I. Committee I. D. Number Committee To Elect Nathan Shannon	
CANDIDATE COMMITTEE 2	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 MANHATTAN MAILERS	<u>8/27/17</u> \$ 220.30 Date	
Address	Purpose: MAILING Date	
STI32 MILANO DR.	Click Here for Memo Itemization Type	
MACOMB Mi 48042	Check box if this expenditure is payment of	
Fund Raiser	debt or obligation reported on previous statement	
Expenditure #2		
Name TCF BANK	$\frac{5/12/17}{Date} = 19.95$	
Address	Purpose: BANKING FEES Date	
13221 HALL RD.	Click Here for Memo Itemization Type	
SHELBY TWP. MI 48315	Check box if this expenditure is payment of	
	debt or obligation reported on previous	
Expenditure #3	statement	
Name VSPS		
	Purpose: POSTACE Date 78.40	
Address 7007 Matro During	Purpose: YOSTAGE	
5TERLINE HTS MI	Click Here for Memo Itemization Type	
48311	Check box if this expenditure is payment of debt or obligation reported on previous	
Fund Raiser	statement	
Expenditure #4		
Name USPS	<u>9/18/17</u> s <u>24.50</u> Date	
Address	Purpose: POSTACE Date	
7007 Metro PKWY	Click Here for Memo Itemization Type	
STERLING HTS MI 48311		
	Check box if this expenditure is payment of debt or obligation reported on previous	
	statement	
Name BRONCO PRINTING		
TENCO IKINTING	8/27/17 \$ 75.72	
Address 21841 DEQUINDRE	Purpose: PAINTINE Date 75	
HAZEL PARK MI	Click Here for Memo Itemization Type	
48030	Check box if this expenditure is payment of debt or obligation reported on previous	
Fund Raiser	statement	
	Subtotal this page 418.87	
	Crand Tatel of all Sabadulas 1P	

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

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ITEMIZED EXPENDITURES	139034		
SCHEDULE 1B	1. Committee I. D. Number Committee To Elect Nathan Shannon		
CANDIDATE COMMITTEE	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 USPS	<u>9/14/17</u> \$ <u>2450</u> Date		
Address 7007 Metro FKWY STERLING HTS MI	Purpose: <u>POSTACE</u> Click Here for Memo Itemization Type		
423 (1 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
MANHATTAN MAILEVES	Purpose: MAILINE Date Date		
SII32 MILANO DR.	Click Here for Memo Itemization Type		
MACOMB MI	Check box if this expenditure is payment of		
48042 Fund Raiser	debt or obligation reported on previous		
Expenditure #3	statement		
Name GEORF GARIPBY	10/10/17 5111 25		
Address	Purpose: IT WORL Date Date		
35015 CAVANT DR.	Click Here for Memo Itemization Type		
STERLING HTS MI	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name MODERN AGE Address	Purpose: DESIGN WORK Date \$ 202.50		
120 E. HUDSON Royal Oak Mi	Click Here for Memo Itemization Type		
48067	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name ROGERS ROOST	10/4/17 \$ 645.06		
Address	Purpose: FUNDRAISER Date 3 U95.00		
33626 SCHEENHERR	Click Here for Memo Itemization Type		
STEPLING HTS MI 43312 I Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
	Subtotal this page 1056.72		
	Grand Total of all Schedules 1B		
	(Complete on last page of Schedule)		

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Summary Page

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ITEMIZED EXPENDITURES	139034		
SCHEDULE 1B	Committee I. D. Number	ethen Chennen	
CANDIDATE COMMITTEE 2. 0	Committee To Elect Nathan Shannon           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 PARTY City		10/4/17 \$ 29.69 Date	
Address	Purpose: DECORATIONS	Date	
12220 HALL RD.	Click	Here for Memo Itemization Type	
STERLING HEIGHTS MI 48313	Check box if this expenditure is payment of		
	debt or obligation reported on previous statement		
Expenditure #2			
Name CTE CARDI DEMONACO		10/10/17 \$ 30.00	
Address	Purpose: CONTRABITION		
EASTPOINTE NI	Click	Here for Memo Itemization Type	
48021	Check box if this expenditure is payment of		
Fund Raiser	dept or obligation reported on previous statement		
Expenditure #3			
Name AMERICAN GRAPHICS		10 13 17 : 345 52	
Address	Purpose: PUNTING	Date	
34895 GROESBECK Clinton Twp Mi	Click H	Here for Memo Itemization Type	
48035	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
NAME DEMS PAC		10/14/17 \$ 40.90	
Address	Purpose: PAC CONTR, butiON	Date * 40-2	
31428 SARATOGA			
WARREN Mi	Click	Here for Memo Itemization Type	
48093	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5		( )	
Name CZG PUBLISHING		9/29/17 \$ 44200	
Address	PURPOSE: NEWSPAPER ADS	Date	
13650 E.11 MILE RD.	Click	Here for Memo Itemization Type	
WARLEN M'. 48089 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
		otal this page 887.24	
	Grand Total of all	001	
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MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES	139034		
SCHEDULE IB			
CANDIDATE COMMITTEE 2.0	2. Committee Name CTE Nathan Shannon		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information) 5. Date	6. Amount	
Expenditure #1			
Name Modern Age	08/14/17	\$ 227.50	
Modern Age	Purpose: Design Work Date	\$ 221.50	
Address 120 E. Hudson	Purpose:		
Royal Oak, MI 48067	Click Here for Memo	Itemization Type	
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name Sawicki and Sons	10/25/17	. 690.00	
Sawicki and Sons		\$ <u>689.00</u>	
Address	Purpose: Yard Sign Date		
1521 W. Layfayette	Click Here for Memo	Itemization Type	
Detroit, MI 48216			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name		¢	
	Date	\$	
Address	Purpose:		
	Click Here for Memo	Itemization Type	
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4		····	
Name			
	Date	\$	
Address	Purpose:		
	Click Here for Memo	Itomization Type	
		Realization Type	
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name			
Address	Date	\$	
Address	Purpose: Dute		
	Click Here for Memo	Itemization Type	
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
	Subtotal this page	\$916.50	
•	Grand Total of all Schedules 1B (Complete on last page of Schedule)	\$8,876.94	
		Enter this total on line 8a of	

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