



**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

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

1. Committee I.D. Number 139195		3. This Statement covers From: 10/20/2016 to 10/22/2017	
2. Committee Name CTE Cardi DeMonaco Jr		4. Candidate Last Name DeMonaco Jr First Name Cardi M.I. A	
5. Committee's Mailing Address 23225 Oakwood Eastpointe, MI 48021		4a. Office Sought Including District # or Community Served (If applicable) Board Member - Local <i>eastpointe</i>	
Area Code and Phone 586-744-3864		4b. County of Residence MACOMB	
6. Treasurer's Name & Residential Address Cardi DeMonaco Jr 23225 Oakwood, Eastpointe, MI 48021		6. Treasurer's Name & Residential Address Cardi DeMonaco Jr 23225 Oakwood, Eastpointe, MI 48021	
7. Treasurer's Business Address		8. Designated Record keeper's Name and Mailing Address (The committee has a Designated Record keeper)	
Area Code and Phone _____		Area Code & Phone 586.774.3864	

FILED
 17 OCT 27 AM 9:23
 CLERK OF CIRCUIT COURT
 EASTLAND COUNTY, MICHIGAN

9. TYPE OF STATEMENT 9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. Post-Election Pre-Election or Post-Election Statement relates to: Primary <input checked="" type="radio"/> General Convention Special School Caucus Date of Election, Convention or Caucus <u>11/7/2017</u>		Required ONLY if candidate is not on the ballot for the current year: July Quarterly October Quarterly 9c. Annual Statement (_____) Coverage Year 9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)		9e. By checking this item I certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no lates fees or has any outstanding debt. Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Effective date of dissolution _____ Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.	
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10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Record keeper	Cardi DeMonaco Jr	<i>Cardi DeMonaco Jr</i>	Date	10/24/2017
	Type or Print Name	Signature		
Candidate	Cardi DeMonaco Jr	<i>Cardi DeMonaco Jr</i>	Date	10/24/2017
	Type or Print Name	Signature		



1. Committee I.D. Number 139195

2. Committee Name CTE Cardi DeMonaco Jr

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>5505.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>5505.00</u>	(18.) \$ <u>5505.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0.00</u>	(19.) \$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>5505.00</u>	(20.) \$ <u>5505.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>22.00</u>	(21.) \$ <u>22.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0.00</u>	(22.) \$ <u>0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>2591.34</u>	
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.) \$ <u>2591.34</u>	(23.) \$ <u>2591.34</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0.00</u>	
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.) \$ <u>0.00</u>	(24.) \$ <u>0.00</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>2022.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0.00</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>1049.47</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>5505.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>6554.47</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>2591.34</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>3963.13</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139195
2. Committee Name CTE Cardi DeMonaco Jr

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>7/21/2017</u>		
Name & Address: <u>Roger Holtslander 23140 Wellington Crescent Apt 104, Clinton Township, MI 48036</u>			100.00 \$ _____	100.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			Click Here for Memo Itemizati	
3. Contribution #2	PAC Receipt? YES	4. Date of Receipt <u>7/24/2017</u>		
Name & Address: <u>Cardi DeMonaco Jr 23225 Oakwood, Eastpointe, MI 48021</u>			20.00 \$ _____	20.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			Click Here for Memo Itemizati	
3. Contribution # 3	PAC Receipt? YES	4. Date of Receipt <u>9/1/2017</u>		
Name & Address: <u>Cardi DeMonaco Jr 23225 Oakwood, Eastpointe, MI 48021</u>			1000.00 \$ _____	1020.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Software Developer</u> Employer <u>State of Michigan, Court of Appeals</u> Business Address <u>3044 West Grand Blvd, Detroit, MI 48202</u> Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			Click Here for Memo Itemizat	
3. Contribution # 4	PAC Receipt? YES	4. Date of Receipt <u>9/12/2017</u>		
Name & Address: <u>Cardi DeMonaco Jr 23225 Oakwood, Eastpointe, MI 48021</u>			1000.00 \$ _____	2020.00 \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Software Developer</u> Employer <u>State of Michigan, Court of Appeals</u> Business Address <u>3044 West Grand Blvd, Detroit, MI 48202</u> Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			Click Here for Memo Itemizat	

Page Subtotal **2120.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139195
2. Committee Name CTE Cardi DeMonaco Jr

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 9/24/2017
Name & Address:
Janet DeMonaco 18043 Curtain, Eastpointe, MI 48021

\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 2 PAC Receipt? YES 4. Date of Receipt 9/26/2017
Name & Address:
Jason Davis 4553 S Corrine, Canton, MI 48188

\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/3/2017
Name & Address:
Barbara Winter 23051 Tawas, Hazel Park, MI 48030

\$ 50.00 \$ 50.00

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/3/2017
Name & Address:
Christina Nagey 334 McKinley, Grosse Pointe Farms, MI 48236

\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

[Click Here for Memo Itemization](#)

Page Subtotal **350.00**

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

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139195
2. Committee Name CTE Cardi DeMonaco Jr

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>10/4/2017</u> Name & Address: <u>Martha Houser 22401 Beechwood, Eastpointe, MI 48021</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00 \$ _____	30.00 \$ _____ Click Here for Memo Itemizati
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt <u>10/4/2017</u> Name & Address: <u>Antigone Perry 37256 Great Oaks Court, Clinton Township, MI 48036</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00 \$ _____	30.00 \$ _____ Click Here for Memo Itemizati
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt <u>10/4/2017</u> Name & Address: <u>Linda Flynn 43225 Chardonay, Sterling Heights, MI 48314</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person <input checked="" type="checkbox"/> Fund Raiser	100.00 \$ _____	100.00 \$ _____ Click Here for Memo Itemizat
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt <u>10/5/2017</u> Name & Address: <u>Judy Hartwell 25921 Maritime Cir S, Harrison Township, MI 48045</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00 \$ _____	30.00 \$ _____ Click Here for Memo Itemizat

Page Subtotal **190.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139195
2. Committee Name CTE Cardi DeMonaco Jr

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.

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/6/2017
Name & Address:
Jack Ellis 21700 Statler, St. Clair Shores, MI 48081

6. Amount 7. Cumulative for
\$ 30.00 \$ 30.00
Election Cycle for Each
Contributor (Through
date of receipt)

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemizat](#)
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 2 PAC Receipt? YES 4. Date of Receipt 10/6/2017
Name & Address:
Nancy Stefanou 2087 Glencove Road, Wolverine Lake, MI 48390

\$ 30.00 \$ 30.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemizat](#)
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/8/2017
Name & Address:
Ed Bruley 38157 Radde, Clinton Township, MI 48036

\$ 50.00 \$ 50.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemizat](#)
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/10/2017
Name & Address:
Kathleen Charbonneau 38725 Harrison Creek Ct, Harrison Township, MI 48045

\$ 25.00 \$ 25.00

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemizat](#)
Occupation _____ Employer _____
Business Address _____
Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal 135.00
Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139195
2. Committee Name CTE Cardi DeMonaco Jr

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.

3. Contribution # 1	PAC Receipt? YES	4. Date of Receipt <u>10/10/2017</u>	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address: Laura Cardamone 17187 Canvasback, Clinton Township, MI 48038			\$ <u>30.00</u>	\$ <u>30.00</u>

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemizat](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 2	PAC Receipt? YES	4. Date of Receipt <u>10/11/2017</u>	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address: Lisa Blazeovski 31253 Gay, Roseville, MI 48066			\$ <u>20.00</u>	\$ <u>20.00</u>

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemizat](#)

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>10/11/2017</u>	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address: Anna Dimuzio 21100 Beaconsfield, St. Clair Shores, MI 48225			\$ <u>30.00</u>	\$ <u>30.00</u>

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemizat](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4	PAC Receipt? YES	4. Date of Receipt <u>10/11/2017</u>	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address: Gary Cynowa 45451 Fielding, Macomb Township, MI 48042			\$ <u>30.00</u>	\$ <u>30.00</u>

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemizat](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal **110.00**

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

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139195
2. Committee Name CTE Cardi DeMonaco Jr

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.

3. Contribution #	PAC Receipt?	YES	4. Date of Receipt	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>10/11/2017</u>		
Name & Address: <u>Ross Lewicki 591 Shelden Road, Grosse Pointe Farms, MI 48236</u>				<u>100.00</u>	<u>100.00</u>
				\$ _____	\$ _____

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemizat](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 2	PAC Receipt?	YES	4. Date of Receipt <u>10/11/2017</u>		
Name & Address: <u>Henry Luks 18738 Rockport Street, Roseville, MI 48066</u>				<u>200.00</u>	<u>200.00</u>
				\$ _____	\$ _____

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemizat](#)

Occupation President Employer Controller Security Systems

Business Address 21363 Gratiot, Eastpointe, MI 48021

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 3	PAC Receipt?	YES	4. Date of Receipt <u>10/11/2017</u>		
Name & Address: <u>Ray Gammo 11641 Chandler Drive, Plymouth, MI 48170</u>				<u>200.00</u>	<u>200.00</u>
				\$ _____	\$ _____

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemizat](#)

Occupation Agent Employer Alpha Connected

Business Address 731 W. Michigan, Dearborn, MI 48176

Type of Contribution: Direct Loan from a person Fund Raiser

3. Contribution # 4	PAC Receipt?	YES	4. Date of Receipt <u>10/11/2017</u>		
Name & Address: <u>R.M. Lewicki, 8147 River Road, Cottellville, MI 48039</u>				<u>500.00</u>	<u>500.00</u>
				\$ _____	\$ _____

5. If over \$100.00 cumulative, please provide: [Click Here for Memo Itemizat](#)

Occupation Co-Owner Employer Highway Auto Parts

Business Address 29231 Groesbeck Highway, Roseville, MI 48066

Type of Contribution: Direct Loan from a person Fund Raiser

Page Subtotal	<u>1000.00</u>
Grand Total of All Schedules 1A (Complete on last page of Schedule)	

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139195
2. Committee Name CTE Cardi DeMonaco Jr

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>10/11/2017</u> Name & Address: <u>Jeffrey Judson, 689 Fisher Road, Grosse Pointe, MI 48230</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Pointe Alarm</u> Business Address <u>17027 Kercheval, Grosse Pointe, MI 48230</u> Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person Fund Raiser	500.00 \$ _____	500.00 \$ _____ Click Here for Memo Itemizati
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt <u>10/12/2017</u> Name & Address: <u>Carol Cunningham, 17197 Cross St, Roseville, MI 48066</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00 \$ _____	20.00 \$ _____ Click Here for Memo Itemizati
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt <u>10/12/2017</u> Name & Address: <u>Debra Dorosh, 44188 Rina, Clinton Township, MI 48038</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00 \$ _____	30.00 \$ _____ Click Here for Memo Itemizat
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt <u>10/12/2017</u> Name & Address: <u>CTE Nate Shannon, 43313 Interlaken, Sterling Heights, MI 48313</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00 \$ _____	30.00 \$ _____ Click Here for Memo Itemizat

Page Subtotal **580.00**

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

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139195
2. Committee Name CTE Cardi DeMonaco Jr

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 10/13/2017
Name & Address:
Linda Pidutti, 37649 Charter Oaks Blvd, Clinton Township, MI 48036

\$ 30.00

\$ 30.00

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 10/13/2017
Name & Address:

Michelle DeBeaussaert, 39856 Brylor Court, Clinton Township, MI 48038

\$ 60.00

\$ 60.00

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 10/14/2017
Name & Address:

Paul Kolbe, 15610 Camden, Eastpointe, MI 48021

\$ 30.00

\$ 30.00

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 10/14/2017
Name & Address:

Mary Perry, 23563 Donaldson, Clinton Township, MI 48035

\$ 100.00

\$ 100.00

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 220.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139195
2. Committee Name CTE Cardi DeMonaco Jr

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.

3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 10/15/2017
Name & Address:
Robert Wittenberg, 26131 Harding St, Oak Park, MI 48237
6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
\$ 100.00 \$ 100.00

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 10/16/2017
Name & Address:
Fred Miller, 162 Riverside, Mount Clemens, MI 48043
6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
\$ 25.00 \$ 25.00

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 10/16/2017
Name & Address:
Dane Phillips, 231 McMillan Road, Grosse Pointe Farms, MI 48236
6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
\$ 30.00 \$ 30.00

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 10/18/2017
Name & Address:
Denise Mentzer, 1399 Kingsley, Mount Clemens, MI 48043
6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
\$ 25.00 \$ 25.00

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 **180.00**

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

Enter this total on line 3a of Summary Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139195
2. Committee Name CTE Cardi DeMonaco Jr

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>10/18/2017</u> Name & Address: <u>Joyce Lalonde, 24801 Rosalind, Eastpointe, MI 48021</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00 \$ _____	30.00 \$ _____ Click Here for Memo Itemizati
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt <u>10/18/2017</u> Name & Address: <u>Leo Lalonde, 24801 Rosalind, Eastpointe, MI 48021</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00 \$ _____	30.00 \$ _____ Click Here for Memo Itemizati
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt <u>10/18/2017</u> Name & Address: <u>William McGlynn, 16426 Sudbury, Macomb Township, MI 48044</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00 \$ _____	30.00 \$ _____ Click Here for Memo Itemizat
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt <u>10/18/2017</u> Name & Address: <u>Stefanie Thomas, 51697 Hale, Chesterfield Township, MI 48051</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00 \$ _____	30.00 \$ _____ Click Here for Memo Itemizat

Page Subtotal **120.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139195
2. Committee Name CTE Cardi DeMonaco Jr

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>10/18/2017</u> Name & Address: <u>Michael Mitchell, 36687 Haley Dr, New Baltimore, MI 48047</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u>50.00</u> Click Here for Memo Itemizati
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt <u>10/18/2017</u> Name & Address: <u>William Sowerby, 37860 Saddle Lane, Clinton Township, MI 48036</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>State Representative</u> Employer <u>State of Michigan</u> Business Address <u>124 N Capitol Ave, Lansing, MI 48933</u> Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>200.00</u>	\$ <u>200.00</u> Click Here for Memo Itemizati
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt <u>10/20/2017</u> Name & Address: <u>Cim Sullivan, 34262 Crosley, Clinton Township, MI 48035</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>60.00</u>	\$ <u>60.00</u> Click Here for Memo Itemizat
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt <u>10/20/2017</u> Name & Address: <u>Jean-Marie Diebolt, 12518 Hwy M-35, Rock, MI 49880</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u>100.00</u> Click Here for Memo Itemizat

Page Subtotal **410.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139195
2. Committee Name CTE Cardi DeMonaco Jr

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>10/21/2017</u> Name & Address: <u>Rob Hammel, 2020 Kenmore Dr, Grosse Pointe Woods, MI 48236</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person <input checked="" type="checkbox"/> Fund Raiser	60.00 \$ _____	60.00 \$ _____ Click Here for Memo Itemizati
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt <u>10/22/2017</u> Name & Address: <u>Alyssa Hall, 16901 Anita, Fraser, MI 48026</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00 \$ _____	30.00 \$ _____ Click Here for Memo Itemizati
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt _____ Name & Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: Direct Loan from a person Fund Raiser	\$ _____	\$ _____ Click Here for Memo Itemizat
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt _____ Name & Address _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: Direct Loan from a person Fund Raiser	\$ _____	\$ _____ Click Here for Memo Itemizat

Page Subtotal **90.00**

Grand Total of All Schedules 1A (Complete on last page of Schedule) **5505.00**

Enter this total on line 3a of Summary Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 139195
2. Committee Name CTE Cardi DeMonaco Jr

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.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
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Contribution # 1 PAC Receipt? Yes Name & Address: Alysa Diebolt, 23225 Oakwood, Eastpointe, MI 48021	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated \$ <u>22.00</u> Goods or Services Purchased by Candidate or Others \$ <u>22.00</u>		
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	<input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN List Description _____ 5. Date Of Receipt: <u>10/2/2017</u> 6. Vendor Name & Address:	Click Here for Memo Itemiz	

Fund Raiser Contribution

Contribution # 2 PAC Receipt? Yes Name & Address	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned 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:	Click Here for Memo Itemiz	

Fund Raiser Contribution

Contribution #3 PAC Receipt? Yes Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned 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:	Click Here for Memo Itemiz	

Fund Raiser Contribution

Page Subtotal	22.00	22.00
Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	22.00	

Enter this total
on line 6 of Summary
Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

139195

1. Committee I. D. Number _____
CTE Cardi DeMonaco Jr
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 Pay Pal Address 2211 North First St, San Jose, CA 95131 <input type="checkbox"/> Fund Raiser	Purpose: Transaction Fee <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	7/24/17 Date	\$ 0.88
Expenditure #2 Name Michigan Democratic Party Address 606 Townsend, Lansing, MI 48933 <input type="checkbox"/> Fund Raiser	Purpose: List Access <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	7/27/17 Date	\$ 150.00
Expenditure #3 Name American Graphics Address 34895 Groesbeck Hwy, Clinton Township, MI 48035 <input type="checkbox"/> Fund Raiser	Purpose: Flyers, Mailers, Signs <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	9/5/17 Date	\$ 1759.60
Expenditure #4 Name USPS (online) Address 475 L'Enfant Plaza SW, Washington, DC 20590 <input type="checkbox"/> Fund Raiser	Purpose: Stamps <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	9/13/17 Date	\$ 443.67
Expenditure #5 Name Pay Pal Address 2211 North First St, San Jose, CA 95131 <input type="checkbox"/> Fund Raiser	Purpose: Transaction Fee <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	9/24/17 Date	\$ 3.20

Subtotal this page **2357.35**

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

139195

1. Committee I. D. Number _____
2. Committee Name CTE Cardi DeMonaco Jr

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name American Graphics Address 34895 Groesbeck Hwy, Clinton Township, MI 48035 <input type="checkbox"/> Fund Raiser	Purpose: Flyers <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	9/25/17 Date	\$ 162.18 Click Here for Memo Itemization
Expenditure #2 Name Office Depot Address 33840 Gratiot, Clinton Township, MI 48035 <input type="checkbox"/> Fund Raiser	Purpose: Paper, Envelopes <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	9/26/17 Date	\$ 59.28 Click Here for Memo Itemization
Expenditure #3 Name Pay Pal Address 2211 North First St, San Jose, CA 95131 <input type="checkbox"/> Fund Raiser	Purpose: Transaction Fee <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	9/26/17 Date	\$ 3.20 Click Here for Memo Itemization
Expenditure #4 Name Pay Pal Address 2211 North First St, San Jose, CA 95131 <input type="checkbox"/> Fund Raiser	Purpose: Transaction Fee <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/15/17 Date	\$ 3.20 Click Here for Memo Itemization
Expenditure #5 Name Pay Pal Address 2211 North First St, San Jose, CA 95131 <input type="checkbox"/> Fund Raiser	Purpose: Transaction Fee <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/18/17 Date	\$ 1.75 Click Here for Memo Itemization

Subtotal this page **229.61**

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

139195

1. Committee I. D. Number _____
2. Committee Name CTE Cardi DeMonaco

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Pay Pal Address 2211 North First St, San Jose, CA 95131 <input type="checkbox"/> Fund Raiser	Purpose: Transaction Fee <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/18/2017</u> Date	\$ <u>1.17</u> Click Here for Memo Itemiz:
Expenditure #2 Name Pay Pal Address 2211 North First St, San Jose, CA 95131 <input type="checkbox"/> Fund Raiser	Purpose: Transaction Fee <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/21/2017</u> Date	\$ <u>2.04</u> Click Here for Memo Itemiz:
Expenditure #3 Name Pay Pal Address 2211 North First St, San Jose, CA 95131 <input type="checkbox"/> Fund Raiser	Purpose: Transaction Fee <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/22/2017</u> Date	\$ <u>1.17</u> Click Here for Memo Itemiz:
Expenditure #4 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____ Click Here for Memo Itemiz:
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____ Click Here for Memo Itemiz:

Subtotal this page	4.38
Grand Total of all Schedules 1B (Complete on last page of Schedule)	2591.34

Enter this total
on line 8a of
Summary Page



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 139195
2. Committee Name CTE Cardi DeMonaco Jr

This Schedule itemizes:				
a. <input checked="" type="checkbox"/> Debts and obligations owed <u>by</u> or forgiven the committee OR b. Debts and obligations owed <u>to</u> or forgiven <u>by</u> the committee. (Check either a or b. Use only for the purpose checked.)				
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: Cardi DeMonaco Jr, 23225 Oakwood, Eastpointe, MI 48021	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>9/1/2017</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1000.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0.00</u>	\$ <u>1000.00</u> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? Yes Owed to or by: Cardi DeMonaco Jr, 23225 Oakwood, Eastpointe, MI 48021	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>9/12/2017</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1000.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0.00</u>	\$ <u>1000.00</u> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? Yes Owed to or by: Alysa Diebolt, 23225 Oakwood, Eastpointe, MI 48021	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>10/2/2017</u> 6. <u>Original Amount of Debt:</u> <u>\$ 22.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ <u>0.00</u>	\$ <u>22.00</u> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Page Subtotal (Outstanding debt)				2022.00
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				2022.00

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

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



139195

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number _____

2. Committee Name CTE Cardi DeMonaco Jr

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held _____	4. Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held. <input type="checkbox"/> Private Residence
-------------------------------------	--	----------------------------------	--

7. Total Contributions _____

8. Other Receipts _____

9. Gross Receipts (Add lines 7 and 8) _____

10. Total Cost of Event _____
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

NOTE:
Fundraiser to be held on October 23, 2017. And will be fully reported in Post-Election report

11. Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.