

CANDIDATE COMMITTEE

FOR OFFICIAL USE ONLY

COVER PAGE			
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by indidate.	This Statement covers: froi	m 10/23/2017 to 11/27/2017
1, Committee I.D. Number 139195		Candidate Last Name DeMonaco	First Name M.I. Cardi A
2. Committee Name			strict # or Community Served (If applicable)
CTE Cardi DeMonaco Jr		Board Member - Local	eastpointe .
C/E Caldi Demoraco di	TAGE TO SELECT	4b. County of Residence MA	
5 Committee's Mailing Address 23225 Oakwood, Eastpointe, MI 4 Area Code and Phone f the address in this box is different from the commit	The second secon	48021	23225 Oakwood, Eastpointe, MI HA 1 COLUMN ECCUPION COLUMN EC
mailing address on the Statement of Organization, noe sent to this address by the filing official.	пан тау	Area Code & Phone	
7 Treasurer's Business Address		Designated Record Keeper)	's Name and Mailing Address III the Shmittee has a
9. TYPE OF STATEMENT	T	Area Code and Phone	9e Dissolution of Candidate Committee
9a Pre-Election OR 9b Post-Election		NLY if candidate a ballot for the	By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is he
³re-Election or Post-Election Statement relates to:			by discharged and forgiven and no longer collectible from the committee. The committee has no outstanding assets.
Primary	July Qua	neny	owes no lates fees or has any outstanding debt.
General	October	Quarterly	Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.
Convention			considered a request of the Reputating Walver.
☐Special	9c. Annu	ual Statement ()	Effective date of dissolution
School	1 _	Coverage Year	and the second s
Caucus	(Cor	endment to Campaign Statement inplete Item 9a, 9b, 9c or 9e to late which Statement is being inded.)	Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.
Date of Election, Convention or Caucus 11/7/2017			
10. Verification: I/We certify that all reasonable dilig ny/our knowledge and belief the contents are true.	gence was use accurate and	d in the preparation of this statem complete.	nent and attached schedules (if any) and to the best of
Current Treasurer or Cardi DeMona Designated Record Keeper Type or Print Name	co Jr	, Car Or Signature	Date 12/5/2017
Cardi DeMonaco Jr		, Cu. a	287 Date 12/5/2017
Type or Print Name	2	Signature	

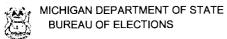


1. Committee I.D. Number

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name CTE Cardi DeMonaco Jr

CANDIDATE COMMITTEE	Column I	Column II
RECEIPTS	This Period	Cumulative this election cycl
3. Contributions	(25.) \$ 1515.00	
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE 1515.00	7020.00
c. Subtotal of "Contributions"	(3c.) \$	(18.) \$ 0.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	7020.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	(20.) \$
N-KIND CONTRIBUTIONS & EXPENDITURES	000.00	000.00
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$ 290.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures	0000 50	
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
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.) \$	(23.) \$ 5979.86
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$ 0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ 0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ 0.00	(24.)\$ 0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ 0.00	
	BALANCE STATEMENT 3963.13	
 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period 	(14.) + \$\frac{1515.00}{5470.10}	-
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(14.) + \$	- -
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	5478.13	- - -



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

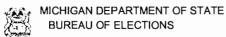
	139195
1. Committee I.D. Number	

CTE Cardi DeMonaco Jr
2. Committee Name

CANDIDATE COMMINITALE 2. Continue Name	A 105	
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 10/23/2017		
Name & Address: Gina Auito, 29167 Eastrose, Roseville, MI 48066	-	
		00.00
	\$30.00	§ 30.00
	Φ	
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 V Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/23/2017		
Name & Address		
Jason Fulgenzi, 2100 PLanavon St, Ferndale, MI 48220	00.00	00.00
	\$ 20.00	\$ 20.00
		<u> </u>
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Uniform Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 10/23/2017		
Name & Address: Rachel Wolfe, 1785 Channing St, Apt B, Ferndale, MI 48220	-	
hadrer Wolle, 1765 Charling St, Apt B, Ferridale, Wil 40220	20.00	20.00
	\$	\$
	Click Here	for Memo Itemization
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/23/2017		
Name & Address		
Will Sanders, 7330 N. Lafayette, Dearborn Heights, MI 48127	40.00	40.00
	40.00 \$	¢ 40.00
	T	Ψ
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Employer	55 110.0	
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtota	al 110.00	

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

1 8



8

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

139195

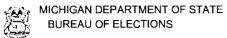
1. Committee I.D. Number

CTE Cardi DeMonaco Jr

line 3a of Summary

Page.

CANDIDATE COMMITTEE 2. Committee Nam	ne	
Enter contributor's name and address. If contribution is from an individual, enter last name, first middle initial. Check box to indicate if contribution is from a Political Committee or an Independence (PAC) Report all contributions regardless of amount.	ent	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 10/23/2017		
Name & Address: Jason Leinhart, 150 Glynn Ct, Apt C2, Detroit, MI 48202		
	\$	40.00 \$
5. If over \$100.00 cumulative, please provide:	Olivete Menos	Cont.
Occupation Employer	Click Here	for Memo Itemization
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/23/2017		
Name & Address		
Mike Keys, 23482 Grandy, Clinton Township, MI 48035	\$120.00	120.00
5. If over \$100.00 cumulative, please provide: Legislative Asst. Description Legislative Asst. Employer Employer Business Address Type of Contribution: V Direct Direct	Cor —	for Memo Itemization
Name & Address:	,	
Veronica Klinefelt, 16143 Wilson, Eastpointe, MI 48021	\$	30.00
5. If over \$100.00 cumulative, please provide:	Click Here f	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 10/23/2017 Name & Address Thomas Shaheen, 22713 Alger, St. Clair Shores, MI 48080	50.00 \$	50.00 \$
E 16 aven \$400.00 avenulativa places provide.		
5. If over \$100.00 cumulative, please provide:	Click Here t	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
	e Subtotal 240.00	
Grand Total of All Sche		
(Complete on last page of S		
	Fure the rotal of	



Page

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number

139195

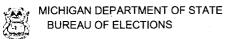
CTE Cardi DeMonaco Jr 2. Committee Name

Enter this total on

Page.

line 3a of Summary

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 10/23/2017		
Kathleen Dicenzo, 17640 Collinson, Eastpointe, MI 48021		
	60.00 \$	60.00 \$
5. If over \$100.00 cumulative, please provide:	Click Hard	e for Memo Itemization
Occupation Employer	Click Flere	FIOI MEITIO REITIIZARION
Business Address		
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/23/2017		
Name & Address Kathy Tocco, 31669 Kendall, Fraser, MI 48026		
Trainy Tocco, 5 1009 Rendall, 1 143ci, Wii 40020	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 10/23/2017		
Ryan Bardoni, 3824 S Longmeadow Rd, Trenton, MI 48183		
Tryan Bardoni, 882 i 8 Estiginodas vita, troncen, im 18 188	\$ 30.00	_{\$} 30.00
	·	Ψ
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 10/23/2017		
Name & Address Shirley Lappi, 32930 Whispering Lane, Chesterfield, MI 48047		
	30.00	30.00
	\$	\$
5. If over \$100.00 cumulative, please provide:	Click Hara	for Memo Itemization
Occupation Employer	Olick Fiere	TOT WICHTO ROTHIZATION
Business Address Fund Raiser		
Type of Contribution: Loan from a person Fund Raiser Page Subtota	180.00	
· · · · · · · · · · · · · · · · · · ·	· · ·	_
Grand Total of All Schedules 1A (Complete on last page of Schedule		



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

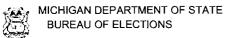
139195

1. Committee I.D. Number

CTE Cardi DeMonaco Jr

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 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 10/23/2017		
Name & Address: Patricia Germain, 25912 Salem, Roseville, MI 48066		
	30.00 \$	30.00 \$
5. If over \$100.00 cumulative, please provide:	Oli ala I la ma	for Marine Hermination
Occupation Employer	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 10/23/2017		
Name & Address Fred Barbret, 27844 Bohn, Roseville, MI 48066	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 #3 PAC Receipt? YES 4. Date of Receipt 10/23/2017		
Name & Address:	-	
Joe Wolford, 4120 Huron, Dearborn Heights, MI 48125	\$60.00	\$
	Click Here	for Memo Itemization
5. If over \$100.00 cumulative, please provide:	Ollok Flore	ioi womo nomeanon
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 10/23/2017		
Name & Address Carla Cavazos, 22231 Madison, St. Clair Shores, MI 48081		
,	100.00 \$	100.00
5. If over \$100.00 cumulative, please provide:		
o. Il otol \$100.00 dell'electro, pioceo provide.	Click Here	for Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtota	220.00	
Crand Total of All Cahadulas 1A		_

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



5

Page_

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

139195 1. Committee I.D. Number

CTE Cardi DeMonaco Jr

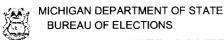
C	CANDIDATE C	OMMITTEE		2. Committee Name		
	oox to indicate if contr	ontribution is from an indivion ribution is from a Political Co egardless of amount.		tee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt?			t 10/23/2017		
Jame & Address; James Horton,	17333 Ego, E	ഥ astpointe, MI 4802	21			
,	U	• •			450.00	150.00
					150.00 s	\$
5. If over \$100.00 cur	mulative nlease pro	vide:				_
Retired					Click Here	for Memo Itemization
Occupation		_ Employer				
Business Address		1				•
Type of Contribution:	Direct	Loan from a person	•	Fund Raiser		
3. Contribution #2	PAC Receipt?	YES 4. Date of F	Receip	t 10/23/2017		
Name & Address Mary Perry, 23	573 Donaldsoı	n, Clinton Townshi	р, М	1 48035	\$0.00 \$	150.00 \$
5. If over \$100.00 cur		vide:			Click Here	for Memo Itemization
Retired Occupation	<u> </u>	Employer				
Business Address						
Type of Contribution:	Direct	Loan from a person	~	Fund Raiser		
3. Contribution # 3	PAC Receipt?	YES 4. Date of	Recei	pt 10/23/2017		
Name & Address:	la: 04074 Valla	_				
Craig brozows	KI, 24074 Valle	ey, Eastpointe, MI	+002	<u>. 1</u>	\$	90.00
5. If over \$100.00 cui	mulative, please pro	vide:			Click Here	for Memo Itemization
Occupation		Employer				
Business Address	U.10 - 10-17					
Type of Contribution:	Direct	Loan from a person	V	Fund Raiser		
3. Contribution # 4	PAC Receipt?	YES 4. Date of	Rece	ipt 10/23/2017		
Name & Address						
Mark Krause, 2	24930 Almona,	Eastpointe, MI 48	1021		00.00	00.00
					30.00 s	\$30.00
					<u> </u>	
5. If over \$100.00 cu	mulative, please pro	vide:			Click Here	for Memo Itemization
Occupation		_ Employer				
Business Address						
Type of Contribution	Direct	Loan from a person	V	Fund Raiser		
<u> </u>				Page Subtota	320.00	
			G=	and Total of All Schedules 1A		

(Complete on last page of Schedule)

Enter this total on

Page.

line 3a of Summary



ITEMIZED CONTRIBUTIONS **SCHEDULE 1A**

CANDIDATE COMMITTEE

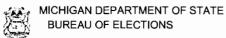
		1	39	1	9	5
	 NII					

1. Committee I.D. Number CTE Cardi DeMonaco Jr

2. Committee Name Enter contributor's name and address. If contribution is from an individual, enter last name, first name, 6. Amount 7. Cumulative for middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Election Cycle for Each Committee (PAC) Report all contributions regardless of amount. Contributor (Through date of receipt) 10/23/2017 PAC Receipt? YES 4. Date of Receipt 3. Contribution # 1 Joe DeMonaco, 12485 Lutz, Warren, MI 48093 40.00 40.00 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation ___ _____Employer____ Business Address Direct Type of Contribution: Fund Raiser Loan from a person 4. Date of Receipt 10/24/2017 PAC Receipt? YES 3. Contribution #2 Name & Address Donald Demiri, 2540 Woodward, Detroit, MI 48201 100.00 100.00 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation ___ Business Address Type of Contribution: | Direct Loan from a person Fund Raiser 4. Date of Receipt 10/25/2017 PAC Receipt? 3. Contribution #3 YES Name & Address: Robert Fetter, 22028 Englehardt, St. Clair Shores, MI 48080 30.00 30.00 Click Here for Memo Itemization 5. If over \$100.00 cumulative, please provide: Occupation Business Address Type of Contribution: Direct Loan from a person Fund Raiser 4. Date of Receipt 10/25/2017 3. Contribution #4 PAC Receipt? ☐ YES Name & Address Myra Golden, 16475 Stricker, 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 Fund Raiser Loan from a person 200.00 Page Subtotal

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

Page



ITEMIZED CONTRIBUTIONS SCHEDULE 1A CANDIDATE COMMITTEE

1. Committee I.D. Number

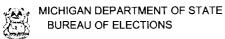
139195

2. Committee Name

Z. Committee Name	47.46	
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 10/27/2017		
Name & Address: Jordan Twardy, 2302 W 14 Mile, Royal Oak, MI 48073		
	75.00 \$	75.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here	e 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 10/28/2017		
Name & Address		
Judy Strong, 20054 15 Mile, Clinton Township, MI 48035	\$ 50.00	\$ 50.00
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
Name & Address:		
George Massu, 3938 Cottontail Ln, Shelby Twp, MI 48316	40.00	40.00
	\$	\$ <u></u>
	Oli ata 11a ma	
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 11/16/2017		
Name & Address Penny Canada, 8609 Harbortowne, Clarkston, MI 48348		
refing Canada, 6009 harbortowne, Clarkston, wii 40040	50.00	E0 00
	50.00 \$	50.00 \$
	,	
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
Page Subtotal	215.00	
Grand Total of All Schedules 1A		

8

(Complete on last page of Schedule)



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

139195

1. Committee I.D. Number

CTE Cardi DeMonaco Jr 2. Committee Name

J	ANDIDATE (2. 55		
	ox to indicate if cont	ribution is from a Political Cor 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 Re	eceipt 11/16/2017	· · · · · · · · · · · · · · · · · · ·	
Name & Address: Michael Brohl, 2	24845 Petersl	ப purg, Eastpointe, Mi	48021		
,		3 . 1 .		30.00 \$	30.00 \$
5. If over \$100.00 cum	ulative, please pro	ovide:		Of 1 11-	Con Manual Hamiltonia
Occupation		Employer		Click Here	for Memo Itemization
Business Address					
Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	YES 4. Date of Re	eceipt		
				\$	\$
5. If over \$100.00 cum	ulative, please pro	ovide:		Click Here	for Memo Itemization
Occupation	<u>-</u>	Employer			
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YES 4. Date of R	eceipt	-	
				\$	\$
5. If over \$100.00 cum	nulative, please pro	ovide:		Click Here	for Memo Itemization
Occupation		Employer	Apple 1		
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date of F	Receipt		
				\$	\$
5. If over \$100.00 cur	nulative, please pro	ovide:		Click Here	for Memo Itemization
Occupation		Employer			
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
			Page Subtota	al 30.00	
			Grand Total of All Schedules 1A	1515.00	
		(C	complete on last page of Schedule	· [

Page_

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

139195 1. Committee I. D. Number

VNDIDA.	TE COM	MMITTEE	Commit

CTE Cardi DeMonaco Jr

CANDIDATE COMM	IITTEE 2. Committee Name		
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 all 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)
Contribution # 1 PAC Receipt? Yes Name & Address: Alysa Diebolt, 23225 Oakwood, Eastpointe, MI 48021 If over \$100.00 cumulative, please provide: Occupation: Legislative Aide Employer Name & Business Address: State of Michigan 124 N Capitol, Lansing, MI 48909	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Stamps Description 11/3/2017 5. Date Of Receipt: 6. Vendor Name & Address:	68.00 \$	
Fund Raiser Contribution Contribution # 2 PAC Receipt? Yes Name & Address If over \$100.00 cumulative, please provide: Occupation: Employer 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 Description 5. Date Of Receipt: 6. Vendor Name & Address:	\$ k Here for Memo It	emization
Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description 5. Date Of Receipt: 6. Vendor Name & Address:	\$ ck Here for Memo It	emization
Fund Raiser Contribution	Page Subtotal	268.00	290.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	268.00	

Enter this total on line 6 of Summary Page

1



SCHEDULE 1B CANDIDATE COMMITTEE

139195

1. Committee I. D. Number

umber		
CTE	Cardi DeMonaco Jr	

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 Office Depot		10/23/2017	_{\$} 21.31		
	Office Supplies	Date	<u> </u>		
19001 E 9 Mile, Eastpointe, MI 48021	Purpose:				
•	Clic	ck Here for Memo	Itemization Type		
	Check box if this expenditure is payment	of			
Fund Raiser	debt or obligation reported on previous statement				
Expenditure #2	Statement				
Name Party City			20.26		
	Supplies	10/23/2017 Date	\$ 29.36		
Address	Supplies Purpose:	Date			
32469 Gratiot, Roseville, MI 48066	Clie	ck Here for Memo	Itemization Type		
		K Hele loi Mellio	itemization Type		
	Check box if this expenditure is payment debt or obligation reported on previous	of			
Fund Raiser	statement				
Expenditure #3					
Name Milestone Grill			_{\$} 425.00		
	Fundraiser	10/23/2017 Date	\$ 425.00		
Address 17831 E 9 Mile, Eastpointe, MI 48021	Purpose:				
17001 L 9 IVIIIe, Lastpolitie, IVII 40021	Clic	Click Here for Memo Itemization Type			
	Check box if this expenditure is payment	of			
✓ Fund Raiser	debt or obligation reported on previous				
Expenditure #4	statement				
Name PayPal					
Tayr ar		10/23/2017	_{\$} 1.17		
Address	Transaction Fee	Date			
2211 North First, San Jose, CA 95131					
	Clic	ck Here for Memo	Itemization Type		
	Check box if this expenditure is payment	of			
Fund Raiser	debt or obligation reported on previous statement				
Expenditure #5					
Name PayPal					
	Transaction Fee	10/23/2017	_{\$} 2.04		
Address 2211 North First, San Jose, CA 95131	Purpose:	Date			
	Cli	ck Here for Memo	Itemization Type		
	Check box if this expenditure is payment	. of			
Fund Raiser	debt or obligation reported on previous statement				
		ubtotal this page	478.88		
	Grand Total of (Complete on last p	all Schedules 1B page of Schedule)			

1



SCHEDULE 1B CANDIDATE COMMITTEE

139195

1. Committee I. D. Number

111001		
CTE	Cardi DeMonaco Jr	

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 PayPal		10/23/2017	_{\$} 2.04	
·	Transaction Fee	Date	Ψ	
Address 2211 North First, San Jose, CA 95131	Purpose:			
ZZTT NORTT IISI, Gair 6030, O/100101	Click	Here for Memo	Itemization Type	
	Check box if this expenditure is payment of	of		
Fund Raiser	debt or obligation reported on previous			
	statement			
Expenditure #2				
Name PayPal		10/23/2017	_{\$} 0.88	
	Transaction Fee	Date		
Address	Purpose:			
2211 North First, San Jose, CA 95131	Click	Click Here for Memo Itemization Type		
		-£		
	Check box if this expenditure is payment of debt or obligation reported on previous	וו		
Fund Raiser	statement			
Expenditure #3				
Name PayPal			Λ 99	
	Transaction Fee	10/23/2017	_{\$} 0.88	
Address	Purpose:	Date		
^{Address} 2211 North First, San Jose, CA 95131	Click	Here for Memo	Itemization Type	
			nomization Type	
	Check box if this expenditure is payment of	of		
Fund Raiser	debt or obligation reported on previous statement			
Expenditure #4				
Name PayPal				
, ,		10/23/2017	_{\$} 1.46	
Address	Transaction Fee	Date		
2211 North First, San Jose, CA 95131	1 diposo.			
	Clic	k Here for Memo	Itemization Type	
	Check box if this expenditure is payment	of		
Fund Raiser	debt or obligation reported on previous statement			
	Statement			
Expenditure #5				
Name PayPal		10/23/2017	_{\$} 1.46	
Address	Transaction Fee	Date	<u> </u>	
2211 North First, San Jose, CA 95131				
			Itemization Type	
	Check box if this expenditure is payment	of		
Fund Raiser	debt or obligation reported on previous statement			
<u> </u>	Su	btotal this page	6.72	
		all Oaka didaa 40		
	Grand Total of (Complete on last p	all Schedules 1B age of Schedule)		
	1	- '		



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

139195

1. Committee I. D. Number

CTE Cardi DeMonaco Jr

	Similate Name		
Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Cardi DeMonaco Jr Address 23225 Oakwood, Eastpointe, MI 48021	Loan Repayment	10/23/2017 Date	\$ 1000.00
20220 Oakwood, Easipolitie, Wi 40021	Click	Here for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	f	
Expenditure #2			
Name Cardi DeMonaco Jr Address	Loan Repayment	10/23/2017 Date	\$ 1000.00
23225 Oakwood, Eastpointe, MI 48021	Click	Here for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	ıf	
Expenditure #3			
Name PayPal Address North First San Jose CA 05131	Transaction Fee	1 <u>0/24/2017</u> Date	\$ 3.20 ———
Address 2211 North First, San Jose, CA 95131			Manadana T
	Click	Here for Memo	Itemization Type
	Check box if this expenditure is payment of	of	
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4	Statement		
Name PayPal			
i ayı aı		10/27/2017	_{\$} 2.48
Address	Transaction Fee	Date	
2211 North First, San Jose, CA 95131	Purpose:		
	Click	Here for Memo	Itemization Type
	Check box if this expenditure is payment of	of	
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name Mass Mailing			
	Mailing Services	10/29/2017	_{\$} 607.24
Address 35468 Mound Rd, Sterling Heights, MI 48310	Purpose:	Date	
Co too mound ha, otoming hoiging, in 40010	Click	k Here for Memo	Itemization Type
	Check box if this expenditure is payment		•
Fund Raiser	debt or obligation reported on previous statement		
		ototal this page	2612.92
	Grand Total of a (Complete on last page)		



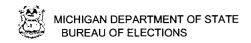
ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

139195

1. Committee I. D. Number

2. Committee Name CTE Cardi DeMonaco Jr

	Official value		
Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			***
Name Alysa Diebolt	1	11/23/2017	_{\$} 22.00
	_		\$ 22.00
Address	Purpose: Loan Repayment	Date	
23225 Oakwood, Eastpointe, MI 48021			
	Click Ho	ere for Memo I	temization Type
	Check box if this expenditure is payment of		
□ctp://	debt or obligation reported on previous		
Fund Raiser	statement Note: Reported on this	statement	
Expenditure #2			
Name Alysa Diebolt		14 600 6047	269.00
.,		11/23/2017	_{\$} 268.00
Address	Loan Repayment	Date	
Address 23225 Oakwood, Eastpointe, MI 48021	Fulpose.		
20223 Oakwood, Lastpointe, Wii 40021	Click He	ere for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
	statement Note: Reported on this	Statement	
Expenditure #3			
Name			
			\$
Address	Purpose:	Date	
	Click He	ere for Memo I	temization Type
	Check box if this expenditure is payment of		
□:	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name			
	_		\$
Address		Date	<u> </u>
Address	Purpose:		
	Click H	oro for Momo I	temization Type
	Olick Fix	ere for Merrio i	ternization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
	statement		
Expenditure #5			
Name			
			\$
Address	Purpose:	Date	
	l —	ere for Memo l	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
L und Naisei	statement	. I	000.00
	Subtot	al this page	290.00
	0	Sala a de de 4 P	0000 50
	Grand Total of all S (Complete on last page		3388.52
	(Complete on last page	or somedule)	



DEBTS AND OBLIGATIONS	139195 1. Committee I.D. Number	
SCHEDULE 1E	CTE Cardi DeMonaco Jr	
CANDIDATE COMMITTEE	2. Committee Name	
is Schedule itemizes:		

CAMDIDATE COMMINITTEE				
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the com	mittee OR b. Debt	ts and obligations owed <u>to</u> or urpose checked.)	forgiven by the cor	nmittee.
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or	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	Loan 4. Type:	10/23/2017 \$ 1000.		
Oakwood, Eastpointe, MI 48021	5. <u>Date Debt Was Incurred</u> : 9/1/2017 6. Original Amount of Debt:	\$	\$	\$_0.00
If bank loan, name of endorser or guarantor:	\$ 1000.00	\$	unt Fodoroods ¢	FORGIVEN
		T Amo	unt Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by Cardi DeMonaco Jr, 23225	Loan 4. Type:	10/23/2017 \$ 1000.00		
Oakwood, Eastpointe, MI 48021	5. <u>Date Debt Was Incurred</u> : 9/12/2017	\$	1000 04	0.00
	6. Original Amount of Debt:	\$	\$ 1000.00	\$_0.00
If bank loan, name of endorser or guarantor:		\$	ount Endorsed: \$_	I OKOIVEK
	Loop	1	lount Endorsed. ψ=	1
Debt #3 Corp? Yes Owed to or by: Alysa Diebolt, 23225 Oakwood,	4. Type: Loan	11/23/2017 \$ 22.00		
Eastpointe, MI 48021	5. <u>Date Debt Was Incurred</u> : 10/2/2017	\$		0.00
	6. Original Amount of Debt:	\$	\$ 22.00	\$_0.00
	\$	\$		FORGIVEN
If bank loan, name of endorser or guarantor:			mount Endorsed: \$_	, <u></u>
			· · · · · · · · · · · · · · · · · · ·	0.00
		Page Subtotal	(Outstanding debt)	1
(0	Complete on last page of Schedule	Grand Total showing amounts owed by o	of all Schedules 1E or to the committee)	<u></u>
				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.

Page ____ of __2



DEBTS AND OBLIGATIONS	1. Committee I.D. Number	139195
SCHEDULE 1E	CT	E Cardi DeMonaco Jr
CANDIDATE COMMITTEE	2. Committee Name	
nis Schedule itemizes:		
71 5		

CANDIDATE COMMITTEE				
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the com (Chec	mittee OR b. Debteck either a or b. Use only for the pu	s and obligations owed <u>to</u> or irpose checked.)	forgiven by the cor	nmittee.
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: Alysa Diebolt, 23225 Oakwood, Eastpointe, MI 48021	Loan 4. Type: 5. <u>Date Debt Was Incurred</u> : 11/3/2017	\$ \$ \$	000.00	. 0.00
	6. Original Amount of Debt: 268.00	\$	\$ 268.00	\$FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$ _	T
Debt #2 Corp? Yes Owed to or by:	4. Type:	\$		
	5. <u>Date Debt Was Incurred</u> : 6. <u>Original Amount of Debt</u> : \$	\$ \$ \$	\$	\$FORGIVEN
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_	1
Debt #3 Corp? Yes Owed to or by:	4. Type: 5. <u>Date Debt Was Incurred</u> :	\$ \$		
	6. Original Amount of Debt:	\$ \$	\$	\$FORGIVEN
If bank loan, name of endorser or guarantor:			mount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	0.00
(C	Complete on last page of Schedule	Grand Total showing amounts owed by o	of all Schedules 1E or to the committee)	Enter this total
				on line 12a "owed

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.

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

Page	2	of	2	
raue		OI.		



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number ______
CTE Cardi DeMonaco Jr

- USE A SEPARATE SHEET FOR EACH EVENT -							
3. Date Event Was Held	Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (If any) of place where the activity was hel				
10/23/2017	greatery	Dinner	Milestone Grill 17831 E. 9 Mile				
	50	Dinner	Eastpointe, MI 4802 Private Residence				
7. Total Contributions	\$3,400.00		\$1,885.00 reported on 7 Pre-Election Report				
8. Other Receipts		and	\$1,515.00 reported in Post-Election Report				
9. Gross Receipts (Add lines 7	and 8)	2017	Post-Election Report				
10. Total Cost of Event (Total Cost includes In-Kind Co	\$425 ontributions and All Expenditures	s Made For the Event)					
11. Check if event was a jo	oint fund raiser and complete the	e following:					
Co-Sponsor(s)	Contribution S (%)	Split	Expenditure Split (%)				
		<u></u>					
<u></u>							
							
	-						

2. Committee Name

- 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.

	1	4
	1	. 1
Page	(of
rage _		