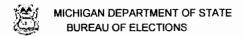


CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

_			
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement covers From	7-21-17 to 10-20-17	
1. Committee I.D. Number	4. Candidate Last Name	First Name M.I.	
138846-0	Grot	Stanley T	
2. Committee Name		strict # or Community Served (If applicable)	
	Shelby Township Cler	k 🔟	
CTE Stanley T. Grot	4b. County of Residence MA	COMB 🔽 👣	
5. Committee's Mailing Address 11927 Hiawatha Dr.	6. Treasurer's Name & Reside	ential Address	
Shelby Twp., MI 48315	Sylwia J. Grot 11927 Hiawatha Dr.	70	
J. 100, 111 100, 100	Shelby Twp., MI 483	0CT	
	one by two, in tee	23 FL	
Area Code and Phone (586) 677-2002			
if the address in this box is different from the committee mailing address on the Statement of Organization, mail may		ylik, th. main i i i i i i i i i i i i i i i i i i	
be sent to this address by the filing official.	Area Code & Phone (586) 6	77-2002	
7. Treasurer's Business Address		's Name and Mailing Address	
N/a	Designated Record keeper) N/a	•	
Area Code and Phone	Area Code and Phone		
9. TYPE OF STATEMENT	I ONLY if candidate	9e.	
9a. Pre-Election OR 9b. Post-Election is not on	the ballot for the	By checking this item I/We certify any outstanding debt	
Pre-Election or Post-Election Statement relates to:	ear.	by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from	
Primary July Q	uarterly	the committee. The committee has no oustanding assets, owes no lates fees or has any oustanding debt.	
☐ · · · · · · · · · · · · · · · · · · ·	er Quarterly		
General	,	Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.	
Convention			
1	nnual Statement ()	Effective date of dissolution	
School	Coverage Year		
Caucus (C	mendment to Campaign Statement complete Item 9a, 9b, 9c or 9e to		
1	dicate which Statement is being nended.)	Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.	
	,		
Date of Election, Convention or Caucus			
10. Verification: I/We certify that all reasonable diligence was us	sed in the preparation of this statem	nent 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 Sylwia J. Grot	Syllis Y	(not 10-91-17	
Designated Record keeper Type or Print Name	Signature	Date 10-21-17	
Chamles: T. Crast	2/1/	TO A MAIN	
Candidate Stanley T. Grot	1 Trankly	(STOC) Date 10-21-17	
Type or Print Name	Signature		
Authority granted under P.A. 388 of 1976	V		



1. Committee I.D. Number 138846-0

SUMMARY PAGE

2. Committee Name CTE Stanley T. Grot

CANDIDATE COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		,
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES	A	
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures	\sim	
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.) \$	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	(24.) \$
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	
13. Ending Balance of last report filed (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 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15)	BALANCE STATEMENT (13.) \$ $0.55.76$ (14.) + \$ (15.) = \$ (16.) - \$ (17.) \$ $2.055.76$	