# CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

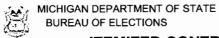
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by andidate.	3. This Statement covers From	1.1.17	to	10.20	.17	_
1. Committee I.D. Number		Candidate Last Name	First	Name		M.I.	_
138441		FRONTERA	CHARL	.ES		Α	
		4a. Office Sought Including Dis	trict # or Community	y Served	(If applicable)		
2. Committee Name		CITY COUNCIL				₹	
CTE CHARLES FRONTERA		4b. County of Residence MAC	СОМВ	⋾	63		
5. Committee's Mailing Address 16640 SARMORR ROSEVILLE, MI 48066		6. Treasurer's Name & Reside SAME AS 5	ntial Address			FILED 17 OCT 23 PH	
Area Code and Phone (586) 873-4389 If the address in this box is different from the commitmailing address on the Statement of Organization, r		Ave Orde 9 Phone				F₽ 3:	
be sent to this address by the filing official.  7. Treasurer's Business Address  SAME		8. Designated Record keeper Designated Record keeper)	s Name and Mailing	Address		<del> </del>	
Area Code and Phone		Area Code and Phone	9e. Dissolution o	of Candid	late Committe		
9. TYPE OF STATEMENT	Required Of	NLY if candidate		/ Caridia	iate Committee	•	
9a. Pre-Election OR 9b. Post-Election  Pre-Election or Post-Election Statement relates to:		ballot for the	By checking the by the committee to by discharged and the committee. The	o the can	didate or his or and no longer	collectible from	
Primary	July Quart	terly	owes no lates fees			•	
General	X October C	Quarterly	Further, if the disso				
Convention			considered a reque	33( 10) (1)	reporting wa		
Special	9c. Annua	al Statement () Coverage Year	Effective	date of c	dissolution		
School	│	_					
Caucus	(Com	ndment to Campaign Statement plete Item 9a, 9b, 9c or 9e to tte which Statement is being ded.)	Note: The disposit Schedule 1B and t			st be reported on	
Date of Election, Convention or Caucus							
10. Verification: I\We certify that all reasonable diligumy\our knowledge and belief the contents are true,	ence was used accurate and c	in the preparation of this statemomplete.	ent and attached sc	hedules (	(if any) and to the	he best of	
Current Treasurer or Designated Record keeper		, fll	1		10.2	3-17	
Type or Print Name		Signature	71	Date			
CHARLES A FRONTE	RA	, Cle	2f	Date	10-23	./7	
Type or Print Name	)	Signature					



#### **SUMMARY PAGE** CANDIDATE COMMITTEE

1. Committee I.D. Number 138-44/
2 Committee Name CTE Charles Frontes

		<del></del>
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions	2565.00	
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ 2565	(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	_	
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	2 /	
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 $768.^{\circ}$ $(13.)                                    $	



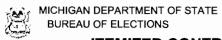
#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_

138441

2. Committee Name Committee To Elect

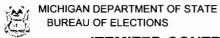
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 08/13/17  Name & Address:  RONALD SAPIANO		
5789 BLAINE	<sub>s</sub> 100	<u>,</u> 100
KENTWOOD, MI 48508	\$	\$
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 08/13/17  Name & Address		
CAROL DETTLOFF	45.00	45.00
65500 WOLCOTT	<sub>\$</sub> 15.00	<sub>\$</sub> 15.00
RAY, MI 48096		
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 08/13/17  Name & Address:		
MARK GAFFNEY	<b>5</b> 0	<b>5</b> 0
1580 LINCOLNSHIRE	<sub>\$</sub> 50	<sub>\$</sub> 50
DETROIT, MI 48203	Click Horo for	Memo Itemization
5. If over \$100.00 cumulative, please provide:	Click Fiele loi	Memo nemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser		<del></del>
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/09/17  Name & Address		
KATI VANTIEM	400	400
19181 15 MILE RD CLINTON TWP, MI 48035	<sub>\$</sub> 100	<sub>\$</sub> 100
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		momo nomeanon
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$265.00	
Grand Total of All Schedules 1A		-
(Complete on last page of Schedule)	Enter this total on	J
Page 1 of 1	line 3a of Summary Page.	



#### CANDIDATE COMMITTEE

1. Committee I.D. Number 138441

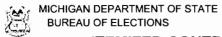
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 08/16/17 Name & Address: MARILYN FRONTERA	-	
48403 HEARTWOOD	¸20	. 20
SHELBY TWP, MI 48315  5. If over \$100.00 cumulative, please provide:	<u>\$</u> 20	\$20
	Click Here f	or 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 08/17/17  Name & Address		
DEBORAH STARK	0.5	
101 LOIS LN	<sub>\$</sub> 25	<sub>s</sub> 25
MT CLEMENS, MI 48043		
5. If over \$100.00 cumulative, please provide:	Click Here for	or 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 08/18/17  Name & Address:		
RUTH GREEN		
17812 OAKDALE	<sub>\$</sub> 25	ູ 25
ROSEVILLE, MI 48066		- *
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 # 4 PAC Receipt? YES 4. Date of Receipt 08/24/17 Name & Address		
IRENE KEPLER		
6039 POMPANO	<sub>s</sub> 100	ູ 100
FT. MYERS, FL 33919	\$	. \$
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		
Page Subtota	\$170.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule	Enter this total on	_
$_{Page}$ 2 of $\mathcal{U}$	line 3a of Summary Page.	1



#### CANDIDATE COMMITTEE

1. Committee I.D. Number 138441

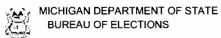
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 08/29/27  Name & Address: WENDY RICHARDSON  15553 SPRENGER		-
EASTPOINTE, MI 48021	<sub>\$</sub> 25	<sup>25</sup>
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here fo	r Memo Itemization ▼
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 08/30/17  Name & Address		
FRED MILLER	100	100
162 RIVERSIDE MT CLEMENS, MI 48043	<sub>\$</sub> 100	<u>\$ 100</u>
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization ▼
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/06/17	-	
Name & Address:		
SHELLY VANSICKLE 27243 NORMA	<sub>\$</sub> 25	ູ 25
WARREN, MI 48093	*	\$
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 09/06/17 Name & Address		:
BILL SHOEMAKER		
19273 BIRMINGHAM ROSEVILLE, MI 48066	<sub>\$</sub> 20	<sub>\$</sub> _20
5. If over \$100.00 cumulative, please provide:	Click Horo for	Mama Itamization
Occupation Employer	Click Here for	Memo Itemization ▼
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$170.00	
Grand Total of All Schedules 1A		-
(Complete on last page of Schedule)	Enter this total on	J
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### CANDIDATE COMMITTEE

1. Committee I.D. Number 138441

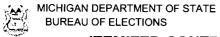
	ox to indicate if cont	ribu	ibution is from an individual, enter last name, first name, tion is from a Political Committee or an Independent ardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: RUSS WILLAU	PAC Receipt?		YES 4. Date of Receipt 09/06/17		
4704 DRYDEN				250	ູ 250
DRYDEN, MI 48	3428			<sub>\$</sub> 250	§ 230
5. If over \$100.00 cum				Click Here fo	r Memo Itemization ▼
Occupation REW I	NDUSTRIES	_	Employer_SELF	Click Here to	I Wellio Remization
Business Address 47	04 DRYDEN,	D	RYDEN, MI 48428		
Type of Contribution:	Direct		Loan from a person Fund Raiser	,	
Contribution #2     Name & Address	PAC Receipt?		YES 4. Date of Receipt <u>09/06/17</u>		
DAN WISE				00	00
21506 PANAMA				<u>\$</u> 20	<sub>\$</sub> 20
WARREN, MI 4	8091				
5. If over \$100.00 cum	nulative, please pro			Click Here for	r Memo Itemization ▼
Occupation	- IF AN-1-	_ E	nployer		
Business Address			****		
Type of Contribution:	Direct		Loan from a person Fund Raiser		
3. Contribution # 3	PAC Receipt?		YES 4. Date of Receipt 09/06/17	-	
Name & Address: WALTER BIEB	ED				
26224 VAN DY				<sub>\$</sub> 35	¸35
CENTERLINE,				<u> </u>	
5. If over \$100.00 cum		vid	e:	Click Here for	Memo Itemization ▼
Occupation		_	Employer		
Business Address					
Type of Contribution:	Direct		Loan from a person Fund Raiser		
Contribution # 4     Name & Address	PAC Receipt?		YES 4. Date of Receipt <u>09/06/17</u>		
MIKE HICKS				400	400
11205 MAE  WARREN, MI 4	2020			<sub>\$</sub> 100	<sub>s</sub> 100
5. If over \$100.00 cun		vid	e:		
Occupation		_	Employer	Click Here for	Memo Itemization ▼
Business Address					
Type of Contribution:	Direct		Loan from a person Fund Raiser		
			Page Subtotal	\$405.00	
			Grand Total of All Schedules 1A		-
			(Complete on last page of Schedule)	Enter this total on	J
_ 4 1/				line 3a of Summary	
Page of 1				Page.	



### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_138441

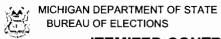
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/06/17 Name & Address: FRED BARBRET		
27844 BOHN ROSEVILLE, MI 48066	, 20	ړ 20
5. If over \$100.00 cumulative, please provide:	Ψ	<b>3</b>
Occupation Employer	Click Here for	r Memo Itemization ▼
. ,		
Business Address  Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/06/17  Name & Address		
JIM PELAK		
29722 WESTBROOK	<sub>s</sub> 100	<sub>\$</sub> 100
WARREN, MI 48092		-
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 09/06/17		
Name & Address:		
28231 FOUNTAIN	<sub>\$</sub> 50	<sub>s</sub> 50
ROSEVILLE, MI 48066	1	•
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 09/06/17 Name & Address		
RALPH FRONTERA		
18791 RIVERSIDE GLENN	<sub>\$</sub> 100	ູ 100
MACOMB, MI 48044	Ψ	<b>\$</b>
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	\$270.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	J
Page 5 of \( (	line 3a of Summary Page.	



### **CANDIDATE COMMITTEE**

1. Committee I.D. Number 138441

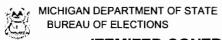
Enter contributor's nam middle initial. Check be Committee (PAC) Repo	ox to indicate if con ort <u>all</u> contributions	tribution is from regardless of a	n a Political Co	tual, ei	nter last name, first name, ee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: KAZMINE PON 3989 LAKEFOR STERLING HEI	EST DR		4. Date of F	Receip	09/06/17	<sub>\$</sub> 20	<sub>s</sub> 20
5. If over \$100.00 cum	ulative, please pro	ovide:					
Occupation	·	_ Employer_				Click Here	for Memo Itemization
Business Address							
Type of Contribution:	Direct	Loan from	a person	~	Fund Raiser		
Contribution #2  Name & Address	PAC Receipt?	YES	4. Date of R	Receipt	09/06/17		
HELEN CORRA 20623 ROSEDA CLINTON TWP	LE					<sub>\$</sub> 50	_ \$50
5. If over \$100.00 cum	ulative, please pro	vide:				Click Here	for Memo Itemization
Occupation		_ Employer					-
Business Address	····		****		- Continue		
Type of Contribution:	Direct	Loan from	a person	<b>V</b>	Fund Raiser		
3. Contribution # 3 Name & Address: DORIE FRONTE 4334 CURY STERLING HEIG		YES	4. Date of F	Receip	<sup>t</sup> <u>09/06/17</u>	<sub>\$</sub> 15	<sub>\$</sub> 15
5. If over \$100.00 cum	•					Click Here f	or Memo Itemization 🔻
	-idii idi pidada pid						<u></u>
Business Address		_ Employer					
Type of Contribution:	Direct	Loan from	a person	<b>V</b>	Fund Raiser		
Contribution # 4     Name & Address	PAC Receipt?	YES	4. Date of	Receip	ot <u>09/06/17</u>		
ANTONIA FROM 37744 PEBBLEF CLINTON TWP,	POINTE DR					<sub>\$</sub> 50	50
5. If over \$100.00 cum	ulative, please pro	vide:				Click Here fo	or Memo Itemization
Occupation		_ Employe	er		NIA.	Olick Fiele II	or Memo Remization
Business Address	_						
Type of Contribution:	Direct	Loan from	a person	<b>'</b>	Fund Raiser		
					Page Subtotal	\$135.00	
			(C		nd Total of All Schedules 1A te on last page of Schedule)	Enter this total on	
Page 6 of						line 3a of Summa Page.	у



### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_138441

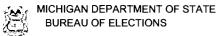
Enter contributor's name and address. If contribution is from an individual, enter last name, first name middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	e, 6. Amount 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/06/17  Name & Address:  MARIE CROOK	
36738 TULANE	<sub>s</sub> 50 <sub>s</sub> 50
STERLING HTS, MI 48312	\$ 50
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization ▼
Occupation Employer	_
Business Address	
Type of Contribution:	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/06/17 Name & Address	_
TONI WOODRING	10
4415 PENNSYLVANIA	<sub>\$</sub> 40
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 Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/06/17	
ANGELA FOSTER	<del></del>
36668 Edgewood	<sub>\$</sub> 100 <sub>\$</sub> 100
Shelby Tup. MI 48316	\$
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 09/06/17	
Name & Address  WALTER FRONTERA	
603 CHICAGO RD	<sub>\$</sub> 100 <sub>\$</sub> 100
WARREN, MI 48092	\$ 100 \$_100
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 Sub	ototal \$290.00
Grand Total of All Schedule:	-
(Complete on last page of Sched	
7 of [(	line 3a of Summary



#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_138441

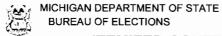
Enter contributor's nam middle initial. Check be Committee (PAC) Repo	x to indicate if cont	ribu	bution is from an individual, enter last name, first name, tion is from a Political Committee or an Independent rdless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: AARON KEIST	PAC Receipt?		YES 4. Date of Receipt <u>09/06/17</u>	-	
4304 AVERY	200			<sub>s</sub> 50	<sub>\$</sub> 50
DETROIT, MI 48				\$	\$
5. If over \$100.00 cum			<b>:</b>	Click Here fo	r Memo Itemization
Occupation		-	Employer		_
Business Address	<del></del>	_			
Type of Contribution:	Direct	┙	Loan from a person		
Contribution #2     Name & Address	PAC Receipt?		YES 4. Date of Receipt <u>09/06/17</u>		
HEATHER CRA				20	20
217 E DRAYTOI				<sub>\$</sub> 30	<sub>\$</sub> 30
FERNDALE, MI	48220				
5. If over \$100.00 cum				Click Here for	Memo Itemization
Occupation		- Er	nployer		
Business Address					
Type of Contribution:	Direct		Loan from a person		
3. Contribution # 3	PAC Receipt?		YES 4. Date of Receipt 09/06/17		
Name & Address: ALYSSA CORTI	=7		-		
2429 OAKWOO				<sub>s</sub> 30	¸30
MELVINDALE, N					5
5. If over \$100.00 cum	ulative, please pro	vid	<b>:</b>	Click Here for	Memo Itemization ▼
Occupation		_ [	Employer		
Business Address					
Type of Contribution:	Direct		Loan from a person Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?		YES 4. Date of Receipt <u>09/06/17</u>		
BART MAZZOLA 55511 STEWART				20	00
MACOMB, MI 4804	2			<sub>\$</sub> 20	<sub>\$_</sub> 20
5. If over \$100.00 cum	ulative, please pro	vid	9:	Click Here for	Memo Itemization ▼
Occupation		_	Employer		_
Business Address					
Type of Contribution:	Direct		Loan from a person Fund Raiser		
·			Page Subtotal	\$130.00	
			Grand Total of All Schedules 1A		-
			(Complete on last page of Schedule)	Enter this total on	_
<sub>Page</sub> 8 of 1(				line 3a of Summary	



### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_138441

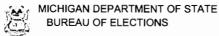
Enter contributor's name and address. If contribution is from an individual, enter last n middle initial. Check box to indicate if contribution is from a Political Committee or an I Committee (PAC) Report <u>all</u> contributions regardless of amount.	
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/06 Name & Address: KERRY MALIK 25683 CAMBRIDGE ROSEVILLE MI 48066	\$/17 \$25 \$25
5. If over \$100.00 cumulative, please provide:	Click Hore for Mama Itamization
Occupation Employer	Click Here for Memo Itemization
Business Address	
Type of Contribution: Direct Loan from a person Fund Ra	iser
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/06 Name & Address	/17
JUDY HARTWELL 25921 MARIANA CIR S HARRISON TWP MI	<sub>\$</sub> 35 <sub>\$</sub> 35
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 09/06 Name & Address:	5/17
KATHY TOCCO 31669 KENDAL FRASER MI 48026	\$50 \$50
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 F	aiser
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/06 Name & Address	6/17
LAURENCE FRONTERA 39059 BYERS STERLING HGHTS, MI	<sub>\$</sub> 100 <sub>\$</sub> 100
5. If over \$100.00 cumulative, please provide:	Clieb Hore for Mana Itamiration
Occupation Employer	Click Here for Memo Itemization
Business Address	
Type of Contribution: Direct Loan from a person Fund Ra	iser
	Page Subtotal \$210.00
	f All Schedules 1A page of Schedule)
Page 9 of 11	Enter this total on line 3a of Summary Page.



#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_138441

	ox to indicate if con	rib	ribution is from an individual, enter last name, first name, tion is from a Political Committee or an Independent ardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through
3. Contribution # 1		_			date of receipt)
Name & Address: NICHOLAS FRO 26240 BLUMFII ROSEVILLE, M	ELD	L	YES 4. Date of Receipt <u>09/06/17</u>	- <sub>\$</sub> 5	<sub>\$</sub> 5
5. If over \$100.00 cun	nulative, please pro	vic	e:	Olivio I I v	
Occupation		_	Employer	Click Her	e for Memo Itemization
Business Address					
Type of Contribution:	Direct		Loan from a person Fund Raiser		
Contribution #2     Name & Address	PAC Receipt?		YES 4. Date of Receipt <u>09/06/17</u>		
GINA AIUTO 18235 MARQUI ROSEVILLE, M				<sub>\$</sub> 15	<sub>\$</sub> 15
5. If over \$100.00 cum	ulative, please pro	vid	e:	Click Here	e for Memo Itemization
Occupation		_ E	nployer		_
Business Address					
Type of Contribution:	Direct		Loan from a person Fund Raiser	_	
3. Contribution # 3 Name & Address:  JAKE ALLPOR 2540 ROCHES ROYAL OAK, M	TER RD 11 48073	۔۔ا	YES 4. Date of Receipt <u>09/06/17</u>	\$20 Click Here	\$20 • for Memo Itemization ▼
5. If over \$100.00 cum	iuiative, piease pro				
Occupation Business Address		-	Employer		
Type of Contribution:	Direct		Loan from a person Fund Raiser		
Contribution # 4     Name & Address	PAC Receipt?		YES 4. Date of Receipt 09/06/17		
CHARLIE FROM 26240 BLUMFIE ROSEVILLE, M	ELD			<sub>\$</sub> 200	<sub>\$_</sub> 200
5. If over \$100.00 cum	nulative, please pro	vid	e:	Cliek Here	for Mama Itamization
Occupation_RETIR	ED	-	Employer FORD MOTOR CO	Click Here	for Memo Itemization
Business Address					
Type of Contribution:	Direct		Loan from a person Fund Raiser		
			Page Subtot	\$240.00	
			Grand Total of All Schedules 1/ (Complete on last page of Schedule	.	on
Page 10 of <b>N</b>				line 3a of Sumn Page.	nary



#### CANDIDATE COMMITTEE

# 2. Committee Name CTE CHARLES FRONTERA

	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	ox to indicate if conf	contribution is from an individual Contribution is from a Political Control 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 F	Receipt	09/06/17		
Name & Address: LIONEL SPITLE			_			
5178, Suti	6n -± 484	es			<sub>\$</sub> 100	<sub>\$</sub> 100
•					-	
If over \$100.00 cumulative, please provide:  Occupation Employer					Click Here for Memo Itemization	
Business Address						
Type of Contribution:	Direct	Loan from a person	<b>√</b> F	und Raiser		
Contribution #2     Name & Address	PAC Receipt?	YES 4. Date of F	Receipt 0	9/06/17		
RITA SPITLER						
5178 Suffor Oryder, NE 48428					<sub>s</sub> 100	្ត 100
Dryder, N	F 4845	5				. *
5. If over \$100.00 cum	ulative, please pro	vide:			Click Here for	or Memo Itemization ▼
Occupation	1111	Employer		· · · · · · · · · · · · · · · · · · ·		
Business Address	172			-		
Type of Contribution:	Direct	Loan from a person	<b>V</b>	Fund Raiser		
3. Contribution #3 Name & Address:  Cardi Demanico 23 225 or Knad East point, NT 480 7(  5. If over \$100.00 cumulative, please provide:  Occupation						s 50. UC \$
Business Address		. ,				
Type of Contribution:	Direct	Loan from a person	<b>D</b>	Fund Raiser		
Contribution # 4  Name & Address	PAC Receipt?	YES 4. Date of	Receipt	9.6.17		
38157 Rose	le p nI 48				* 39	\$30
5. If over \$100.00 cum	ulative, please pro	vide:			Click Here fo	r Memo Itemization ▼
Occupation		_ Employer				
Business Address						
Type of Contribution:	Direct	Loan from a person	<u></u> F	und Raiser		
				Page Subtotal	280	
				Total of All Schedules 1A	2565	
		(0	omplete.	on last page of Schedule)	Enter this total on	_

Page 11 of 1(

line 3a of Summary Page.



# SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

Committee Name CTE CHARLES FRONTERA

CANDIDATE COMMITTEE 2. Co	ommittee Name STE STITATED TT	0111210	
Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name MEIJER OF ROSEVILLE		09/03/17	s 106.21
	Purpose: Supplies for dinner	Date	
30800 LITTLE MACK			
ROSEVILLE, MI 48066	Click H	lere for Memo It	temization Type
,	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name CULVERS OF ROSEVILLE		09/06/17	\$ 250.00
00272110 01 1100271222	Food for dinner	Date	\$ <u>230.00</u>
Address	Purpose: Food for dinner		
30820 LITTLE MACK	Click H	ere for Memo It	emization Type
ROSEVILLE, MI 48066			_
<u></u>	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #3			
Name			\$
Address	Purpose:	Date	
Addisor			
	Click H	ere for Memo It	temization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name			
		Date	\$
Address	Purpose:		
	Click F	lere for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
	statement		
Expenditure #5			
Name			\$
Address	Purpose:	Date	
	Click I	Here for Memo I	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
	Subto	otal this page	\$356.21
	Grand Total of all	Schedules 1B	
	(Complete on last page		356.21

Enter this total on line 8a of Summary Page



Page \_\_\_\_\_ of \_\_\_\_\_

#### **FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE**

CTE CHARLES FRONTERA

	2. Com	mittee Name OIL CITAIL	ES FRONTEINA	
	- USE A SEPARATE SH	EET FOR EACH EVENT		
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 the place where the activity was held.  Clear Sight Optical	
9/06/17	65	DINNER	26768 Dequindre Warren, MI 48091 Private Residence	
Total Contributions				
Other Receipts				
Gross Receipts (Add lines 7	and 8)			
. Total Cost of Event otal Cost includes In-Kind Co	\$356.21  ntributions and All Expenditures	Made For the Event)		
. Check if event was a jo	int fund raiser and complete the	following:		
Co-Sponsor(s)	Contribution Split (%)		Expenditure Split (%)	
	<del></del>		<del></del>	
		<del></del>		
		<del></del>		
		<del></del>		
period covered by the C Receipts and expenditu Schedule (1A), Itemized Summary Page.	red to file a separate Fund Raise Campaign Statement. Tres listed on a Fund Raiser Schol In-Kind Contributions Schedul	nedule must also be reported on e (1-IK), Itemized Expenditure	on the Itemized Contributions as Schedule (1B) and the	