
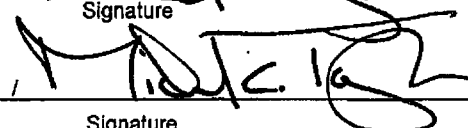




**CANDIDATE COMMITTEE
COVER PAGE**

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 138477		3. This Statement covers From: <u>10/21/16</u> to <u>10/22/17</u>	
2. Committee Name CTE Michael C. Taylor		4. Candidate Last Name Taylor First Name Michael M.I. C 4a. Office Sought Including District # or Community Served (If applicable) Sterling Heights Mayor 4b. County of Residence MACOMB	
5. Committee's Mailing Address 14076 Red Pine Dr. Sterling Heights, MI 48313 Area Code and Phone <u>(586) 822-3500</u> If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.		6. Treasurer's Name & Residential Address Michael C. Taylor 14076 Red Pine Dr. Sterling Heights, MI 48312 Area Code & Phone <u>(586) 822-3500</u>	
7. Treasurer's Business Address 14076 Red Pine Dr. Sterling Heights, MI 48313 Area Code and Phone <u>(586) 822-3500</u>		8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) Area Code and Phone _____	
9. TYPE OF STATEMENT 9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus Date of Election, Convention or Caucus <u>11/07/17</u>		Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly 9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year 9d. <input checked="" type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.) 9e. Dissolution of Candidate Committee <input type="checkbox"/> By checking this item I/We 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 late 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.	
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 Michael C. Taylor Type or Print Name		Signature  Date <u>11/22/17</u>	
Candidate Michael C. Taylor Type or Print Name		Signature  Date <u>11/22/17</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138477
2. Committee Name CTE Michael C. Taylor

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)
<p>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/15/17</u></p> <p>Name & Address: <u>Alan Casmere</u> <u>28836 Panama Rd</u> <u>Warren, MI 48092</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Self-Employed</u> Employer <u>Friendly Outdoor Storage</u> Business Address <u>33400 Maple Lane, Sterling Heights, MI 48312</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>500</u>	\$ <u>500</u>
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/16/17</u></p> <p>Name & Address: <u>Paul Alandt</u> <u>2000 Brush Street</u> <u>Detroit, MI 48228</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Self-Employed</u> Employer <u>Crest Lincoln</u> Business Address <u>36200 Van Dyke, Sterling Heights, MI 48312</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>500</u>	\$ <u>500</u>
<p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/17/17</u></p> <p>Name & Address: <u>Clint Mansour</u> <u>330 Hamilton Row - Suite 300</u> <u>Birmingham, MI 48009</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Self-Employed</u> Employer <u>Mansour Companies</u> Business Address <u>Same</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>1000</u>	\$ <u>1000</u>
<p>3. Contribution # 4 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>05/11/17</u></p> <p>Name & Address: <u>Sterling Heights Fire Fighters Union Local</u> <u>38911 Van Dyke Ave</u> <u>Sterling Heights, MI 48312</u></p> <p>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 checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>1000</u>	\$ <u>1000</u>

Page Subtotal \$3,000.00

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 138477

2. Committee Name CTE Michael C. Taylor

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? <input type="checkbox"/> YES 4. Date of Receipt <u>05/17/17</u> Name & Address: <u>Michael Mihalich</u> <u>3549 Mann Rd</u> <u>Clarkston, MI 48346</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Self-Employed</u> Employer <u>MJR Theatres</u> Business Address <u>35400 Van Dyke, Sterling Heights, MI 48312</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>250</u>	\$ <u>250</u>
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/15/17</u> Name & Address: <u>Eugene Lovell</u> <u>24300 Little Mack</u> <u>St. Clair Shores, MI 48080</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Banking</u> Employer <u>First State Bank</u> Business Address <u>Same</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>250</u>	\$ <u>250</u>
		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/16/17</u> Name & Address: <u>Anthony Galui</u> <u>37472 Alpinia Ln</u> <u>Clinton Township, MI 48036</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Self-Employed</u> Employer <u>Galui Construction</u> Business Address <u>33805 Harper Ave, Clinton Township, MI 48035</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>250</u>	\$ <u>250</u>
		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/15/17</u> Name & Address: <u>Gordon Wilson</u> <u>49572 Compass Point</u> <u>Chesterfield, MI 48047</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>AEW Engineers</u> Business Address <u>51301 Schoenherr, Shelby Twp., MI 48315</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>125</u>	\$ <u>125</u>
		Click Here for Memo Itemization	

Page Subtotal **\$875.00**

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

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138477
2. Committee Name CTE Michael C. Taylor

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? <input type="checkbox"/> YES	4. Date of Receipt <u>10/18/17</u>	
Name & Address: Ben Aloia 48 S. Main St., Suite 3 Mount Clemens, MI 48043		\$ <u>300</u>	\$ <u>300</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Self-Employed</u> Business Address <u>Same</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/18/17</u>	
Name & Address: Brandon Kaznowski 2208 Pine Harbor Ln Lake Orion, MI 48360		\$ <u>150</u>	\$ <u>150</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Banker</u> Employer <u>5th Third Bank</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/18/17</u>	
Name & Address: Raechel Badalamenti 19500 Hall Rd, Suite 100 Clinton Township, MI 48038		\$ <u>500</u>	\$ <u>1500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Same</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/18/17</u>	
Name & Address: Robert Kirk 19500 Hall Rd, Suite 100 Clinton Township, MI 48038		\$ <u>500</u>	\$ <u>1500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Same</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$1,450.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 138477

2. Committee Name CTE Michael C. Taylor

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? <input type="checkbox"/> YES	4. Date of Receipt <u>10/18/17</u>	
Name & Address: Robert Huth 19500 Hall Rd, Suite 100 Clinton Township, MI 48038		\$ <u>500</u>	\$ <u>1500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Same</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/18/17</u>	
Name & Address: Clint Mansour Same		\$ <u>300</u>	\$ <u>1300</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Same</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/18/17</u>	
Name & Address: Mazin Samona 1100 W. Maple Rd Troy, MI 48084		\$ <u>1500</u>	\$ <u>1500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Self-Employed</u> Employer <u>Smoker's Outlet</u> Business Address <u>Same</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/18/17</u>	
Name & Address: Mario Kiezi 13474 Partridge Run Shelby Township, MI 48315		\$ <u>1500</u>	\$ <u>1500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Self-Employed</u> Employer <u>Mkiezi Properties, LLC</u> Business Address <u>Same</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$3,800.00

Grand Total of All Schedules 1A
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