



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**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: 04/30/2018 to 07/22/2018

1. Committee I.D. Number

139617

2. Committee Name

CTE Julie Williams

5. Committee's Mailing Address

P.O. Box 202
Mt. Clemens, MI 48043

Area Code and Phone 586 212 8030

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.

4. Candidate Last Name

Williams

First Name

Julie

M.I.

A

4a. Office Sought Including District # or Community Served (If applicable)

Clerk

4b. County of Residence **MACOMB**

6. Treasurer's Name & Residential Address

Jeff Williams
21108 Masters
Macomb MI 48044

Area Code & Phone 586 949 6099

7. Treasurer's Business Address

21108 Masters
Macomb MI 48044

Area Code and Phone 586 949 6099

8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)

Jeff Williams
21108 Masters
Macomb MI 48044

Area Code and Phone 586 949 6099

9. TYPE OF STATEMENT

9a. ☒ Pre-Election OR 9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

☒ Primary

☐ General

☐ Convention

☐ Special

☐ School

☐ Caucus

Date of Election, Convention or Caucus

August 7, 2018

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. Dissolution of Candidate Committee

☐ By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is hereby 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 Jeff Williams

Type or Print Name

Signature

Date

7-26-2018

Candidate Julie Williams

Type or Print Name

Signature

Date

7-26-2018



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 123456-7

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Committee To Elect John Smith

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>4,675.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>4,675.00</u>	(18.) \$ <u>4,675.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u>0</u>	(19.) \$ <u>0</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>4,675.00</u>	(20.) \$ <u>4,675.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>0</u>	(21.) \$ <u>0</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u>0</u>	(22.) \$ <u>0</u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>3,510.75</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>0</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>0</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>3,510.75</u>	(23.) \$ <u>3,510.75</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>na</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>na</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	<u>na</u>	(24.) \$ <u>0</u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>4,700.03</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u></u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>0</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>4,675.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>4,675.00</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>3,510.75</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>1,164.00</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number

139617 *det Julie Williams*

2. Committee Name

Committee To ~~XXXXXXXXXX~~

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? ☐ YES4. Date of Receipt May 1, 2018

Name & Address:

Julie Williams
21108 Masters
Macomb MI 48044

\$ 75.00\$ 75.00

5. If over \$100.00 cumulative, please provide:

Occupation self employed Employer selfBusiness Address 21108 Masters Macomb MI 49044Type of Contribution: ☒ Direct ☒ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

3. Contribution #2

PAC Receipt? ☐ YES4. Date of Receipt May 17, 2018

Name & Address:

Julie Williams
21108 Masters
Macomb MI 48044

\$ 500.00\$ 575.00

5. If over \$100.00 cumulative, please provide:

Occupation self employed Employer selfBusiness Address 21108 Masters, Macomb MI 48044Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 3

PAC Receipt? ☐ YES4. Date of Receipt May 23, 2018

Name & Address:

Theresa Shiner
41605 Huntington Ct.
Clinton Twp. MI 48038

\$ 100.00\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation Managing partner Employer Austin Manning, IncBusiness Address 41605 Huntington Ct, Clinton Twp MI 48038Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 4

PAC Receipt? ☐ YES4. Date of Receipt May 25, 2018

Name & Address:

Toni Girolami
22286 Brantingham
Macomb MI 48044

\$ 100.00\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation Project Manager Employer ZF GroupBusiness Address 4585 26 Mile, Washington, MI 48094Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

Page Subtotal

775.00

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

4675.00

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number _____

2. Committee Name CTE Julie Williams

13ale 17

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. Contributor # 1 PAC Receipt? ☐ YES 4. Date of Receipt June 11, 2018

Name & Address:
Leslie Cameron
22323 Rosedale
St. Clair Shores, MI 48080

\$ 100.00

\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation Wealth Advisor Assistant Employer Comerica

[Click Here for Memo Itemization](#)

Business Address 20180 Mark Ave, Grosse Pointe Woods MI 48236

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt June 18, 2018

Name & Address:
Julie Williams
21108 Masters
Macomb, MI 48044

\$ 500.00

\$ 1075.00

5. If over \$100.00 cumulative, please provide:

Occupation self employed Employer self

[Click Here for Memo Itemization](#)

Business Address 21108 Masters, Macomb MI 48044

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt June 22, 2018

Name & Address:
Julie Williams
21108 Masters
Macomb MI 48044

\$ 3000.00

\$ 4075.00

5. If over \$100.00 cumulative, please provide:

Occupation self employed Employer self

[Click Here for Memo Itemization](#)

Business Address 21108 Masters Macomb MI 48044

Type of Contribution: ☐ Direct ☒ Loan from a person ☐ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt July 16, 2018

Name & Address:
Dorothy Stanton
174 S Wilson
Mt. Clemens, MI 48043

\$ 100.00

\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation retired Employer retired

[Click Here for Memo Itemization](#)

Business Address n/a

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 3700.00

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

4675.00

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number

139617

2. Committee Name

CTE Julie Williams

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 7/21/2018

Name & Address:
Michelle Trosper
45410 Nottingham
Macomb, MI 48044

\$ 200.00

\$ 200.00

5. If over \$100.00 cumulative, please provide:

Occupation retired 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

Name & Address

\$ \$

5. If over \$100.00 cumulative, please provide:

Occupation Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt

Name & Address

\$ \$

5. If over \$100.00 cumulative, please provide:

Occupation Employer

[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

Name & Address

\$ \$

5. If over \$100.00 cumulative, please provide:

Occupation Employer

[Click Here for Memo Itemization](#)

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal

200.00

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

4675

Enter this total on
line 3a of Summary
Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139617
2. Committee Name CTE Julie Williams

3. Name and address of person or vendor to whom paid	4. Purpose (Required information)	5. Date	6. Amount
Expenditure #1 Name <u>Daley Professional Web Solutions</u> Address 211 Cardinal Drive Montgomery, NY 12549 <input type="checkbox"/> Fund Raiser	Purpose: <u>website</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/18/18</u> Date	<u>\$ 219.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>First State Bank</u> Address 24300 Little Mack St Clair Shores MI <input type="checkbox"/> Fund Raiser	Purpose: <u>service fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/31/18</u> Date	<u>\$ 5.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>Romeo Printing</u> Address 225 N. Main Romeo, MI <input type="checkbox"/> Fund Raiser	Purpose: <u>business cards</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/31/18</u> Date	<u>\$ 114.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>Office Max</u> Address 33840 Gratiot Clinton Twp MI <input type="checkbox"/> Fund Raiser	Purpose: <u>name badges</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/7/18</u> Date	<u>\$ 43.43</u> Click Here for Memo Itemization Type
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 Itemization Type
Subtotal this page			381.43
Grand Total of all Schedules 1B (Complete on last page of Schedule)			3510.75

Enter this total
on line 2a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 139617
2. Committee Name CTE Julie Williams

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Walter Hooper</u> Address <u>24436 Sunnyside</u> <u>St Clair Shores, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>social media</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/13/18</u> Date	<u>\$ 70.00</u>
Expenditure #2 Name <u>Romeo Printing</u> Address <u>225 N. Main</u> <u>Romeo, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>palm pieces</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/15/18</u> Date	<u>\$ 341.92</u>
Expenditure #3 Name <u>Denuo Media</u> Address <u>950 W. University #103</u> <u>Rochester Hills MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>social media</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/15/18</u> Date	<u>\$ 15.00</u>
Expenditure #4 Name <u>Sawicki & Son</u> Address <u>1521 W. Lafayette Blvd.</u> <u>Detroit, MI 48216</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/26/18</u> Date	<u>\$ 961.95</u>
Expenditure #5 Name <u>Run the Plank</u> Address <u>c/o Immanuel Lutheran Church</u> <u>47120 Romeo Plank</u> <u>Macomb MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>sponsorship</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/27/18</u> Date	<u>\$ 250.00</u>

Subtotal this page 1638.87
Grand Total of all Schedules 1B
(Complete on last page of Schedule) 3510.75
Enter this total on line 8a of Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139617

2. Committee Name CTE Julie Williams

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Record Newspapers Address P. O. Box 708 Washington, MI 48094 <input type="checkbox"/> Fund Raiser	Purpose: <u>advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/29/18</u> Date	<u>\$ 600.00</u>
Expenditure #2 Name First State Bank Address 24300 Little Mack St. Clair Shores, MI <input type="checkbox"/> Fund Raiser	Purpose: <u>service fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/29/18</u> Date	<u>\$ 5.00</u>
Expenditure #3 Name Facebook Address <u>1 Hacker Way</u> <u>Menlo Park, CA 94025</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/2/18</u> Date	<u>\$ 85.00</u>
Expenditure #4 Name Italian American Cultural Center Address 43843 Romeo Plank Clinton Twp MI <input type="checkbox"/> Fund Raiser	Purpose: <u>sponsorship</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/2/18</u> Date	<u>\$ 150.00</u>
Expenditure #5 Name Polish American Cultural Center Address 2975 E Maple Troy, MI <input type="checkbox"/> Fund Raiser	Purpose: <u>sponsorship</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/3/18</u> Date	<u>\$ 150.00</u>

Subtotal this page **990.00**

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

3510.75

Enter this total
on line 8a of
Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139617
2. Committee Name CTE Julie Williams

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>The Italian Tribune</u> Address P.O. Box 380407 Clinton Twp MI <input type="checkbox"/> Fund Raiser	Purpose: <u>advertising</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/9/18</u> Date	<u>\$ 140.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>Romeo Printing</u> Address 225 N Main Romeo, MI <input type="checkbox"/> Fund Raiser	Purpose: <u>palm pieces</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7/20/18</u> Date	<u>\$ 348.74</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>Raise the Money</u> Address P.O. Box 26466 Little Rock, AR 72221 <input type="checkbox"/> Fund Raiser	Purpose: <u>service fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/25/18</u> Date	<u>\$ 5.85</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>Raise the Money</u> Address P.O. Box 26466 Little Rock, AR 72221 <input type="checkbox"/> Fund Raiser	Purpose: <u>service fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/30/18</u> Date	<u>\$ 5.85</u> Click Here for Memo Itemization Type
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 Itemization Type

Subtotal this page

500.44

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

3510.74

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 139617
2. Committee Name CTE Julie Williams

This Schedule itemizes:

a ☒ Debts and obligations owed by or forgiven the committee OR b ☐ Debts and obligations owed to or forgiven by 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 guarantor, 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 or debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Julie Williams 21108 Masters Macomb MI 48044	4. Type: <u>loan to committee</u> 5. <u>Date Debt Was Incurred:</u> <u>June 22, 2018</u> 6. <u>Original Amount of Debt:</u> <u>\$ 3000.00</u>	0 \$ \$ \$ \$ \$	\$ 0	\$ 3000.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ 3000.00		
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: C & G Newspapers 13650 Eleven Mile Warren, MI 48089	4. Type: <u>advertising</u> 5. <u>Date Debt Was Incurred:</u> <u>June 28, 2018</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1700.30</u>	0 \$ \$ \$ \$ \$	\$ 0	\$ 1700.30 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> 6. <u>Original Amount of Debt:</u> \$ _____	\$ \$ \$ \$ \$	\$ _____	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt): **4700.03**

Grand Total of all Schedules 1E **4700.03**
(Complete on last page of Schedule showing amounts owed by or to the committee)

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.

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