





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.

1. Committee I.D. Number <b>139637</b>		3. This Statement covers From: <u>08/28/18</u> to <u>10/21/18</u>	
2. Committee Name <b>Lisa Sinclair 4 Clerk</b>		4. Candidate Last Name <b>Sinclair</b> First Name <b>Lisa</b> M.I. <b>E</b> 4a. Office Sought Including District # or Community Served (If applicable) <b>Macomb County Clerk / Register of Deeds</b> 4b. County of Residence <b>MACOMB</b>	
5. Committee's Mailing Address <b>46958 N. Gratiot Ave. P.O. Box 262 Chesterfield, MI 48051</b> Area Code and Phone <u>(586) 569-9211</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 <b>Kenneth J. Verkest 39285 N. Blom Harrison Township, MI 48045</b> Area Code & Phone <u>(586) 914-9944</u>	
7. Treasurer's Business Address <b>38151 L'Anse Creuse Harrison Township, MI 48045</b> Area Code and Phone <u>(586) 914-9944</u>		8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) <b>N / A</b> 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>11/06/18</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 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 <b>Kenneth J. Verkest</b> Type or Print Name		Signature  Date <u>10/26/18</u>	
Candidate <b>Lisa Sinclair</b> Type or Print Name		Signature  Date <u>10/26/18</u>	



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 139637

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name Lisa Sinclair 4 Clerk

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>4,202.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>4,202.00</u>	(18.) \$ <u>\$6,002.00</u>
<b>4. Other Receipts (Schedule 1A -1, Column 6)</b>	(4.) \$	<u>\$0.00</u>	(19.) \$ <u>\$0.00</u>
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$	<u>\$4,202.00</u>	(20.) \$ <u>\$6,002.00</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>			
<b>6. In-Kind Contributions (Schedule 1-IK, Column 7)</b>	(6.) \$	<u>\$1,386.06</u>	(21.) \$ <u>\$15,074.83</u>
<b>7. In-Kind Expenditures (Schedule 1B-IK, Column 6)</b>	(7.) \$	<u>\$0.00</u>	(22.) \$ <u>\$0.00</u>
<b>EXPENDITURES</b>			
<b>8. Expenditures</b>			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>\$3,674.36</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>\$0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>\$0.00</u>	
<b>9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)</b>	(9.) \$	<u>\$3,674.36</u>	(23.) \$ <u>\$5,399.17</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)			
<b>10. Disbursements</b>			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>\$0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>\$0.00</u>	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$	<u>\$0.00</u>	(24.) \$ <u>\$0.00</u>
<b>DEBTS AND OBLIGATIONS</b>			
<b>12. Debts and Obligations</b>			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>\$13,927.83</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u>\$0.00</u>	
<b>BALANCE STATEMENT</b>			
<b>13. Ending Balance of last report filed</b> (Enter zero if no previous reports have been filed.)	(13.) \$	<u>\$75.19</u>	
<b>14. Amount received during reporting period</b> (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>\$4,202.00</u>	
<b>15. SUBTOTAL Add lines 13 and 14</b>	(15.) = \$	<u>\$4,277.19</u>	
<b>16. Amount expended during reporting period</b> (Add lines 9 and 11)	(16.) - \$	<u>\$3,674.36</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$	<u>\$602.83</u>	*



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139637  
2. Committee Name Lisa Sinclair 4 Clerk

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)
<b>3. Contribution # 1</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/04/18</u> Name & Address: Karen Workun 3879 Galaxy Blvd. Sterling Heights, MI 48314 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 type="checkbox"/> Fund Raiser		\$ <u>100.00</u>	\$ <u>100.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution #2</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/02/18</u> Name & Address: Jayle Caprara 19300 Acorn Lane Clinton Township, MI 48038 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 type="checkbox"/> Fund Raiser		\$ <u>10.00</u>	\$ <u>10.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 3</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/02/18</u> Name & Address: Mark Acquaviva 34678 Greentrees Road Sterling Heights, MI 48312 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 type="checkbox"/> Fund Raiser		\$ <u>5.00</u>	\$ <u>5.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 4</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/02/18</u> Name & Address: John Pace 15752 Jennifer Fraser, MI 48026 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 type="checkbox"/> Fund Raiser		\$ <u>20.00</u>	\$ <u>20.00</u>
		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$135.00**

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 139637

2. Committee Name Lisa Sinclair 4 Clerk

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)
<b>3. Contribution # 1</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>09/04/18</u> Name & Address: <b>William Pace</b> <b>15791 Nader Ct.</b> <b>Clinton Township, MI 48038</b> <b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>100.00</u>	\$ <u>100.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution #2</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>09/04/18</u> Name & Address: <b>Ava McDowell</b> <b>19862 Abrahm</b> <b>Clinton Township, MI 48035</b> <b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>10.00</u>	\$ <u>10.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 3</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>09/05/18</u> Name & Address: <b>Nancy Tiseo</b> <b>16155 Vista Woods</b> <b>Clinton Township, MI 48038</b> <b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>200.00</u>	\$ <u>200.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 4</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>09/20/18</u> Name & Address: <b>Edward Norton</b> <b>508 Quay St.</b> <b>Port Huron, MI 48060</b> <b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>20.00</u>	\$ <u>20.00</u>
		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$330.00**

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 139637

2. Committee Name Lisa Sinclair 4 Clerk

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)
<b>3. Contribution # 1</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>09/20/18</u> Name & Address: Harrison Cloke 13852 Ida Warren, MI 48089		\$ <u>25.00</u>	\$ <u>25.00</u>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution #2</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>09/02/18</u> Name & Address: Erica Goe 15427 Lakeside Village Dr Apt 201 Clinton Township, MI 48038		\$ <u>25.00</u>	\$ <u>25.00</u>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 3</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>09/02/18</u> Name & Address: Scott Pike 17183 Mayfield Macomb Township, MI 48042		\$ <u>20.00</u>	\$ <u>20.00</u>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 4</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>09/20/18</u> Name & Address: Gail Hicks 51308 Industrial Macomb Township, MI 48042		\$ <u>100.00</u>	\$ <u>100.00</u>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$170.00**

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 139637

2. Committee Name Lisa Sinclair 4 Clerk

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)
<b>3. Contribution # 1</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/02/18</u> Name & Address: Jeff Rozumny 24006 Blue Jay Clinton Township, MI 48036		\$ <u>50.00</u>	\$ <u>50.00</u>
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 type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution #2</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/02/18</u> Name & Address: Cynthia Love 18280 Prevost St. Detroit, MI 48235		\$ <u>20.00</u>	\$ <u>20.00</u>
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 type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 3</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/02/18</u> Name & Address: Angela Sontag 5141 Carrigan Rd. North Street 48049		\$ <u>20.00</u>	\$ <u>20.00</u>
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 type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 4</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/03/18</u> Name & Address: April Ryniewicz 30851 North River Road Harrison Township, MI 48045		\$ <u>25.00</u>	\$ <u>25.00</u>
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 type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$115.00**

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 139637

2. Committee Name Lisa Sinclair 4 Clerk

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>09/04/18</u></p> <p>Name &amp; Address:</p> <p>Geoffrey Garner 17396 Tower Dr. Macomb, MI 48044</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>50.00</u>	\$ <u>50.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/05/18</u></p> <p>Name &amp; Address:</p> <p>David Pry 33664 Sunrise Drive Fraser, MI 48026</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>Retired</u>      Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>250.00</u>	\$ <u>250.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/06/18</u></p> <p>Name &amp; Address:</p> <p>Donald Burke 3310 Dallas Warren, MI 48091</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>35.00</u>	\$ <u>35.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/06/18</u></p> <p>Name &amp; Address:</p> <p>Robert Shackleton 51601 Wilshire New Baltimore, MI 48047</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>50.00</u>	\$ <u>50.00</u>
		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$385.00**

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 139637

2. Committee Name Lisa Sinclair 4 Clerk

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>09/08/18</u> Name & Address: Richard Botimer 32370 Sheffield Court Fraser, MI 48026		\$ <u>35.00</u>	\$ <u>35.00</u>
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 type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/12/18</u> Name & Address: David Workun 3879 Galaxy Sterling Heights, MI 48314		\$ <u>50.00</u>	\$ <u>100.00</u>
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 type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/12/18</u> Name & Address: Roger Stevens 16054 Blue Spruce Lane Clinton Township, MI 48035		\$ <u>25.00</u>	\$ <u>25.00</u>
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 type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/17/18</u> Name & Address: Anthony Dimeglio 21639 Summerfield Dr. Macomb Township, MI 48044		\$ <u>40.00</u>	\$ <u>40.00</u>
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 type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$150.00**

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 139637

2. Committee Name Lisa Sinclair 4 Clerk

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)
<b>3. Contribution # 1</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>09/22/18</u> Name & Address: Nicole Saydak 20507 Webster Clinton Township, MI 48035 <b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>10.00</u>	\$ <u>10.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution #2</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>09/25/18</u> Name & Address: Tracey Butterworth 73 Spring Dale Lane Dallas, GA 30157 <b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>35.00</u>	\$ <u>35.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 3</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>09/25/18</u> Name & Address: Donna Keith 20336 Homeland Roseville, MI 48066 <b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>25.00</u>	\$ <u>25.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 4</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>09/26/18</u> Name & Address: Loryn Retell 40739 Regency Sterling Heights, MI 48313 <b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ <u>20.00</u>	\$ <u>20.00</u>
		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$90.00**

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 139637

2. Committee Name Lisa Sinclair 4 Clerk

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)
<b>3. Contribution # 1</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/26/18</u> Name & Address: Charles Shea 11349 Eleven Mile Road Warren, MI 48093		\$ <u>30.00</u>	\$ <u>30.00</u>
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 type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution #2</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/26/18</u> Name & Address: Richard Botimer 32370 Sheffield Court Fraser, MI 48026		\$ <u>35.00</u>	\$ <u>70.00</u>
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 type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 3</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/26/18</u> Name & Address: Marcy LaCross 32253 Cambridge Warren, Mi 48093		\$ <u>50.00</u>	\$ <u>50.00</u>
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 type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 4</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/01/18</u> Name & Address: Greg Childs 30247 Lund Warren, MI 48093		\$ <u>35.00</u>	\$ <u>35.00</u>
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 type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal \$150.00

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 139637

2. Committee Name Lisa Sinclair 4 Clerk

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>09/11/18</u></p> <p>Name &amp; Address:</p> <p>David Gardner 6740 Shea Road Marine City, MI 48039</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>50.00</u>	\$ <u>50.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/11/18</u></p> <p>Name &amp; Address:</p> <p>Harry Kurtz 1040 Lakeshore Grosse Pointe, MI 48236</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>President</u>      Employer <u>Triune Specialty Trailers</u></p> <p>Business Address <u>950 East Whitcomb, Madison Heights, MI 48071</u></p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>250.00</u>	\$ <u>250.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/11/18</u></p> <p>Name &amp; Address:</p> <p>Margaret Sepienza 14030 Lakeside Blvd. Apt 318 Shelby Township, MI 48315</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>50.00</u>	\$ <u>50.00</u>
		<a href="#">Click Here for Memo Itemization</a>	
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/11/18</u></p> <p>Name &amp; Address:</p> <p>Keith Rengert 34080 Armada Ridge Road Richmond, MI 48062</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>40.00</u>	\$ <u>40.00</u>
		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$390.00**

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 139637

2. Committee Name Lisa Sinclair 4 Clerk

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)
<b>3. Contribution # 1</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>09/11/18</u> Name & Address: <b>John Foglyano</b> <b>102 Moross</b> <b>Mt. Clemens, MI 48043</b>		<b>\$ 100.00</b>	<b>\$ 100.00</b>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution #2</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>09/11/18</u> Name & Address: <b>9th District Republican Committee</b> <b>7007 Metropolitan Parkway #728</b> <b>Sterling Heights, MI 48311</b>		<b>\$ 750.00</b>	<b>\$ 750.00</b>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 3</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>09/11/18</u> Name & Address: <b>Mary Jane Johnson</b> <b>14030 Lakeside Blvd. Apt 225</b> <b>Shelby Township, MI 48315</b>		<b>\$ 50.00</b>	<b>\$ 50.00</b>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 4</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>09/11/18</u> Name & Address: <b>Kathy Stevens</b> <b>11730 Aleta Circle</b> <b>Warren, MI 48093</b>		<b>\$ 100.00</b>	<b>\$ 100.00</b>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$1,000.00**

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 139637

2. Committee Name Lisa Sinclair 4 Clerk

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)
<b>3. Contribution # 1</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>09/11/18</u> Name & Address: <b>Mary Kay Sogge</b> <b>38765 Chartier</b> <b>Harrison Township, MI 48045</b>		<b>\$ 25.00</b>	<b>\$ 25.00</b>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution #2</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>09/11/18</u> Name & Address: <b>David Jaye</b> <b>25810 Hickory Blvd. #603</b> <b>Bonita Springs, FL 34134</b>		<b>\$ 25.00</b>	<b>\$ 25.00</b>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 3</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>09/11/18</u> Name & Address: <b>Max Fellsman</b> <b>14612 Alpena Drive</b> <b>Sterling Heights, MI 48313</b>		<b>\$ 50.00</b>	<b>\$ 50.00</b>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	
<b>3. Contribution # 4</b> PAC Receipt? <input type="checkbox"/> YES <b>4. Date of Receipt</b> <u>09/20/18</u> Name & Address: <b>Max Fellsman</b> <b>14612 Alpena Drive</b> <b>Sterling Heights, MI 48313</b>		<b>\$ 30.00</b>	<b>\$ 80.00</b>
<b>5. If over \$100.00 cumulative, please provide:</b> Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$130.00**

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 139637

2. Committee Name Lisa Sinclair 4 Clerk

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>09/25/18</u>	
Name & Address: Paul Smith 41280 Utica Road Sterling Heights, MI 48313		\$ <u>207.00</u>	\$ <u>207.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input 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>09/25/18</u>	
Name & Address: David Jaye 25810 Hickory Blvd. #603 Bonita Springs, FL 34134		\$ <u>100.00</u>	\$ <u>125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input 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>10/02/18</u>	
Name & Address: John Nagy 26479 Sanajo Ct. Chesterfield, MI 48051		\$ <u>50.00</u>	\$ <u>50.00</u>
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 type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/06/18</u>	
Name & Address: Steven Dougan 2455 Pine Tree Rd. Holt, MI 48842		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Registered Representative</u> Employer <u>Farmers Insurance</u> Business Address <u>110 E. Main St., Brighton, MI 48116</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$557.00**

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 139637

2. Committee Name Lisa Sinclair 4 Clerk

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)
<b>3. Contribution # 1</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/11/18</u> Name & Address: Eric Trombley 49635 Compass Drive New Baltimore, MI 48047		\$ <u>25.00</u>	\$ <u>25.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
<b>3. Contribution #2</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/11/18</u> Name & Address: Greg Childs 30247 Lund Warren, MI 48093		\$ <u>30.00</u>	\$ <u>65.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
<b>3. Contribution # 3</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/11/18</u> Name & Address: Steve Pitlock 22326 Erben St. Clair Shores, MI 48081		\$ <u>60.00</u>	\$ <u>60.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
<b>3. Contribution # 4</b> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/11/18</u> Name & Address: Ava McDowell 19862 Abrahm Clinton Township, MI 48035		\$ <u>30.00</u>	\$ <u>40.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$145.00

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 139637

2. Committee Name Lisa Sinclair 4 Clerk

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>09/11/18</u></p> <p>Name &amp; Address:</p> <p>David Pry 33664 Sunrise Drive Fraser, MI 48026</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>Retired</u>      Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>25.00</u>	\$ <u>225.00</u>
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/11/18</u></p> <p>Name &amp; Address:</p> <p>Jeff Cunningham 29939 Riverside Bay Court Harrison Township, MI 48045</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____      Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>50.00</u>	\$ <u>50.00</u>
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/20/18</u></p> <p>Name &amp; Address:</p> <p>Margaret Sepienza 14030 Lakeside Blvd. Apt 318 Shelby Township, MI 48315</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____      Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>30.00</u>	\$ <u>80.00</u>
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/20/18</u></p> <p>Name &amp; Address:</p> <p>Mary Jane Johnson 14030 Lakeside Blvd. Apt 225 Shelby Township, MI 48315</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____      Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>20.00</u>	\$ <u>70.00</u>

Page Subtotal **\$125.00**

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 139637

2. Committee Name Lisa Sinclair 4 Clerk

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>09/20/18</u></p> <p>Name &amp; Address: Nancy Tiseo 16155 Vista Woods Clinton Township, MI 48038</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u>      Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>50.00</u>	\$ <u>250.00</u>
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/20/18</u></p> <p>Name &amp; Address: Bob Sinclair 817 Riverview Marysville, MI 48040</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u>      Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>280.00</u>	\$ <u>280.00</u>
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____</p> <p>Name &amp; Address: _____</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ _____	\$ _____
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____</p> <p>Name &amp; Address: _____</p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____      Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ _____	\$ _____

Page Subtotal **\$330.00**

Grand Total of All Schedules 1A  
(Complete on last page of Schedule) **\$4,202.00**

Enter this total on  
line 3a of Summary  
Page.



# ITEMIZED IN-KIND CONTRIBUTIONS

## SCHEDULE 1-IK

1. Committee I. D. Number 139637

## CANDIDATE COMMITTEE

2. Committee Name Lisa Sinclair 4 Clerk

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? <input type="checkbox"/> Yes Name & Address: Gail Hicks 51308 Industrial Macomb Township, MI 48042  If over \$100.00 cumulative, please provide: Occupation: <u>Owner</u> Employer Name & Business Address: Hicks Plastics 51308 Industrial Macomb Township, MI 48042  <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Candy</u> 5. Date Of Receipt: <u>09/09/18</u> 6. Vendor Name & Address:  Click Here for Memo Itemization	\$ <u>186.00</u>	\$ <u>286.00</u>
Contribution # 2      PAC Receipt? <input type="checkbox"/> Yes Name & Address: Lisa Sinclair 37969 Elm Lane Harrison Township, MI 48045  If over \$100.00 cumulative, please provide: Occupation: <u>Staff Nurse</u> Employer Name & Address: Tenet-DMC Sinai Grace 6071 Outer Drive Detroit, MI 48235  <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Banner</u> 5. Date Of Receipt: <u>09/01/18</u> 6. Vendor Name & Address: Lakeshore Graphics 7047 Lakeshore Lexington, MI 48450  Click Here for Memo Itemization	\$ <u>400.00</u>	\$ <u>12,852.77</u>
Contribution #3      PAC Receipt? <input type="checkbox"/> Yes Name & Address: Bill Carney 6346 Willow Hwy. Grand Ledge, MI 48337  If over \$100.00 cumulative, please provide: Occupation: <u>Owner</u> Employer Name & Address: Inspiration Webworks 6346 Willow Hwy. Grand Ledge, MI 48337  <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Website Hosting</u> 5. Date Of Receipt: <u>09/15/18</u> 6. Vendor Name & Address:  Click Here for Memo Itemization	\$ <u>30.00</u>	\$ <u>480.00</u>

Page Subtotal **\$616.00**

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

Enter this total  
on line 6 of Summary  
Page



# ITEMIZED IN-KIND CONTRIBUTIONS

## SCHEDULE 1-IK

### CANDIDATE COMMITTEE

1. Committee I. D. Number 139637

2. Committee Name Lisa Sinclair 4 Clerk

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? <input type="checkbox"/> Yes Name & Address: Bill Carney 6346 Willow Hwy. Grand Ledge, MI 48337  If over \$100.00 cumulative, please provide: Occupation: <u>Owner</u> Employer Name & Business Address: Inspiration Webworks 6346 Willow Hwy. Grand Ledge, MI 48337  <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Website Hosting</u> 5. Date Of Receipt: <u>10/15/18</u> 6. Vendor Name & Address:  Click Here for Memo Itemization	\$ <u>15.00</u>	\$ <u>495.00</u>
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Lisa Sinclair 37969 Elm Lane Harrison Township, MI 48045  If over \$100.00 cumulative, please provide: Occupation: <u>Staff Nurse</u> Employer Name & Address: Tenet-DMC Sinai Grace 6071 Outer Drive Detroit, MI 48235  <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Paper &amp; Labels</u> 5. Date Of Receipt: <u>10/15/18</u> 6. Vendor Name & Address: <u>WalMart</u> <u>45400 Marketplace</u> <u>Chesterfield, MI 48051</u>  Click Here for Memo Itemization	\$ <u>55.06</u>	\$ <u>12,907.83</u>
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Lisa Sinclair 37969 Elm Lane Harrison Township, MI 48045  If over \$100.00 cumulative, please provide: Occupation: <u>Staff Nurse</u> Employer Name & Address: Tenet-DMC Sinai Grace 6071 Outer Drive Detroit, MI 48235  <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Postage</u> 5. Date Of Receipt: <u>10/12/18</u> 6. Vendor Name & Address: <u>USPS</u> <u>1238 Michigan Ave.</u> <u>Marysville, MI 48040</u>  Click Here for Memo Itemization	\$ <u>200.00</u>	\$ <u>13,107.83</u>

Page Subtotal **\$270.06**

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

Enter this total  
on line 6 of Summary  
Page



# ITEMIZED IN-KIND CONTRIBUTIONS

## SCHEDULE 1-IK

1. Committee I. D. Number 139637

## CANDIDATE COMMITTEE

2. Committee Name Lisa Sinclair 4 Clerk

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? <input type="checkbox"/> Yes Name & Address: Lisa Sinclair 37969 Elm Lane Harrison Township, MI 48045 If over \$100.00 cumulative, please provide: Occupation: Staff Nurse Employer Name & Business Address: Tenet-DMC Sinai Grace 6071 Outer Drive Detroit, MI 48235 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description Postage 5. Date Of Receipt: 10/15/18 6. Vendor Name & Address: USPS 1238 Michigan Ave. Marysville, MI 48040	\$ 200.00	\$ 13,307.83
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Lisa Sinclair 37969 Elm Lane Harrison Township, MI 48045 If over \$100.00 cumulative, please provide: Occupation: Staff Nurse Employer Name & Address: Tenet-DMC Sinai Grace 6071 Outer Drive Detroit, MI 48235 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description Postage 5. Date Of Receipt: 10/19/18 6. Vendor Name & Address: USPS 1238 Michigan Ave. Marysville, MI 48040	\$ 300.00	\$ 13,607.83
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description 5. Date Of Receipt: 6. Vendor Name & Address:	\$	\$

Page Subtotal \$500.00

Grand Total of all Schedules 1-IK  
(Complete on last page of Schedule) \$1,386.06

Enter this total  
on line 6 of Summary  
Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139637  
2. Committee Name Lisa Sinclair 4 Clerk

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<b>Expenditure #1</b> Name <b>Marathon</b>  Address <b>35130 Harper</b> <b>Clinton Township, MI 48035</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Fuel for Campaigning</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/07/18</u> Date	<u>\$ 54.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
<b>Expenditure #2</b> Name <b>McDonald's</b>  Address <b>67600 Main St.</b> <b>Richmond, MI 48062</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Food for Volunteers</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/10/18</u> Date	<u>\$ 6.03</u>  <a href="#">Click Here for Memo Itemization Type</a>
<b>Expenditure #3</b> Name <b>Gus' Coney Island</b>  Address <b>55 N. Main</b> <b>Mt. Clemens, MI 48043</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Food for Volunteers</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/11/18</u> Date	<u>\$ 28.16</u>  <a href="#">Click Here for Memo Itemization Type</a>
<b>Expenditure #4</b> Name <b>Speedy Q</b>  Address <b>35700 Harper</b> <b>Clinton Township, MI 48035</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Fuel for Campaigning</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/12/18</u> Date	<u>\$ 52.48</u>  <a href="#">Click Here for Memo Itemization Type</a>
<b>Expenditure #5</b> Name <b>Sandbar Sports Grill</b>  Address <b>37030 Jefferson</b> <b>Harrison Township, MI 48045</b>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Food for Fundraiser</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/13/18</u> Date	<u>\$ 82.75</u>  <a href="#">Click Here for Memo Itemization Type</a>

Subtotal this page

**\$223.42**

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

Enter this total  
on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139637  
2. Committee Name Lisa Sinclair 4 Clerk

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <b>BP</b>  Address <b>42640 Hayes Clinton Township, MI 48038</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Fuel for Campaigning</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/17/18</u> Date	<u>\$ 55.00</u>
Expenditure #2 Name <b>Family Dollar</b>  Address <b>35090 Harper Clinton Township, MI 48035</b>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Supplies for Fundraiser</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/20/18</u> Date	<u>\$ 38.27</u>
Expenditure #3 Name <b>Little Caesars</b>  Address <b>47069 Hayes Shelby Township, MI 48315</b>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Food for Fundraiser</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/20/18</u> Date	<u>\$ 53.00</u>
Expenditure #4 Name <b>Boat Town Willy's</b>  Address <b>28409 South River Road Harrison Township, MI 48045</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Food for Meeting</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/24/18</u> Date	<u>\$ 35.75</u>
Expenditure #5 Name <b>Microsoft</b>  Address <b>One Microsoft Way Redmond, WA 98052</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Software Fees</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/24/18</u> Date	<u>\$ 10.59</u>

Subtotal this page	<b>\$192.61</b>
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total  
on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139637  
2. Committee Name Lisa Sinclair 4 Clerk

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <b>Facebook</b>  Address <b>1601 Willow Rd. Menlo Park, CA 94025</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Online Advertising</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/25/18</u> Date	<u>\$ 751.74</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #2 Name <b>Johnny Black's Public House</b>  Address <b>35000 Moravian Sterling Heights, MI 48312</b>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Food for Fundraiser</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/25/18</u> Date	<u>\$ 35.85</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #3 Name <b>Sam's Club</b>  Address <b>1237 32nd Street Port Huron, MI 48060</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Envelopes &amp; Stamps</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/01/18</u> Date	<u>\$ 554.95</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #4 Name <b>Facebook</b>  Address <b>1601 Willow Rd. Menlo Park, CA 94025</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Online Advertising</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/03/18</u> Date	<u>\$ 263.81</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #5 Name <b>The UPS Store</b>  Address <b>46958 N. Gratiot Chesterfield, MI 48051</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Postal Service Fees</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/15/18</u> Date	<u>\$ 70.00</u>  <a href="#">Click Here for Memo Itemization Type</a>

Subtotal this page	<b>\$1,676.35</b>
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

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on line 8a of  
Summary Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139637  
2. Committee Name Lisa Sinclair 4 Clerk

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <b>Speedway</b>  Address <b>18650 Hall Road Clinton Township, MI 48038</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>Fuel for Campaigning</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>10/15/18</b> Date	<b>\$ 56.00</b>
Expenditure #2 Name <b>The Huntington Bank</b>  Address <b>39840 Bridgeview Harrison Township, MI 48045</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>Bank Fees</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>10/15/18</b> Date	<b>\$ 11.00</b>
Expenditure #3 Name <b>Staples</b>  Address <b>51382 Gratiot Chesterfield Township, MI 48051</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>Printing</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>10/19/18</b> Date	<b>\$ 15.04</b>
Expenditure #4 Name <b>Fundly, Inc.</b>  Address <b>2390 El Camino Real Palo Alto, CA 94306</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>Fundraising Fees</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>10/01/18</b> Date	<b>\$ 92.34</b>
Expenditure #5 Name <b>Anedot</b>  Address <b>4017 Buena Vista Suite 109 Dallas, TX 75204</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>Fundraising Fees</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>09/22/18</b> Date	<b>\$ 17.60</b>

Subtotal this page	<b>\$191.98</b>
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total  
on line 8a of  
Summary Page





**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139637  
2. Committee Name Lisa Sinclair 4 Clerk

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <b>BWB Parks &amp; Recreation</b>  Address <b>361 Morton Romeo, MI 48065</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Parade Entry Fee</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/03/18</u> Date	<u>\$ 300.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #2 Name <b>Richmond Good Old Days</b>  Address <b>69500 Beebe St. Richmond, MI 48062</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Parade Entry Fee</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/09/18</u> Date	<u>\$ 200.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #3 Name <b>Macomb Signs LLC</b>  Address <b>46566 Erb Dr. Macomb, MI 48042</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Labels &amp; Printing</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/12/18</u> Date	<u>\$ 360.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #4 Name <b>Lisa Sinclair</b>  Address <b>37969 Elm Lane Harrison Township, MI 48045</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Repayment of Loan</u>  <input checked="" type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/01/18</u> Date	<u>\$ 530.00</u>  <a href="#">Click Here for Memo Itemization Type</a>
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	\$ _____  <a href="#">Click Here for Memo Itemization Type</a>

Subtotal this page	<b>\$1,390.00</b>
Grand Total of all Schedules 1B (Complete on last page of Schedule)	<b>\$3,674.36</b>

Enter this total  
on line 8a of  
Summary Page



**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139637

2. Committee Name Lisa Sinclair 4 Clerk

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 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	8. Cumulative payment to date on 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: <b>Lisa Sinclair</b> <b>37969 Elm Lane</b> <b>Harrison Township, MI 48045</b>	4. Type: <u>Debt</u> 5. <u>Date Debt Was Incurred:</u> <u>04/16/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 246.42</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$ 0.00</u>	<u>\$ 246.42</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <b>Lisa Sinclair</b> <b>37969 Elm Lane</b> <b>Harrison Township, MI 48045</b>	4. Type: <u>Debt</u> 5. <u>Date Debt Was Incurred:</u> <u>04/23/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1,533.63</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$ 0.00</u>	<u>\$ 1,533.63</u> <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: <b>Lisa Sinclair</b> <b>37969 Elm Lane</b> <b>Harrison Township, MI 48045</b>	4. Type: <u>Debt</u> 5. <u>Date Debt Was Incurred:</u> <u>05/02/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 744.16</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$ 0.00</u>	<u>\$ 744.16</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

**\$2,524.21**

Grand Total of all Schedules 1E  
(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



**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139637  
2. Committee Name Lisa Sinclair 4 Clerk

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 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	8. Cumulative payment to date on 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: <b>Lisa Sinclair</b> <b>37969 Elm Lane</b> <b>Harrison Township, MI 48045</b>	4. Type: <u>Debt</u> 5. <u>Date Debt Was Incurred:</u> <u>06/26/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1,093.51</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 1,093.51 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <b>Lisa Sinclair</b> <b>37969 Elm Lane</b> <b>Harrison Township, MI 48045</b>	4. Type: <u>Debt</u> 5. <u>Date Debt Was Incurred:</u> <u>06/26/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1,374.37</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 1,374.37 <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: <b>Lisa Sinclair</b> <b>37969 Elm Lane</b> <b>Harrison Township, MI 48045</b>	4. Type: <u>Debt</u> 5. <u>Date Debt Was Incurred:</u> <u>07/02/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 538.29</u>	\$ \$ \$ \$ \$	\$	\$ 538.29 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt)

**\$3,006.17**

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

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.



**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139637  
2. Committee Name Lisa Sinclair 4 Clerk

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 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	8. Cumulative payment to date on 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: <b>Lisa Sinclair</b> 37969 Elm Lane Harrison Township, MI 48045	4. Type: <u>Debt</u> 5. <u>Date Debt Was Incurred:</u> <u>07/17/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1,324.00</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 1,324.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <b>Lisa Sinclair</b> 37969 Elm Lane Harrison Township, MI 48045	4. Type: <u>Debt</u> 5. <u>Date Debt Was Incurred:</u> <u>07/18/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 500.00</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 500.00 <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: <b>Lisa Sinclair</b> 37969 Elm Lane Harrison Township, MI 48045	4. Type: <u>Debt</u> 5. <u>Date Debt Was Incurred:</u> <u>05/10/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 500.00</u>	08/14/18 \$ 50.00 08/20/18 \$ 300.00 \$ \$ \$	\$ 350.00	\$ 150.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

**\$1,974.00**

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

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.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139637  
2. Committee Name Lisa Sinclair 4 Clerk

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 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	8. Cumulative payment to date on 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: Lisa Sinclair 37969 Elm Lane Harrison Township, MI 48045	4. Type: <u>Debt</u> 5. <u>Date Debt Was Incurred:</u> <u>08/04/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 395.00</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 395.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Lisa Sinclair 37969 Elm Lane Harrison Township, MI 48045	4. Type: <u>Debt</u> 5. <u>Date Debt Was Incurred:</u> <u>08/15/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1,402.91</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 1,402.91 <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: Lisa Sinclair 37969 Elm Lane Harrison Township, MI 48045	4. Type: <u>Debt</u> 5. <u>Date Debt Was Incurred:</u> <u>05/02/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 35.00</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 35.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) **\$1,832.91**

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

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.



**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139637  
2. Committee Name Lisa Sinclair 4 Clerk

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 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	8. Cumulative payment to date on 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:  Lisa Sinclair 37969 Elm Lane Harrison Township, MI 48045	4. Type: <u>Debt</u>  5. <u>Date Debt Was Incurred:</u> <u>08/24/18</u>  6. <u>Original Amount of Debt:</u> <u>\$ 13.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$ 0.00</u>	<u>\$ 13.00</u>  <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by:  Lisa Sinclair 37969 Elm Lane Harrison Township, MI 48045	4. Type: <u>Debt</u>  5. <u>Date Debt Was Incurred:</u> <u>08/07/18</u>  6. <u>Original Amount of Debt:</u> <u>\$ 2,002.48</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$ 0.00</u>	<u>\$ 2,002.48</u>  <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:  Lisa Sinclair 37969 Elm Lane Harrison Township, MI 48045	4. Type: <u>Debt</u>  5. <u>Date Debt Was Incurred:</u> <u>08/03/18</u>  6. <u>Original Amount of Debt:</u> <u>\$ 640.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$ 0.00</u>	<u>\$ 640.00</u>  <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt)

**\$2,655.48**

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

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

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**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139637  
2. Committee Name Lisa Sinclair 4 Clerk

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.  
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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	8. Cumulative payment to date on 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: <b>Lisa Sinclair</b> <b>37969 Elm Lane</b> <b>Harrison Township, MI 48045</b>	4. Type: <u>Debt</u> 5. <u>Date Debt Was Incurred:</u> <u>08/04/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1,250.00</u>	10/01/18 \$ 530.00 \$ \$ \$ \$	\$ 530.00	\$ 720.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <b>Lisa Sinclair</b> <b>37969 Elm Lane</b> <b>Harrison Township, MI 48045</b>	4. Type: <u>Debt</u> 5. <u>Date Debt Was Incurred:</u> <u>05/31/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 10.00</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 10.00 <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: <b>Lisa Sinclair</b> <b>37969 Elm Lane</b> <b>Harrison Township, MI 48045</b>	4. Type: <u>Debt</u> 5. <u>Date Debt Was Incurred:</u> <u>06/22/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 50.00</u>	\$ \$ \$ \$ \$	\$	\$ 50.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

**\$780.00**

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

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

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**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139637  
2. Committee Name Lisa Sinclair 4 Clerk

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.)

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Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: <b>Lisa Sinclair</b> <b>37969 Elm Lane</b> <b>Harrison Township, MI 48045</b>	4. Type: <u>Debt</u> 5. <u>Date Debt Was Incurred:</u> <u>09/01/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 400.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$ 400.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <b>Lisa Sinclair</b> <b>37969 Elm Lane</b> <b>Harrison Township, MI 48045</b>	4. Type: <u>Debt</u> 5. <u>Date Debt Was Incurred:</u> <u>10/15/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 55.06</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$ 55.06</u> <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: <b>Lisa Sinclair</b> <b>37969 Elm Lane</b> <b>Harrison Township, MI 48045</b>	4. Type: <u>Debt</u> 5. <u>Date Debt Was Incurred:</u> <u>10/12/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 200.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$ 200.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

**\$655.06**

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

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

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**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139637  
2. Committee Name Lisa Sinclair 4 Clerk

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.)

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Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: <b>Lisa Sinclair</b> <b>37969 Elm Lane</b> <b>Harrison Township, MI 48045</b>	4. Type: <u>Debt</u> 5. <u>Date Debt Was Incurred:</u> <u>10/15/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 200.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$ 200.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: <b>Lisa Sinclair</b> <b>37969 Elm Lane</b> <b>Harrison Township, MI 48045</b>	4. Type: <u>Debt</u> 5. <u>Date Debt Was Incurred:</u> <u>10/19/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 300.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$ 300.00</u> <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> \$ _____	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

**\$500.00**

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

**\$13,927.83**

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.



**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139637

2. Committee Name Lisa Sinclair 4 Clerk

**- USE A SEPARATE SHEET FOR EACH EVENT -**

3. Date Event Was Held  <u>09/11/18</u>	4. Number of Individuals Attending or Participating (whichever is greater)  <u>23</u>	5. Type of Fund Raising Activity  <u>Cocktail Party</u>	6. Address and Name (If any) of the place where the activity was held.  <u>Sandbar Sports Grill</u> <u>37030 Jefferson</u> <u>Harrison Township, MI 48045</u> <input type="checkbox"/> Private Residence
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7. Total Contributions \$1,710.00

8. Other Receipts \$0.00

9. Gross Receipts (Add lines 7 and 8) \$1,710.00

10. Total Cost of Event \$82.75  
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- 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.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139637

2. Committee Name Lisa Sinclair 4 Clerk

**- USE A SEPARATE SHEET FOR EACH EVENT -**

3. Date Event Was Held  <u>09/20/18</u>	4. Number of Individuals Attending or Participating (whichever is greater)  <u>14</u>	5. Type of Fund Raising Activity  <u>Luncheon</u>	6. Address and Name (If any) of the place where the activity was held.  <u>13285 Hall Rd.</u> <u>Utica, MI 48315</u> <input type="checkbox"/> Private Residence
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7. Total Contributions \$410.00

8. Other Receipts \$0.00

9. Gross Receipts (Add lines 7 and 8) \$410.00

10. Total Cost of Event \$91.27  
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139637  
2. Committee Name Lisa Sinclair 4 Clerk

**- USE A SEPARATE SHEET FOR EACH EVENT -**

3. Date Event Was Held  <u>09/25/18</u>	4. Number of Individuals Attending or Participating (whichever is greater)  <u>15</u>	5. Type of Fund Raising Activity  <u>Cocktail Party</u>	6. Address and Name (If any) of the place where the activity was held.  <u>Johnny Black's Public House</u> <u>35000 Moravian Dr.</u> <u>Sterling Heights, MI 48312</u> <input type="checkbox"/> Private Residence
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7. Total Contributions \$307.00  
8. Other Receipts \$0.00  
9. Gross Receipts (Add lines 7 and 8) \$307.00  
10. Total Cost of Event \$35.85  
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.