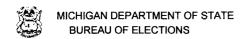


CANDIDATE COMMITTEE

FOR OFFICIAL USE ONLY

COVER PAGE				
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and c	l signed by andidate.	3. This Statement covers From	JUNY 21,2018 to	OCT 20.2018
1. Committee I.D. Number		Candidate Last Name	First Name	M.I.
138846 - 0		GROT STANLEY T.		
2. Committee Name		4a. Office Sought Including District # or Community Served (If applicable)		
CTE Stanley T. GroT		Shelby INP. Clerk		
CIL Stantey 1. Sie		4b. County of Residence Macomb		
5. Committee's Mailing Address		6. Treasurer's Name & Residential Address		
11927 Hiawatha		Sylvia J. Edel		
Shelby Twp. Mi. 488/2		Sylvia J. GROT 11927 Hiawatha		
Area Code and Phone (586) 677 - 2002 If the address in this box is different from the committee		Area Code & Phone (586) 677 - 2002 8. Designated Record Keeper's Name and Address (If the committee has a		
mailing address on the Statement of Organization, mail may be sent to this address by the filing official.		Area Code & Phone (586) 677 - 2003		
7. Treasurer's Business Address		Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)		
N/A		18 OCT 25 MACCHINESE A A A A A A A A A A A A A		
Area Code and Phone		Area Code and Phone		70 H
9. TYPE OF STATEMENT		to the second se	9e. Dissolution of Candi	date Committee
9a. Pre-Election OR 9b. Post-Election	Required ONLY if candidate is not on the ballot for the current year:		by the committee to the car	I/We certify any outstanding debt ndidate whis or has spouse is here
Pre-Election or Post-Election Statement relates to:			by discharged and forgiven, and no longer collectible from the committee. The committee has no oustanding assets,	
Primary	July Quart	епу	owes no lates fees or has a	
General	October Quarterly		Further, if the dissolution cannot be granted, that this be	
Convention			considered a request for the	e Reporting Waiver.
Special	9c. 🗖			
	Annual Statement () Coverage Year		Effective date of	dissolution
School	9d. Amendment to Campaign Statement			
Caucus	(Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)		Note: The disposition of res Schedule 1B and the Sumi	sidual funds must be reported on mary Page.
Date of Election, Convention or Caucus				
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 5/LWIA J. GROT Syllor of Grot Date 10-24-18				
Type or Print Name Signature				
Candidate STANLEY T.	GROI	T Stonley	J. Grot Date	10-24-18
Type or Print Name		Signature	1	



1. Committee I.D. Number

138846-0

SUMMARY PAGE 2. Committee Name CANDIDATE COMMITTEE RECEIPTS Column I Column II This Period Cumulative this election cycle 3. Contributions a. Itemized (Schedule 1A - Column 6) (3a.) \$ _ b. Unitemized (less than \$20.01 each - no Schedule) (3b.) \$ (18.) \$ _____ c. Subtotal of "Contributions" (3c.) \$_ 4. Other Receipts (Schedule 1A -1, Column 6) (4.) \$ (19.) \$ _____ 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (20.) \$ _____ (Add Line 3c + Line 4) **IN-KIND CONTRIBUTIONS & EXPENDITURES** (21.) \$ _____ 6. In-Kind Contributions (Schedule 1-IK, Column 7) (22.) \$ _____ 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) (7.) \$ **EXPENDITURES** 8. Expenditures a. Itemized (Schedule 1B, Column 6) (8a.) \$ _ b. Itemized Get-Out-the-Vote (Schedule 1B-G) (8b.) \$ c. Unitemized (less than \$50.01 each - no Schedule) (8c.) \$ _ 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) (9.) \$ (23.) \$ _____ INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements a. Itemized (Schedule 1C, Column 6) (10a.) \$ b. Unitemized (less than \$50.01 each - no Schedule) (10b.) \$ 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) (11.) \$ (24.) \$ _ **DEBTS AND OBLIGATIONS** 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) (12b.) \$ BALANCE STATEMENT 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period $(14.) + \$_{-}$ (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 (15.) = \$16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (17.) \$ (Subtract line 16 from line 15)