



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>139377</b>		3. This Statement covers From: <u>07/21/18</u> to <u>10/20/18</u>	
2. Committee Name <b>CITIZENS FOR MICHAEL RADTKE</b>		4. Candidate Last Name <u>Radtke</u> First Name <u>Michael</u> M.I. <u></u> 4a. Office Sought Including District # or Community Served (If applicable) <b>Sterling Heights City Council</b> 4b. County of Residence <b>MACOMB</b>	
5. Committee's Mailing Address <b>34205 Barrett Dr. Sterling Heights, MI 48312</b>  Area Code and Phone <u>(586) 873-8427</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>Virginia La Rosa 13515 Parkridge Dr. Shelby Twp., MI 48315</b>  Area Code & Phone <u>(586) 739-8885</u>	
7. Treasurer's Business Address <b>Virginia La Rosa 13515 Parkridge Dr. Shelby Twp., MI 48315</b>  Area Code and Phone <u>(586) 739-8885</u>		8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)  Area Code and Phone _____	
9. TYPE OF STATEMENT 9a. <input type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> Primary <input 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 _____		Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input checked="" 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 lates 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>Virginia La Rosa</b> Type or Print Name		Signature <u>Virginia La Rosa</u> Date <u>10/24/18</u>	
Candidate <b>Michael Radtke</b> Type or Print Name		Signature <u>Michael V. Radtke</u> Date <u>10/24/18</u>	



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 139377

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name Citizens for Michael Radtke

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>200.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$200.00</u>	(18.) \$ <u>\$1,209.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>\$0.00</u>	(19.) \$ <u>\$0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>\$200.00</u>	(20.) \$ <u>\$1,209.00</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$1,077.20</u>	(21.) \$ <u>\$1,930.99</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>\$0.00</u>	(22.) \$ <u>\$0.00</u>
<b>EXPENDITURES</b>		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$400.00</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>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>\$400.00</u>	(23.) \$ <u>\$1,799.04</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)</b>		
10. Disbursements		
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>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>\$0.00</u>	(24.) \$ <u>\$0.00</u>
<b>DEBTS AND OBLIGATIONS</b>		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$5,693.61</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>\$0.00</u>	
<b>BALANCE STATEMENT</b>		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>\$670.54</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$200.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$870.54</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$400.00</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$470.54</u> *	



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139377  
2. Committee Name Citizens for Michael Radtke

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>08/08/18</u> Name & Address: <u>Oram, Joe</u> <u>PO Box 252755</u> <u>West Bloomfield, MI 48325</u>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>5 Star Outdoor, LLC</u> Business Address <u>PO Box 252755, West Bloomfield, MI 48325</u> 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 _____ Name & Address _____		\$ _____	\$ _____
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 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 _____ Name & Address _____		\$ _____	\$ _____
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 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 _____ Name & Address _____		\$ _____	\$ _____
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 type="checkbox"/> Fund Raiser		<a href="#">Click Here for Memo Itemization</a>	

Page Subtotal **\$200.00**

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

**\$200.00**

Enter this total on  
line 3a of Summary  
Page.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 139377

2. Committee Name Citizens for Michael Radtke

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 Name & Address: Virginia La Rosa 13515 Parkridge Dr. Shelby Twp., MI 48315  If over \$100.00 cumulative, please provide: Occupation: <u>Retired</u> Employer Name & Business 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 checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>fundraiser voucher - Century Banquet Center</u> 5. Date Of Receipt: <u>08/24/18</u> 6. Vendor Name & Address: Century Banquet Center c/o Benefit on the Bay 49301 Maurice Dr. New Baltimore, MI 48047  Click Here for Memo Itemization	\$ <u>650</u>	\$ <u>650</u>
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 Name & Address: Dominic La Rosa 13515 Parkridge Dr. Shelby Twp., MI 48315  If over \$100.00 cumulative, please provide: Occupation: <u>Advertising Executive</u> Employer Name & Address: Self-Employed	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>advertising</u> 5. Date Of Receipt: <u>09/29/18</u> 6. Vendor Name & Address: Italian Tribune PO Box 380407 Clinton Twp., MI 48038  Click Here for Memo Itemization	\$ <u>200</u>	\$ <u>400</u>
<input type="checkbox"/> Fund Raiser Contribution			
Contribution #3 Name & Address: Michael Radtke Jr. 34205 Barrett Dr. Sterling Heights, MI 48312  If over \$100.00 cumulative, please provide: Occupation: <u>Consultant</u> Employer Name & Address: Wolverine Strategies 13515 Parkridge Dr. Shelby Twp., MI 48315	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>domain</u> 5. Date Of Receipt: <u>10/11/18</u> 6. Vendor Name & Address: GoDaddy 14455 N. Hayden Rd., Suite 219 Scottsdale, AZ 85260  Click Here for Memo Itemization	\$ <u>30.34</u>	\$ <u>684.13</u>
<input type="checkbox"/> Fund Raiser Contribution			

Page Subtotal **\$880.34**

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

Enter this total  
on line 6 of Summary  
Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 139377

2. Committee Name Citizens for Michael Radtke

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 Name & Address: Michael Radtke Jr. 34205 Barrett Dr. Sterling Heights, MI 48312  If over \$100.00 cumulative, please provide: Occupation: <u>Same</u> Employer Name & Business Address: <u>Same</u>  <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>Halloween candy</u> 5. Date Of Receipt: <u>10/18/18</u> 6. Vendor Name & Address: Costco 45460 Market St. Shelby Twp., MI 48315  Click Here for Memo Itemization	\$ <u>38.97</u>	\$ <u>723.10</u>
Contribution # 2 Name & Address: Michael Radtke Jr. 34205 Barrett Dr. Sterling Heights, MI 48312  If over \$100.00 cumulative, please provide: Occupation: <u>Same</u> Employer Name & Address: <u>Same</u>  <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>Halloween candy</u> 5. Date Of Receipt: <u>10/19/18</u> 6. Vendor Name & Address: Costco 45460 Market St. Shelby Twp., MI 48315  Click Here for Memo Itemization	\$ <u>157.89</u>	\$ <u>880.99</u>
Contribution #3 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:  Click Here for Memo Itemization	\$ _____	\$ _____

Page Subtotal **\$196.86**

Grand Total of all Schedules 1-IK  
(Complete on last page of Schedule) **\$1,077.20**

Enter this total  
on line 6 of Summary  
Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139377  
2. Committee Name Citizens for Michael Radtke

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>CTE Paul Manley</u> Address <u>48112 Fuller Rd.</u> <u>Chesterfield, MI 48051</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>fundraiser ticket</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/24/18</u> Date	<u>\$ 25</u>
Expenditure #2 Name <u>Plumbers Local 98</u> Address <u>555 Horace Brown Dr. #1</u> <u>Madison Heights, MI 48071</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>charity golf outing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/24/18</u> Date	<u>\$ 25</u>
Expenditure #3 Name <u>DeRuck.us</u> Address <u>170 Varick</u> <u>New York, NY 10013</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>website</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/16/18</u> Date	<u>\$ 20</u>
Expenditure #4 Name <u>Barb Ziarko</u> Address <u>13805 Deepwood Ct.</u> <u>Sterling Heights, MI 48071</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>gift</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/21/18</u> Date	<u>\$ 20</u>
Expenditure #5 Name <u>DeRuck.us</u> Address <u>170 Varick</u> <u>New York, NY 10013</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>website</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/17/18</u> Date	<u>\$ 20</u>

Subtotal this page \$110.00  
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 139377  
2. Committee Name Citizens for Michael Radtke

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Warren Area Dem PAC</u>  Address <u>48112 Fuller Rd.</u> <u>Chesterfield, MI 48051</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>fundraiser ticket</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/19/18</u> Date	<u>\$ 100</u>
Expenditure #2 Name <u>CTE John Chirkun</u>  Address <u>31229 Merrily</u> <u>Roseville, MI 48066</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>fundraiser ticket</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/19/18</u> Date	<u>\$ 30</u>
Expenditure #3 Name <u>Citizens for Equal Access</u>  Address <u>22204 Martin Rd.</u> <u>St. Clair Shores, MI 48081</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>fundraiser ticket</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/28/18</u> Date	<u>\$ 50</u>
Expenditure #4 Name <u>CTE Morgan for Michigan</u>  Address <u>PO Box 1033</u> <u>Traverse City, MI 49685</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>fundraiser ticket</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/28/18</u> Date	<u>\$ 25</u>
Expenditure #5 Name <u>Friends of Taylor Harrell</u>  Address <u>PO Box 36454</u> <u>Grosse Pointe Farms, MI 48236</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>fundraiser ticket</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/29/18</u> Date	<u>\$ 30</u>
Subtotal this page			<b>\$235.00</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 139377  
2. Committee Name Citizens for Michael Radtke

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>CTE Kevin Hertel</u>  Address <u>22428 Beach</u> <u>St. Clair Shores, MI 48081</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>fundraiser ticket</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/12/18</u> Date	\$ <u>35</u>
Expenditure #2 Name <u>DeRuck.us</u>  Address <u>170 Varick</u> <u>New York, NY 10013</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>website</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/18/18</u> Date	\$ <u>20</u>
Expenditure #3 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	\$ _____
Expenditure #4 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	\$ _____
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	\$ _____

Subtotal this page

**\$55.00**

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

**\$400.00**

Enter this total  
on line 8a of  
Summary Page





MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

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

1. Committee I.D. Number 139377

2. Committee Name Citizens for Michael Radtke

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)  <input type="checkbox"/> FORGIVEN
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Michael Radtke Jr. 34205 Barrett Dr. Sterling Heights, MI 48312	4. Type: <u>In-Kind Contributions</u> 5. <u>Date Debt Was Incurred:</u> <u>03/17/17</u> 6. <u>Original Amount of Debt:</u> <u>\$ 3,209.24</u>	10/12/17 \$ 820.76 10/12/17 \$ 961.95 10/12/17 \$ 392.00 10/12/17 \$ 98.00 \$	\$ 2,272.71	\$ 936.53 <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: Michael Radtke Jr. 34205 Barrett Dr. Sterling Heights, MI 48312	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>3/22/17</u> 6. <u>Original Amount of Debt:</u> <u>\$ 2,000.00</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 2,000.00 <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: Michael Radtke Jr. 34205 Barrett Dr. Sterling Heights, MI 48312	4. Type: <u>In-Kind Contributions</u> 5. <u>Date Debt Was Incurred:</u> <u>10/27/17</u> 6. <u>Original Amount of Debt:</u> <u>\$ 203.04</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 203.04 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt)

**\$3,139.57**

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



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

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

1. Committee I.D. Number 139377

2. Committee Name Citizens for Michael Radtke

This Schedule itemizes:

a ☒ Debts and obligations owed by or forgiven by 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: Michael Radtke Jr. 34205 Barrett Dr. Sterling Heights, MI 48312	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>10/31/17</u> 6. <u>Original Amount of Debt:</u> <u>\$ 375.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>375.00</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: Michael Radtke Jr. 34205 Barrett Dr. Sterling Heights, MI 48312	4. Type: <u>In-Kind Contributions</u> 5. <u>Date Debt Was Incurred:</u> <u>11/21/17</u> 6. <u>Original Amount of Debt:</u> <u>\$ 339.74</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>339.74</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: Michael Radtke Jr. 34205 Barrett Dr. Sterling Heights, MI 48312	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>6/27/18</u> 6. <u>Original Amount of Debt:</u> <u>\$ 700.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>700.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt)

**\$1,414.74**

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 139377

2. Committee Name Citizens for Michael Radtke

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 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? ☐ Yes  
Owed to or by:

Michael Radtke Jr.  
34205 Barrett Dr.  
Sterling Heights, MI 48312

4. Type: In-Kind Contributions

5. Date Debt Was Incurred:  
01/05/18

6. Original Amount of Debt:  
\$ 262.10

\$  
\$  
\$  
\$  
\$

\$ 0.00

\$ 262.10

☐ FORGIVEN

If bank loan, name of endorser or guarantor: \_\_\_\_\_

Amount Endorsed: \$ \_\_\_\_\_

Debt #2 Corp? ☐ Yes  
Owed to or by:

Virginia La Rosa  
13515 Parkridge Dr.  
Shelby Twp., MI 48315

4. Type: In-Kind Contributions

5. Date Debt Was Incurred:  
8/24/18

6. Original Amount of Debt:  
\$ 650.00

\$  
\$  
\$  
\$  
\$

\$ 0.00

\$ 650.00

☐ FORGIVEN

If bank loan, name of endorser or guarantor: \_\_\_\_\_

Amount Endorsed: \$ \_\_\_\_\_

Debt #3 Corp? ☐ Yes  
Owed to or by:

Michael Radtke Jr.  
34205 Barrett Dr.  
Sterling Heights, MI 48312

4. Type: In-Kind Contributions

5. Date Debt Was Incurred:  
10/11/18

6. Original Amount of Debt:  
\$ 227.20

\$  
\$  
\$  
\$  
\$

\$ 0.00

\$ 227.20

☐ FORGIVEN

If bank loan, name of endorser or guarantor: \_\_\_\_\_

Amount Endorsed: \$ \_\_\_\_\_

Page Subtotal (Outstanding debt)

\$1,139.30

Grand Total of all Schedules 1E

\$5,693.61

(Complete on last page of Schedule showing amounts owed by or to the committee)

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