

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.		3. This Statement covers From: 07/23/18 to 10/21/18			
1. Committee I.D. Number	***************************************	4. Candidate Last Name	First Na		M.I.
139623		Verticchio	Paula	inc	IVI.F.
2. Committee Name		4a. Office Sought Including Di	istrict # or Community Se		
CTE-PAULA VERTICO	CHIO	Macomb County Clerk		:S	
		4b. County of Residence MA	1440	3	
5. Committee's Mailing Address P.O. Box 271		6. Treasurer's Name & Reside	ential Address		
Washington, MI 48094		Paula Verticchio P.O. Box 271		_	
		Washington, MI 480	004	7.00	18
		Washington, Mi 400	J 94	FIT THE	007
Area Code and Phone				70 20 20	FIL 25
If the address in this box is different from the commailing address on the Statement of Organization,	nittee mail may			many Street	m
be sent to this address by the filing official.		Area Code & Phone			2 5
7. Treasurer's Business Address		8. Designated Record Keeper	r's Name and Address (If	the committee has	a
P.O. Box 271		-same-	Designated Record Keeper)		
Washington, MI 48094				13 +	.=
Area Code and Phone		Area Code and Phone			
9. TYPE OF STATEMENT	T	· · · · · · · · · · · · · · · · · · ·	9e. Dissolution of Car	ndidate Committe	
9a. Pre-Election OR 9b. Post-Election	Required ONLY if candidate is not on the ballot for the		By checking this ite	em I/We certify any	Outstanding debt
Pre-Election or Post-Election Statement relates to:	current year:		by the committee to the by discharged and forgi	iven and no longer	collectible from
Primary	July Quarterly		the committee. The committee has no oustanding assets, owes no lates fees or has any oustanding debt.		
General	X October Q	uarterly			
Convention			Further, if the dissolution considered a request for	n cannot be granted r the Reporting Wai	I, that this be ver.
Special	9c. Annua	al Statement ()			
School		Coverage Year	Effective date	of dissolution	
Caucus	9d. Amend	dment to Campaign Statement			
	indicat	plete Item 9a, 9b, 9c or 9e to te which Statement is being	Note: The disposition of	f residual funds mus	st be reported on
	amend		Schedule 1B and the Su	ummary Page.	
Date of Election, Convention or Caucus					
		!			
		!			
		!			
10. Verification: I\We certify that all reasonable dilige my\our knowledge and belief the contents are true, a	ence was used i accurate and co	n the preparation of this stateme	L ant and attached schedule	es (if any) and to th	e best of
Current Treasurer or Designated Record keeper Paula Vertice		· (2/2) +=		10/25	5/1 Q
Type or Print Name	***************************************	8ignature		ite	<i>"</i> 10
Candidate Paula Verticchio		Mouse		10/25	5/18
Type or Print Name		Signature	Da	ite	7.0
					,

1. Committee I.D. Number 139623

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name CTE-PAULA VERTICCHIO

CANDIDATE COMMITTEE	2. Committee Name CTE-PAULA VERTICOHIO			
RECEIPTS	Column I	Column II		
3. Contributions	This Period	Cumulative this election cycle		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 0.00			
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE			
c. Subtotal of "Contributions"	(3c.) \$ \$0.00	(18.) \$ \$3,380.00		
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$0.00	(19.) \$ \$0.00		
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$0.00	(20.) \$ \$3,380.00		
IN-KIND CONTRIBUTIONS & EXPENDITURES				
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$0.00	\$3,647.31		
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$0.00	(22.) \$ \$0.00		
EXPENDITURES				
8. Expenditures				
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$0.00			
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00			
c. Uniternized (less than \$50.01 each - no Schedule)	(8c.) \$ \$0.00			
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$0.00	(23.) \$ \$3,380.00		
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)				
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$ \$ 0.00			
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.)\$ \$0.00	_		
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)		_		
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$ \$0.00	_ (24.) \$ \$0.00		
a. Owed by the Committee (Schedule 1E)	(12a.) \$_\$951.61			
b. Owed to the Committee (Schedule 1E)	(12b.)\$ \$0.00	_		
	BALANCE STATEMENT			
Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ \$0.00			
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ \$0.00	regionancea		
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(15.) = \$ <u>\$0.00</u>			
(Add lines 9 and 11) 17. ENDING BALANCE	(16.) - \$ \$0.00			
II. ENDING BALANGE	(17.) \$ \$0.00			



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number

139623

		OTE DALILA VEDTICOLIA
ANDIDATE COMMITTEE	2. Committee Name	CTE-PAULA VERTICCHIO
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This Sebadula Vania			~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ 	
This Schedule itemizes:				
a Debts and obligations cwed by cr forgiven the come (Chec	mittee OR b. Deb	ots and obligations owed <u>to</u> ourpose checked.)	r forgiven by the cor	mmittee.
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.	Type of Obligation (Description) Indicate date debt was incurred 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: PAULA VERTICCHIO PO BOX 271	4. Type: LOAN 5. Date Debt Was Incurred:	06/08/18 _{\$} 310.00 06/12/18 _{\$} 500.00		
WASHINGTON, MI 48094	04/24/18 6. Original Amount of Debt: \$ 1,642.60	06/14/18 \$ 500.00 08/22/18 \$ 310.75	\$ <u>1,620.75</u>	\$_21.85
If bank loan, name of endorser or guarantor:		\$ Amc	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by: PAULA VERTICCHIO PO BOX 271 WASHINGTON, MI 48094	4. Type: LOAN	\$		
	5. Date Debt Was Incurred: 8/3/18	<u> </u>		
	6. Original Amount of Debt: \$_130.00	\$	\$ 0.00	\$ 130.00
If bank loan, name of endorser or guarantor;		\$		FORGIVEN
		A m	nount Endorsed: \$	
Owed to or by:	4, Type: LOAN	08/11/18 \$800.00		
BRENT JEX PO BOX 271	5. Date Debt Was Incurred: 7/10/18	\$	to	- Marian de la companya de la compan
WASHINGTON, MI 48094	6. Original Amount of Debt:	\$	\$ 800.00	\$_ 7 99.76
	\$ 1,599.76	<u> </u>		FORGIVEN
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	\$951.61

(Complete on last page of Schedule showing amounts owed by or to the committee) \$951.61

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

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