

CANDIDATE COMMITTEE COVER PAGE

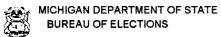
FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by andidate.	3. This Statement covers From	04/23/19	to 07/21/19	
1. Committee I.D. Number		4. Candidate Last Name	First N	lame	M.I.
139778		Lodovisi	Kristina		S
		4a. Office Sought Including Dis	trict # or Community	Served (If applicable)
2. Committee Name		Mayor, City of Warren			
Committee To Elect Kristina Lo	odovisi	4b. County of Residence MA	СОМВ		
5. Committee's Mailing Address		6. Treasurer's Name & Reside	ntial Address		·
24106 Masch		Susan Lodovisi			
Warren, MI 48091		8209 Hettenberger			
		Warren, MI 48093			
Area Code and Phone (586) 804-5576 If the address in this box is different from the commitmailing address on the Statement of Organization, ribe sent to this address by the filing official. 7. Treasurer's Business Address		Area Code & Phone (586) 21 8. Designated Record Keeper		(If the compare ha	19 JUL 25
n/a		Designated Record Keeper)		3.7	- 3 - 3
Tira				THE MAN	11:27
Area Code and Phone		Area Code and Phone			
9. TYPE OF STATEMENT	D	H N 16	9e. Dissolution of	Candidate Commit	tee
9a. X Pre-Election OR 9b. Post-Election		NLY if candidate ballot for the			or her spouse is here
Pre-Election or Post-Election Statement relates to:	July Quart	eriv	the committee. The	committee has no o	ustanding assets,
⊠ Primary		•	lowes no lates fees o	i nas any oustanding	J debt.
☐ General	October C	luarterly	Further, if the dissolu		
Convention			considered a reques	t for the Reporting W	laiver.
Special	9c. [7].				
	Annua	al Statement () Coverage Year	Effective d	ate of dissolution	
School	9d. Amen	dment to Campaign Statement			
Caucus	(Com	plete Item 9a, 9b, 9c or 9e to te which Statement is being	Note: The dispositio Schedule 1B and the		nust be reported on
Date of Election, Convention or Caucus					
08/06/19					
10. Verification: I\We certify that all reasonable diligentyour knowledge and belief the contents are true, and the content	accurate and co		ent and attached scho		. 0
Current Treasurer or Designated Record keeper Susan Lodovi	isi	Jeson Soly	Meai		5-17
Type or Print Name		Signature		- Date	5-19
Candidate Kristina Lodovisi	·	ASS.	<u> </u>	. Date 7/25	5/19
Type or Print Name		Signature		•	w.

1. Committee	I.D.	Number	139778

SUMMARY PAGE CANDIDATE COMMITTEE

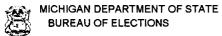
CANDIDATE COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		Camalante this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>8,566.36</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$_\$8,566.36	(18.) \$ \$8,566.36
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$12.77	(19.) \$ \$12.77
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$8,579.13	(20.) \$ \$8,579.13
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$33.56	(21.) \$ \$33.56
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$190.77	(22.) \$ \$190.77
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$7,412.51	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ \$0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$7,412.51	(23.) \$ \$7,412.51
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
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)	(11.) \$ \$0.00	(24.) \$ \$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$\$2,850.92	-
b. Owed to the Committee (Schedule 1E)	(12b.) \$ \$0.00	_
	BALANCE STATEMENT	
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ \$0.00	<u> </u>
14. Amount received during reporting period	(14.) + \$ \$8,579.13	
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$_\$8,579.13	
16. Amount expended during reporting period		_
(Add lines 9 and 11)	(16.) - \$ \$7,412.51	
17. ENDING BALANCE	(17.) \$ \$1,166.62	



CANDIDATE COMMITTEE

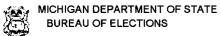
1. Committee I.D. Number _____139778

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? YES 4. Date of Receipt 05/09/19 Name & Address:		
Sklut, Cynthia 50508 Ruedisale	_{\$} 1000	. 1000
New Baltimore, MI 48047	\$	
5. If over \$100.00 cumulative, please provide: Sourcing Manager — Qualis	Click Here f	or Memo Itemization
Occupation Sourcing Manager Employer Qualis 29380 John R Road Madison Heights MI 48071		
Business Address 29380 John R Road, Madison Heights, MI 48071		
Type of Contribution: Direct Loan from a person Fund Raiser DAG Reseived VES 4 Date of Reseive 05/00/40		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/09/19 Name & Address		ļ
DeRoo, Jonathan 53331 Shirley Ellen Dr Chesterfield, MI 48047	_{\$} 200	ş 200
5. If over \$100.00 cumulative, please provide:	Click Here for	or Memo Itemization
Occupation Business Agent Employer Plumbers UA Local 98		
Business Address 555 Horace Brown Dr # 1, Madison Heights, MI 48071		-
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/09/19 Name & Address:		
Chi, Carole 35325 Moravian	_{\$} 100	_{\$} 100
Sterling Heights, MI 48312	Click Here fo	or Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation Retired Employer n/a		
Occupation Retired Employer n/a Business Address n/a		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/09/19 Name & Address		
Chi, Carole 35325 Moravian Sterling Heights, MI 48312	_{\$} 100	_{\$} 200
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Retired Employer n/a		
Business Address n/a		
Type of Contribution: V Direct Loan from a person Fund Raiser		
Page Subtotal	\$1,400.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter Mile A-A-A	
Page 1 of 10	Enter this total on line 3a of Summar Page.	y



CANDIDATE COMMITTEE

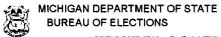
Enter contributor's name and address. If contribution is from an individual, enter middle initial. Check box to indicate if contribution is from a Political Committee Committee (PAC) Report <u>all</u> contributions regardless of amount.	· · · · · · · · · · · · · · · · · · ·	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt (05/10/19		
Name & Address:			
Lekaj, Hajri			400
4178 Angeline Dr Sterling Heights, MI 48310		_{\$} 100	_{\$} 100
5. If over \$100.00 cumulative, please provide:			
•		Click Here for	Memo Itemization
Occupation Employer	1. 144804		
Business Address			
Type of Contribution: ✓ Direct Loan from a person Fu	und Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 0	5/11/19		
Yanez, Henry		0.5	
14052 Bery		_{\$} 25	_{\$} 25
Sterling Heights, MI 48312			
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Employer			
Business Address	 		
	Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt ON Name & Address:	05/11/19		
Duzyj, Andrey		100	400
26657 Haverhill Dr		_{\$} 100	_{\$} 100
Warren, MI 48091		0 1111	
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Employer			
Business Address			
	Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt (05/12/19		
Name & Address			
Rutherford, Joel			
5683 Storrow Court		_s 100	ູ 100
Warren, MI 48092		T	Ψ
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Retired Employer n/a		J	
Business Address n/a			
	und Raiser		
	Page Subtotal	\$325.00	
A41	_		
	Total of All Schedules 1A on last page of Schedule)		J
2		Enter this total on line 3a of Summary	
Page 2 of 16		Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number 139778

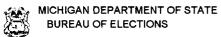
Enter contributor's name and address. If contribution is from an individual, enter last name, first r middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 05/12/19	
Knoppow, Ellen 1841 Chester Rd. Apt 27 Royal Oak, MI 48073	_{\$} 25
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	Click Fiele for Memorite Inzadori
Business Address	<u></u>
Type of Contribution: ✓ Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/12/19 Name & Address	
Fisher, Jeremy 31428 Saratoga Warren, MI 48093	_{\$} 100 _{\$} 100
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	<u></u>
Type of Contribution: ✓ Direct Loan from a person Fund Raiser	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/14/19 Name & Address:	
Castiglione, Jen 10287 Strongbow Fishers, IN 46040	\$ 300 \$ 300 Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:	Click Fiele for Wellio RefillZadon
Occupation Not Employed Employer n/a	<u>_</u>
Business Address n/a Type of Contribution: ✓ Direct Loan from a person Fund Raiser	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/15/19 Name & Address	
DeMonaco, Cardi 23255 Oakwood Eastpointe, MI 48021	_{\$} 50
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	<u> </u>
Type of Contribution: ✓ Direct Loan from a person Fund Raiser	
Grand Total of All Sched (Complete on last page of S	chedule) Enter this total on
Page 3 of 10	line 3a of Summary Page.



CANDIDATE COMMITTEE

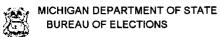
1. Committee I.D. Number ____139778

Enter contributor's name and address. If contribution is from an individual, enter last n middle initial. Check box to indicate if contribution is from a Political Committee or an I Committee (PAC) Report <u>all</u> contributions regardless of amount.	
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 05/15	5/19
Young, Diane 13250 Irvington Dr Warren, MI 48088	_{\$} 100
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address Type of Contribution: ✓ Direct Loan from a person Fund Ra	aiser
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/16/	<u>/19 </u>
Price, Natalie 2773 Harvard Rd Berkley	<u>\$ 50</u> <u>\$ 50</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund R	Raiser
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/16. Name & Address:	/19
Breadon, Nicole 9881 Marmora Clarkston, MI 48348	_{\$} 25
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address Type of Contribution: Direct Loan from a person Fund F	Raiser
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/16 Name & Address	5/19
Ellis, Tiffany 104 Edmund Pl Apt 4 Detroit, MI 48201	<u>\$50</u> <u>\$50</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Ra	aiser
	Page Subtotal \$225.00 of All Schedules 1A Enter this total on line 3a of Summary Page.



CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 05/17/19 Name & Address:	_	
Ganguly, Tania 47286 North Pointe Drive Canton, MI 48187	_s 10	_{\$} 10
5. If over \$100.00 cumulative, please provide:	Click Here f	for Memo Itemization
Occupation Employer		
Business Address Type of Contribution: ✓ Direct Loan from a person Fund Raiser	· · · · · · · · · · · · · · · · · · ·	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address		
Abrams, Nina 12959 Talbot Ln Hunting Woods, MI 48070	_{\$} 250	ş 250
5. If over \$100.00 cumulative, please provide: Occupation Attorney Employer Abrams Law Firm PLLC	Click Here for	or Memo Itemization
Business Address 1212 South Washington Avenue, Royal Oak, MI 48067		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/21/19 Name & Address:	 -	
Benigni, Leigh 2165 Walter Ct Warren, MI 48092	\$ 25	_{\$} 25
5. If over \$100.00 cumulative, please provide:	Click Here to	or Memo Itemization
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/21/19 Name & Address		
Lipton, Larry 2543 Essex Lane Bloomfield Hills, MI 48304	_{\$} 10	_{\$} 10
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtota Grand Total of All Schedules 1A (Complete on last page of Schedule	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
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CANDIDATE COMMITTEE

1. Committee I.D. Number 139778

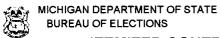
middle initial. Check box to indicate if contribution is from a Politic Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	Election Cycle for Each Contributor (Through date of receipt)
Contribution #1 PAC Receipt? YES 4. Date Name & Address:	Receipt 05/21/19		
Hall-Rayford, Marry M.			
17101 Veronica Ave		25	. 25
Eastpointe, MI 48021		_{\$} 25	\$
5. If over \$100.00 cumulative, please provide:		Click Hor	e for Memo Itemization
Occupation Employer		Click Heli	e ioi Menio Itemization
Business Address			
Type of Contribution:	Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date Name & Address	Receipt 05/22/19		
Lundgren, Lynne 31737 Gilbert Dr Warren, MI 48093		_{\$} 55	<u>\$</u> 55
5. If over \$100.00 cumulative, please provide:		Click Here	e for Memo Itemization
		0	
Occupation	· · · · · · · · · · · · · · · · · · ·		
Business Address	П		
Type of Contribution:	Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Dat Name & Address:	f Receipt 05/22/19	-	
Aiuto, Gina		_{\$} 50	_s 50
29167 Eastrose		\$	\$
Roseville, MI 48066		Click Here	for Memo Itemization
5. If over \$100.00 cumulative, please provide:			
Occupation Employer			
Business Address			
Type of Contribution: Direct Loan from a perso	Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Da Name & Address	of Receipt 05/24/19		
Winter, Barbar 23051 Tawas Hazel Park, MI 48030		_{\$} 50	<u> </u>
5. If over \$100.00 cumulative, please provide:		Olistalians	for Marria Marriantian
Occupation Employer		Click Here	for Memo Itemization
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
	Page Subtota	1 \$180.00	
	Grand Total of All Schedules 1A (Complete on last page of Schedule	\	
Page 6 of 16		Enter this total of line 3a of Summ Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number _____139778

	c to indicate if conti		ommit	tee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:	PAC Receipt?	YES 4. Date of I	Receip	ot 05/24/19		
Hassan, Ahmed 8347 St. John Shelby Twp, MI	8317				_{\$} 100	_{\$} 100
5. If over \$100.00 cumu	lative, please pro	vide:			Click Here	for Memo Itemization
Occupation		_ Employer				
Business Address						
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	YES 4. Date of F	Receip	t 06/01/19		
Lozen, Lisa 32229 Solon Roseville, MI 480	166				_{\$} 100	<u>\$ 100</u>
5. If over \$100.00 cumu		vide:			Click Here	for Memo Itemization
Occupation					2	will with the same of
Business Address				First Datas		
Type of Contribution:	Direct	Loan from a person	Щ	Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YES 4. Date of	Recei	pt 06/03/19	-	
Finn, Carmela 32631 Desmond Warren, MI 4809					\$ 100	\$ 100
5. If over \$100.00 cumu	lative, please pro	vide:			Ollok Flore I	or morno remazadom
Occupation		Employer				
Business Address Type of Contribution:	Direct	Loan from a person	√	Fund Raiser		
Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date of	Rece	ipt 06/06/19		
Mantay, Paula 101 Curry Ave U Royal Oak, MI 48					_{\$} 25	_ _{\$} _25
5. If over \$100.00 cumu	ılative, please pro	vide:			Click Here f	for Memo Itemization
Occupation	<u> </u>	_ Employer			3,151,710101	issuinmuseii
Business Address	<u> </u>					
Type of Contribution:	Direct	Loan from a person	✓	Fund Raiser		
				Page Subtota	\$325.00	
		(and Total of All Schedules 1A lete on last page of Schedule	1	
Page 7 of 16					line 3a of Summa Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number ____139778

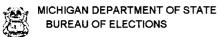
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Contribution # 1 PAC Receipt? YES 4. Date of Receipt 06/08/19 Name & Address:		
Koch, Linda 30563 Ridgefield Ave Warren, MI 48091	_{\$} 30	_{\$} 30
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Employer	OHOR I IOIG	io, monio nonazadon
Business Address Type of Contribution: Direct Loan from a person Fund Raiser	,	
Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/10/19 Name & Address		
Lisi, Laurie 8775 Lincoln Drive Huntington Woods, MI 48070	_{\$} 20	_{\$} 20
5. If over \$100.00 cumulative, please provide:	Click Here f	for Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ✓ Fund Raiser	*****	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/10/19 Name & Address:		
Price, Natile 2773 Harvard Rd Berkley, MI 48072	\$ 100	s_150 or Memo Itemization
5. If over \$100.00 cumulative, please provide:	Chor Here II	or monto normadion
Occupation Part-time Instructor Employer Berkley Parks and Recreation		
Business Address 2400 Robina, Berkley, MI 48072 Type of Contribution: □ Direct □ Loan from a person ✓ Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/10/19 Name & Address	=:	
McGaughey, Elizabeth 2818 N. Cambridge Lansing, MI 48911	_{\$} 50	_ _{\$_} 50
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page	V	ny



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1. Committee I.D. Number __139778

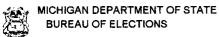
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3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 06/10/19		
Name & Address: Lodovisi, Susan		
8209 Hettenberger	_{\$} 100	. 100
Warren, Mi 48093	\$ 100	\$
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/10/19 Name & Address		
Chapp, George 4753 Stilwell Dr Warren, MI 48092	_{\$} 50	_{\$} 50
5. If over \$100.00 cumulative, please provide:	Click Here f	or Memo Itemization
	Chok i lote i	o. Monto itorinzation
Occupation		
Business Address Type of Contribution: □ Direct □ Loan from a person ▼ Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/10/19 Name & Address:		
Cholger, Cheryl L. 24256 Loretta Warren, MI 48091	_{\$} 50	_{\$} 50
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/10/19 Name & Address		
Sklut, Cynthia 50508 Ruedisale New Baltimore, MI 48047	_{\$} 100	_{\$} 1100
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Sourcing Manager Employer Qualis		
Business Address 29380 John R Road, Madison Heights, MI 48071		
Type of Contribution: Direct Loan from a person 🗸 Fund Raiser		
Page Subtota	\$300.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)) L	
Page 9 of 16	Enter this total on line 3a of Summar Page.	у



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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 Name & Address:	PAC Receipt?		YES 4. Date of Receipt	06/10/19		
Young, Randall 13250 Irvington Warren, MI 4808	8				_{\$} 50	_{\$} 50
5. If over \$100.00 cum	ılative, please pro	vid	: :		Click Here fo	or Memo Itemization
Occupation		_	Employer		Olick Here I	or recitio iterrazadon
Business Address						
Type of Contribution:	Direct		Loan from a person	und Raiser		
3. Contribution #2 Name & Address	PAC Receipt?		YES 4. Date of Receipt 0	6/10/19		
Newnan, Henry I 27156 Gail Dr Warren, MI 4809					_{\$} 50	_{\$} 50
5. If over \$100.00 cumu	lative, please pro	vide	: :		Click Here fo	or Memo Itemization
Occupation		_ Er	nployer	 		
Business Address						
Type of Contribution:	Direct		Loan from a person	Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	✓	YES 4. Date of Receipt	06/10/19		
Friends of Melvir P.O.Box 5426 Warren, MI 4809	•				_{\$} 50	_{\$} 50
5. If over \$100.00 cumu		vid	a :		Click Here fo	r Memo Itemization
Occupation		_ (Employer			
Business Address						
Type of Contribution:	Direct		Loan from a person	Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?		YES 4. Date of Receipt	06/10/19		
Marhoff, Lorenzir 14728 Bon Brae Warren, MI 4808	Dr				_{\$} 200	_{\$_} 200
5. If over \$100.00 cum	ılative, please pro	vid	>:		Click Here fo	r Memo Itemization
Occupation Retired		_	Employer n/a			
Business Address n/a						
Type of Contribution:	Direct		Loan from a person	und Raiser		
40 14				Page Subtotal Total of All Schedules 1A on last page of Schedule)	\$350.00 Enter this total on line 3a of Summan	_
Page 10 , (()					Page.	•



139778 1. Committee I.D. Number

Committee to Flect Kristina Lodovisi

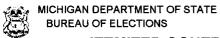
CANDIDATE COMMITTEE 2. Committee Name	OHITHILICE TO LI	ect Mistilla Lodovisi		
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)		
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 06/10/19 Name & Address:				
Sklut, William P.				
923 Rivard Blvd	_s 75	. 75		
Grosse Pointe, MI 48230	<u>\$ 10</u>			
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization		
Occupation Employer	•			
Business Address				
Type of Contribution:				
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/10/19 Name & Address	_			
Marshali, Douglas J. 27750 Roan Dr Warren, MI 48093	_{\$} 50	_{\$} 50		
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization		
Occupation Employer				
Business Address				
Type of Contribution: Direct Loan from a person Fund Raiser				
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/10/19 Name & Address:				
Separa, Suzanne 29234 Geraldine Ct	_{\$} 25	<u>\$ 25</u>		
Warren, MI 48093	Click Here	Click Here for Memo Itemization		
5. If over \$100.00 cumulative, please provide:				
Occupation Employer				
Business Address Type of Contribution: Direct Loan from a person ✓ Fund Raiser				
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/10/19 Name & Address				
Fontana, Mary A. 26080 Salem Road	_{\$} 100	_{\$} 100		
Huntington Woods, MI 48070 5. If over \$100.00 cumulative, please provide:				
o. II ovel ♦ 100.00 cumulative, picase piovide.	Click Here	for Memo Itemization		
Occupation Employer	_			
Business Address				
Type of Contribution: ☐ Direct ☐ Loan from a person ✓ Fund Raiser				
Page Subto	otal \$250.00			

Page 11 of 16

Grand Total of All Schedules 1A

(Complete on last page of Schedule)

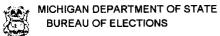
Enter this total on line 3a of Summary Page.



CANDIDATE COMMITTEE

1. Committee I.D. Number _____139778

Enter contributor's nar middle initial. Check b Committee (PAC) Rep	ox to indicate if cont ort <u>all</u> contributions	ontribution is from an individual, ribution is from a Political Comm regardless of amount.	enter last name, first name, ittee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address:	PAC Receipt?	YES 4. Date of Rece	ipt 06/10/19		
DeMonaco, Car 23225 Oakwood Eastpointe, MI 4 5. If over \$100.00 cun	d 18021	vide:		_{\$} 50	_{\$} 50
Occupation	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Employer		Click Here	for Memo Itemization
Business Address		_ , ,			
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	YES 4. Date of Rece	pt 06/10/19	:	
Stone, Lori 27582 Evelyn Warren, MI 480	93			_{\$} 250	_{\$} 250
5. If over \$100.00 cum	nulative, please pro			Click Here	for Memo Itemization
Occupation State Re	epresentative	Employer State of Michiga	<u>ın</u>		
Business Address 12					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YES 4. Date of Rece	eipt 06/13/19		
Cynowa, Gary 45451 Fielding Macomb Twp, M				\$ 50	s_50 for Memo Itemization
5. If over \$100.00 cun	nulative, please pro	vide:		CHOIC FIGIC	ioi Monto Romizadon
Occupation		Employer			
Business Address Type of Contribution:	√ Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date of Rec	eipt 06/13/19		
Bannister, Caro 18877 Highlite I Clinton Townsh	Or S ip, MI 48035			ş <u>25</u>	_ <u>\$</u> 25
5. If over \$100.00 cun	nulative, please pro	vide:		Click Here	for Memo Itemization
Occupation		Employer			
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
			Page Subtotal	\$375.00	
			rand Total of All Schedules 1A plete on last page of Schedule)	Enter this total or	
Page 12 of 16	_			line 3a of Summa Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number 139778

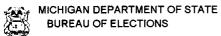
Enter contributor's name and address. If contribution is from an individual, middle initial. Check box to indicate if contribution is from a Political Comm Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)	
Contribution # 1 PAC Receipt? YES 4. Date of Recei Name & Address:	pt 06/17/19		
Winne, James 59658 Thunder Head Drm Washington, MI 48094		_{\$} 25	_{\$} 25
5. If over \$100.00 cumulative, please provide:		Click Here	for Memo Itemization
Occupation Employer			
Business Address	1		
Type of Contribution: ✓ Direct Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Recei	pt <u>06/19/19</u>		
Kipke, Larry R. 38110 Hazel Street		_{\$} 50	_{\$} 50
Harrison Township, MI 48045		Click Horo f	or Memo Itemization
5. If over \$100.00 cumulative, please provide:		Click Hele I	or Memo Remization
Occupation Employer			
Business Address			
Type of Contribution: ✓ Direct Loan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt Address:	opipt 07/02/19		
Sklut, Gregory L. 1422 Saint Clair River Dr		\$ 300	_{\$} 300
Algonac, MI 48001		Click Here fo	or Memo Itemization
5. If over \$100.00 cumulative, please provide:	d O college		
Occupation Plumber Employer Sklut Heating a	and Cooling		
Business Address 1515 E. 8 Mile Rd, Hazel Park, MI 48030			
Type of Contribution:	Fund Raiser	-	
3. Contribution # 4 PAC Receipt? YES 4. Date of Rec Name & Address	eipt <u>07/06/19</u>		
McMenamin, Gary 27428 Newport Dr Warren, MI 48088		_{\$} 100	_{\$} 100
5. If over \$100.00 cumulative, please provide:		Click Here f	or Memo Itemization
Occupation Employer		Olick Flere N	or well to the trace
Business Address			
Type of Contribution: Direct Loan from a person	Fund Raiser		
	Page Subtotal	\$475.00	
	rand Total of All Schedules 1A olete on last page of Schedule)	Enter this total on	
Page 13 of 16		line 3a of Summai Page.	у



CANDIDATE COMMITTEE

1. Committee I.D. Number ______139778

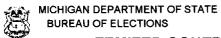
Enter contributor's name and address. If contribution is from an individual, enter last name, first name middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	e, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07/06/19 Name & Address:		
Newnan, Henry 27156 Gail Dr. Warren, MI 48093	_{\$} 250	_{\$} 300
5. If over \$100.00 cumulative, please provide:	Click Horo	for Memo Itemization
Occupation Not Employed Employer n/a	— Click Here	i for ivierrio iternization
Business Address n/a		
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/15/19 Name & Address		
Frank, Lori 3830 Cummings Berkley, MI 48072	_{\$} 50	_{\$} 50
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
Contribution #3 PAC Receipt? YES 4. Date of Receipt 07/20/19 Name & Address:		
Sims, Tracey D. 21867 Nummer Ave Warren, MI 48092 5. If over \$100.00 cumulative, please provide:	_{\$} 50 Click Here	s_50 for Memo Itemization
OccupationEmployer	,	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 06/10/19 Name & Address		
Young, Diane 13250 Irvington Dr Warren, MI 48088	_{\$} 20	<u>\$</u> 120
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Financial Planner Employer The Athena Financial Group		
Business Address 705 Barclay Circle Suite 125, Rochester Hills, MI 48307		
Type of Contribution: Direct Loan from a person V Fund Raiser		
Page Sub Grand Total of All Schedules (Complete on last page of Sched	s 1A dule) Enter this total or	
Page 14 of $\sqrt{6}$	line 3a of Summa Page.	aıy



CANDIDATE COMMITTEE

1. Committee I.D. Number _____139778

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.					6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)	
Contribution # 1 Name & Address:	PAC Receipt?	YES	4. Date of Rec	eipt	06/10/19		
Bonga, Mitchell 13752 Iowa Dr Warren, MI 4808		ulato:				_{\$} 20	_{\$} _20
5. If over \$100.00 cumu	•					Click Here	e for Memo Itemization
Occupation		_ Employe	·r				
Business Address Type of Contribution:	Direct	Loan fro	om a person	7	Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	YES	4. Date of Rec	eipt -	06/10/19		
Grant, Jillian 29234 Geraldine Warren, MI 4809						<u>\$</u> 20	_{\$} 20
5. If over \$100.00 cumu	lative, please pro	vide:				Click Here	for Memo Itemization
Occupation		Employer_					
Business Address			•• ••				
Type of Contribution:	Direct [Loan fro	om a person	<u> </u>	Fund Raiser		
Contribution # 3 Name & Address:	PAC Receipt?	YES	4. Date of Red	ceipt	06/10/19		
Callahan, Theres 53091 Westridge New Baltimore, M	e VII 48047	o takan				\$ 50 Click Here	\$ 50 for Memo Itemization
5. If over \$100.00 cumu							
Occupation Business Address Type of Contribution:	Direct			✓	Fund Raiser		
Contribution # 4 Name & Address	PAC Receipt?	YES	4. Date of Re	ceip	06/10/19		
Committee To El 14052 Bery Dr Sterling Heights,	MI 48312					_{\$} 100	_ s 100
5. If over \$100.00 cumo	ılative, please pro		oyer			Click Here	for Memo Itemization
•		p	-				
Business Address Type of Contribution:	√ Direct	Loan fr	om a person		Fund Raiser		
					Page Subtotal	\$190.00	
					d Total of All Schedules 1A te on last page of Schedule)	Enter this total o	
Page 15 of 16						line 3a of Summ Page.	ary



CANDIDATE COMMITTEE

1. Committee I.D. Number _____139778

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)	
Contribution # 1 Name & Address:	PAC Receipt?		YES 4. Date of Rec	ceipt	04/24/19		
Lodovisi, Kristin	a						
24106 Masch						_s 631.36	<u>,</u> 631.36
Warren						\$	\$
5. If over \$100.00 cum						Click Here fo	r Memo Itemization
Occupation Not Emp	loyed	(Employer n/a				
Business Address n/a							
Type of Contribution:	Direct	✓	Loan from a person	F	Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?		YES 4. Date of Rec	ceipt (07/01/19		
Lodovisi, Kristin	а					200	021.26
24106 Masch						<u>\$</u> 200	_{\$} 831.36
Warren, MI 480	91						
5. If over \$100.00 cum						Click Here fo	Memo Itemization
Occupation Not Emp	loyeed	_ En	nployer_n/a				
Business Address n/a							
Type of Contribution:	Direct	✓	Loan from a person		Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?		YES 4. Date of Re	eceipt	07/10/19		
	•					0000	
Lodovisi, Kristin 24106 Masch	a					_{\$} 2000	_s 2831.36
Warren, MI 480	91						<u> </u>
5. If over \$100.00 cum		vide	e:			Click Here for	Memo Itemization
Occupation Not Emp	loyeed	E	mployer_n/a				
Business Address n/a		• •					
Type of Contribution:	Direct	√	Loan from a person	П	Fund Raiser		
3. Contribution # 4	PAC Receipt?		YES 4. Date of R	eceipt			
Name & Address	•	L] .=-				
						\$	\$
5. If over \$100.00 cun	nulative, please pro	vid	e :			Click Here for	Memo Itemization
Occupation	<u> </u>	_	Employer				
Rusinosa Addresa							
Business Address Type of Contribution:	Direct	F	Loan from a person		Fund Raiser		
Type of Contribution.	L Direct	<u> </u>	Loan nom a person		Page Subtotal	\$2,831.36	
				Grand	d Total of All Schedules 1A		-
					e on last page of Schedule)	\$8,566.36	_
Page 16 of 16	_					Enter this total on line 3a of Summary Page.	



ITEMIZED OTHER RECEIPTS SCHEDULE 1A-1

CANDIDATE COMMITTEE

1. Committee I.D. Number 139778

CANDIDATE COMMITTEE		2. Committee Name Committee to Elect Kristina Lodovi			
3. Name & Address From Whom Reco	eived 4. Date of Receipt	5. Type of Receipt	6. Amount		
Receipt #1 Name & Address:	Date of Receipt 07/03/19	Loan from a Lending Insti			
ActBlue		Interest	<u>\$_12.77</u>		
PO Box 441146		Refund \Rebate	Click for Memo Itemization Type		
Somerville, MA 02144-00	31				
,	Fund Raiser	Other (Specify)			
Receipt #2 Name & Address:	Date of Receipt	Loan from a Lending Inst	itution		
		Interest	\$		
		Refund \Rebate	Click for Memo Itemization Type		
	Fund Raiser	Other (Specify)			
Receipt #3 Name & Address:	Date of Receipt	Loan from a Lending Insti	itution		
		Interest	\$		
		Refund \Rebate	Click for Memo Itemization Type		
	Fund Raiser	Other (Specify)			
Receipt #4 Name & Address:	Date of Receipt	Loan from a Lending Inst	itution		
Name & Address.			\$		
		Interest	Click for Memo Itemization Type		
		Refund \Rebate	.,		
	Fund Raiser	Other (Specify)			
Receipt #5 Name & Address:	Date of Receipt	Loan from a Lending Insti	tution		
		Interest	\$		
		Refund \Rebate	Click for Memo Itemization Type		
	Fund Raiser	Other (Specify)			
Receipt #6 Name & Address:	Date of Receipt	Loan from a Lending Inst	itution		
		Interest	\$		
		Refund \Rebate	Click for Memo Itemization Type		
	Fund Raiser	Other (Specify)			
Receipt #7 Name & Address:	Date of Receipt	Loan from a Lending Ins	titution		
		Interest	\$		
			Click for Memo Itemization Type		
		Refund \Rebate			
	Fund Raiser	Other (Specify)	Page Subtotal \$12.77		
		_ ,	\$12.77		
		Grand Total of All (Complete on last p			

Enter this total on line 4 of Summary Page

Page 1 of 1



Page 1 of 1

ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK

1. Committee I. D. Number <u>139778</u>

CAN		7 A	TC /	\sim		41	TTC	==
LAN	ши	JA	1 -	GUI	JI I	VII.		==

2. Committee Name Committee To Elect Kristina Lodovisi

CANDIDATE COMM	ILIEE 2. SSIMMLES NAME		
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). Reportall 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? Yes Name & Address: Lodovisi, Anthony	Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated	19.56 s	19.56
24106 Masch Warren, MI 48091	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN		
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	Description Coffee Supplies 5. Date Of Receipt: 07/01/19		
Fund Raiser Contribution	6. Vendor Name & Address: Gordon Food Service Store 7835 Convention Blvd Warren, MI 48092	lick Here for Memo Ite	emization
Contribution # 2 PAC Receipt? Yes Name & Address Lodovisi, Kristina 24106 Masch Warren, MI 48091	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN	14.00 \$	14.00
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description Stamps 5. Date Of Receipt: 07/10/19 6. Vendor Name & Address:		
Fund Raiser Contribution	USPS 28401 Mound Rd Warren, MI 48090	lick Here for Memo Ite	emization
Contribution #3 PAC Receipt? Yes Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN	\$	
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description 5. Date Of Receipt: 6. Vendor Name & Address:	Slick Here for Memo It	emization
Fund Raiser Contribution			
	Page Subtot	\$33.56	
	Grand Total of all Schedules 1- (Complete on last page of Schedu	ו רוני ההתו	
		Enter this total	

on line 6 of Summary Page



ITEMIZED IN-KIND EXPENDITURES SCHEDULE 1B - IK

CANDIDATE COMMITTEE

139778

1. Committee I. D. Number Committee to Elect Kristina Lodovisi

	2. Committee Name Oommittee	to Libot Kilot	ina Load fior
Name and Address of person to whom goods or services were donated or transferred.	Type of In-Kind Expenditure (Check appropriate box and fill in description)	5. Date:	6. Fair Market Value
Expenditure #1 Name & Address: Mass Mailing, LLC 35468 Mound Road Sterling Heights, MI 48310	4. □ Donation of goods or services to a Ballot Question Committee □ Donation of assets to tax exempt charitable institution □ Donation of assets to Political Party Committee □ Other Description Mailing Services	07/15/19 Date Click Here for Memo It	\$_190.77
Expenditure #2 Name & Address:	4. Donation of goods or services to a Ballot Question Committee Donation of assets to tax exempt charitable institution Donation of assets to Political Party Committee Other Description:	Date Click Here for Memo It	\$emization Type
Expenditure #3 Name & Address:	4. Donation of goods or services to a Ballot Question Committee Donation of assets to tax exempt charitable institution Donation of assets to Political Party Committee Other Description:	Date Click Here for Memo It	\$emization Type
Expenditure #4 Name & Address:	4. Donation of goods or services to a Ballot Question Committee Donation of assets to tax exempt charitable institution Donation of assets to Political Party Committee Other Description:	Date Click Here for Memo It	\$emization Type
Expenditure #5 Name & Address:	4. Donation of goods or services to a Ballot Question Committee Donation of assets to tax exempt charitable institution Donation of assets to Political Party Committee Other Description:	Date Click Here for Memo If	\$emization Type
		Page Subtotal	\$190.77

Grand Total of all Schedules 1B-IK (Complete on last page of Schedule) Enter this total on line 7 of the Summary Page

\$190.77

Page _____ of ____



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

139778

2. Committee Name Committee To Elect Kristina Lodovisi

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			<u> </u>
Name NGP VAN INC		05/03/19	\$ 150.00
Address	Purpose: VAN Access	Date	
1445 New York Ave NW ST 2			
Washington, DC 20005	Click F	tere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		:
Expenditure #2			
Name GODADDY.COM		05/08/19	s 1.17
	Purpose: Website	Date	4 1.17
Address	Purpose:		
1445 N. Hayden Rd Ste 226	Click H	lere for Memo	Itemization Type
Scottsdale, AZ 85260-6993	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name Staples		05/14/10	
Otapies	Office Occapitate	05/14/19	\$ <u>6.88</u>
Address	Purpose: Office Supplies	Date	
1129 West 14 Mile Rd	Click H	lere for Memo I	temization Type
Clawson, MI 48017	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4	old to more		
Name Erin Butler		05/17/10	
Lint Battor	<u></u>	05/17/19 Date	\$ 500.00
Address	Purpose: Consulting	Date	
4031 Los Angeles Ave Apt 15	Click H	lere for Memo l	temization Type
Warren, MI 48091			tomacon rypo
п	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name Clark Graphics Inc		05/21/19	0.404.00
Address	Purpose: Business Cards	Date	\$ <u>121.90</u>
21914 Schmeman Ave	Click	loro for Momo	Itemization Type
Warren, MI 48089	Check box if this expenditure is payment of	IEIE IOI MIEIIIO	itemization Type
Fund Raiser	debt or obligation reported on previous statement		
	Subto	tal this page	\$779.95
	Grand Total of all S	Schedules 1B	
	(Complete on last page	of Schedule)	

Enter this total on line 8a of Summary Page



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

778	3
1	778

1. Committee I. D. Number

2. Committee Name

Committee To Elect Kristina Lodovisi

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Harland Clarke-Li		05/23/19	\$ 23.30
Address	Purpose: checks	Date	
15955 La Cantera Parkway		ere for Memo I	temization Type
San Antonio, TX 78256			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
^{Name} American Graphics		05/24/19	\$ 1344.04
Address	Purpose: Campaign Literature	Date	
34895 Groesbeck Hwy	Click H	ere for Memo i	temization Type
Clinton Township, MI 48035	Cheek hay if this averagitives is neversed of		ļ
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name BLUE PARASOL GROUP, LLC		06/03/19	\$ 105.8 4
Address	Purpose: Paragon Soluntions (NGP VAN Access)	Date	
919 NORTH MARKET STREET, SUITE 950	Cliak H.	ere for Memo i	temization Type
WILMINGTON, DE, 19801		J. J. (5) (8) (8) (8)	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name Actblue		06/05/19	\$ 24.03
Address	Purpose: online contribution service fees	Date	¥ 24.00
PO Box 441146	Click H	ere for Memo I	temization Type
Somerville, MA 02144-0031			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name NGP VAN INC		06/10/19	¢ 4 EO OO
Address	Purpose: VAN Access	Date	\$ 150.00
1445 New York Ave NW ST 2	Click F	lere for Memo	Itemization Type
Washington, DC 20005	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement	<u> </u>	
	Subto	tal this page	\$1,647.21
	Grand Total of all 5 (Complete on last page		

Enter this total on line 8a of Summary Page



SCHEDULE 1B CANDIDATE COMMITTEE

2. Committee Name Committee To Elect Kristina Lodovisi

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Actblue		07/03/19	\$ 12.77
Address	Purpose: Online Contribution Service fees	Date	
PO Box 441146		Here for Memo	itemization Type
Somerville, MA 02144-0031			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
^{Name} Erin Butler		06/07/19	\$ 500.00
Address	Purpose: consulting	Date	
Address			
4031 Los Angeles Ave Apt 15	Click I	Here for Memo I	temization Type
Warren, MI 48091	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name Actblue		06/11/19	. 40.00
	Service fees (Ventily aCommons)	Date	\$ 48.02
Address	Purpose: Service fees (Vantiv eCommerce)	Date	
PO Box 441146	Click H	Here for Memo l	temization Type
Somerville, MA 02144-0031	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name National Coney Island		06/11/19	
·	Eand for fundamen	Date	\$ 250.00
Address	Purpose: Food for fundraiser		
30140 Van Dyke Ave	Click I	Here for Memo I	Itemization Type
Warren, MI 48093	Check box if this expenditure is payment of		
√ Fund Raiser	debt or obligation reported on previous		
	statement	· · · · · · · · · · · · · · · · · · ·	
Expenditure #5			
Name Erin Butler	aana. Itina	06/16/19	\$ 500.00
Address	Purpose: consulting	Date	
4031 Los Angeles Ave Apt 15	Click	Here for Memo	Itemization Type
Warren, MI 48091	Check box if this expenditure is payment of	F	
Fund Raiser	debt or obligation reported on previous statement		
(terminal to the state of the	Subt	otal this page	\$1,310.79
	Grand Total of all	Schedules 1B	
	(Complete on last pag		

Enter this total on line 8a of Summary Page

Page 3 of 5



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number _____

2. Committee Name Committee To Elect Kristina Lodovisi

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name BLUE PARASOL GROUP, LLC		07/02/19	\$ 30.00
Address	Purpose: Paragon Soluntions (NGP VAN Access)	Date	
919 NORTH MARKET STREET, SUITE 950	Click H	lere for Memo	Itemization Type
WILMINGTON, DE, 19801	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name ActBlue		07/03/19	\$ 12.77
Address	Purpose: online contribution service fees	Date	
PO Box 441146	Click +	lere for Memo	Itemization Type
Somerville, MA 02144-0031	Check box if this expenditure is payment of debt or obligation reported on previous		
Expenditure #3	statement		
Name NGP VAN INC		07/03/19	\$ 150.00
Address	Purpose: VAN Access	Date	¥ <u>130.00</u>
1445 New York Ave NW ST 2		ere for Memo	temization Type
Washington, DC 20005	Check box if this expenditure is payment of	ere for Memo	terrizatios i ype
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name ZIPPITYPRINT.COM		07/05/19	\$ 860.54
Address	Purpose: Campaign Literature	Date	
1600 E 23rd St	Click H	ere for Memo	temization Type
Cleveland, OH 44114	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name ActBlue		07/09/19	000.44
Address	Purpose: Service fees (Vantiv eCommerce)	Date	\$ <u>20.44</u>
PO Box 441146	Click H	lere for Memo	Itemization Type
Somerville, MA 02144-0031	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
	Subto	tal this page	\$1,073.75
	Grand Total of all S		
	(Complete on last page	of Schedule)	

Enter this total on line 8a of Summary Page



ITEMIZED EXPENDITURES **SCHEDULE 1B CANDIDATE COMMITTEE**

139778 1. Committee I. D. Number

2. Committee Name Committee To Elect Kristina Lodovisi

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Postmaster		07/10/19	\$ 2563.76
Address	Purpose: mailing postage	Date	
200 W 2nd St		lere for Memo l	temization Type
Royal Oak, MI 48068	Check box if this expenditure is payment of		, ,
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2		*****	
Name Chris Marchione		06/07/19	\$ 37.05
Address	Purpose: Reimbursement for office supplies	Date	
29837 Roan Dr	Click t	lere for Memo l	temization Type
Warren, MI 48093	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3	datement		
Name			_
		Date	\$
Address	Purpose:	- -	
	Click I	lere for Memo l	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement	·	
Expenditure #4			
Name			\$
Address	Rumana	Date	<u> </u>
Addicas	Purpose:		
	Click !	Here for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name			•
Address	Purpose:	Date	\$
		Hara for Mama	Itemization Type
	Check box if this expenditure is payment of		nemization Type
Fund Raiser	debt or obligation reported on previous statement		
	Subt	otal this page	\$2,600.81
	Grand Total of all (Complete on last pag		\$7,412.51

Enter this total on line 8a of Summary Page



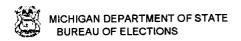
130778

DEBTS AND OBLIGATIONS	1. Committee i.D. Number	/ 0		
SCHEDULE 1E	2 Committee	2		
CANDIDATE COMMITTEE	2. Committee Name COIIIIIIII	3		
This Schedule itemizes:				
a ✓ Debts and obligations owed <u>by</u> or forgiven the (committee OR b. Debte Check either a or b. Use only for the pu	s and obligations owed <u>to</u> or one of the control o	or forgiven <u>by</u> the com	nmittee.
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, plea provide information regarding the endorsers or guarantors, if any.	(Description) 5. Indicate date debt was incurred	7. Date and amount of each payment	8. Cumulative payment to date on debt	Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: Loan - cash	\$		
Kristina Lodovisi 24106 Masch Warren, MI 48091	5. <u>Date Debt Was Incurred</u> : 04/24/19 6. <u>Original Amount of Debt</u> : \$_631.36	\$ \$ \$	\$ 0.00	\$_631.36
If bank loan, name of endorser or guarantor:		\$An	nount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: Loan - cash	\$		
Kristina Lodovisi 24106 Masch Warren, MI 48091	5. <u>Date Debt Was Incurred</u> : 5/23/19 6. <u>Original Amount of Debt</u> : \$ 200.00	\$ \$ \$	\$ 0.00	\$_200.00
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by: Anthony Lodovisi 24106 Masch Warren, MI 48091	4. Type: Loan - cost of coffee supplies 5. <u>Date Debt Was Incurred</u> : 7/1/19 6. <u>Original Amount of Debt</u> : \$ 19.56	\$ \$ \$ \$ \$	\$ 0.00	\$_19.56 FORGIVEN
If bank loan, name of endorser or guarantor:			Amount Endorsed: \$	
	(Complete on last page of Schedule s	Grand Tota	al (Outstanding debt) al of all Schedules 1E or to the committee)	\$850.92 Enter this total on line 12a "owed
				by"" or line 12b

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.

"owed to" of the Summary Page

Page 1 of **Z**



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number __

139778			

SCHEDULE 1E	Committee	9		
CANDIDATE COMMITTEE 2. C.	ommittee Name COTTTTTTCC			
This Schedule Itemizes:				
a Debts and obligations owed by or forgiven the com (Chec	ck either a or b. Use only for the pu	s and obligations owed <u>to</u> or rpose checked.)		
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	Date and amount of each payment	Cumulative payment to date on debt	Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: Loan - cash	s		
Kristina Lodovisi	5. <u>Date Debt Was Incurred</u> :	\$		
24106 Masch	07/10/19	\$	0.00	¢ 2,000.00
Warren, Mi 48091	6. Original Amount of Debt:	\$	\$ 0.00	\$_2,555.55
	\$_2,000.00	\$		FORGIVEN
If bank loan, name of endorser or guarantor:			ount Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by:	4. Type: 5. <u>Date Debt Was Incurred</u> :	\$ \$		
	6. Original Amount of Debt:	\$	\$	\$
	\$	\$		FORGIVEN
		\$		
If bank loan, name of endorser or guarantor:		Ar	nount Endorsed: \$_ T	
Debt #3 Corp? Yes Owed to or by:	4. Type:	\$		
	5. <u>Date Debt Was Incurred</u> :	\$		
		\$		
	6. Original Amount of Debt:	\$	\$	\$
	\$	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		A	.mount Endorsed: \$_	
		Page Subtota	l (Outstanding debt)	\$2,000.00
		Grand Total	of all Schedules 15	\$2,850,92
(0	complete on last page of Schedule	snowing 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

139778

I. Committee I.D. Number	139110	
Committee Name Co	mmittee	

CANDIDATE COMMITTEE 2.1	Committee Name	ਰ 		
This Schedule itemizes:				
a Debts and obligations owed <u>by</u> or forgiven the cor (Ch	mmittee OR b. Debts eck either a or b. Use only for the pu	s and obligations owed <u>to</u> or irpose checked.)	r forgiven <u>by</u> the con	nmittee.
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:	4. Type:	<u> </u>		
	5. <u>Date Debt Was Incurred</u> :	\$		
		\$	\$	\$
	6. Original Amount of Debt:	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		\$	ount Endorsed: \$ —	
Debt #2 Corp? Yes		I Ame	Julii Eridorsed. \$	<u></u>
Owed to or by:	4. Type:	<u> </u>		
	5. Date Debt Was Incurred:	\$		
	6. Original Amount of Debt:	\$	\$	\$
	\$	\$		FORGIVEN
		\$		PORGIVEN
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type:	s		
Check to di by.	5. Date Debt Was Incurred:	\$		
		\$		
	6. Original Amount of Debt:	\$ *	l _{\$}	\$
	\$			FORGIVEN
If bank loan, name of endorser or guarantor:			mount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	\$0.00
,	Complete on last some of Color dule -	Grand Total	of all Schedules 1E	\$0.00
,	Complete on last page of Schedule s	showing amounts owed by c	n to the committee)	Enter this total on line 12a "owed by"" or line 12b

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.

"owed to" of the Summary Page

Page 1 of 1



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number _______

2. Committee Name Committee To Elect Kristina Lodovisi

	- USE A	SEPARATE SH	EET FOR EACH I	EVENT -	
3. Date Event Was Held	or Participa	of Individuals Attending ating (whichever is	5. Type of Fund Raising	Activity	6. Address and Name (If any) of the place where the activity was held.
06/10/19	greater)	36	Coney Dog [Dinner	National Coney Island 30140 Van Dyke, Warren, Michigan 48093 Private Residence
7. Total Contributions		\$1,555.00			
8. Other Receipts		\$0.00			
9. Gross Receipts (Add lines 7	and 8)	\$1,555.00			
10. Total Cost of Event (Total Cost includes In-Kind Co	ntributions	\$689.13 and All Expenditures	Made For the Event)	
11. Check if event was a jo	int fund ra	iser and complete the	following:		
Co-Sponsor(s)		Contribution S (%)	Split		Expenditure Split (%)
	-				
	-				
	•				
,	-				
	_				
	· _				
The committee is requi	rad to file	o congrato Fund Dais	or Schodule for each	fund raisin	a event held during the

 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.

Page	1	of	1