



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 137600		3. This Statement covers From: 1/1/19 to 10/20/19	
2. Committee Name CTE Barb Dempsey		4. Candidate Last Name Dempsey First Name Barb M.I. R 4a. Office Sought Including District # or Community Served (if applicable) Mayor, City of Mount Clemens 4b. County of Residence Macomb	
5. Committee's Mailing Address 1379 Kingsley St Mount Clemens, MI 48043 Area Code and Phone 586. 465. 4918 <small>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.</small>		6. Treasurer's Name & Residential Address Thomas J Dempsey 45498 Riverwoods Dr. Macomb, MI 48044 Area Code & Phone 586. 226. 9978	
7. Treasurer's Business Address Same as Residential Area Code and Phone _____		8. Designated Record Keeper's Name and Address (if the committee has a Designated Record Keeper) N/A Area Code and Phone _____	
9. TYPE OF STATEMENT 9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus Date of Election, Convention or Caucus NOV. 5th, 2019		9c. <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly 9d. <input type="checkbox"/> Annual Statement (_____) Coverage Year 9e. <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 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 Thomas Dempsey Type or Print Name		Thomas J Dempsey Signature Date 10/24/19	
Candidate Barb Dempsey Type or Print Name		Barb Dempsey Signature Date 10/25/19	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 137600

2. Committee Name CTE Barb Dempsey

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>11,500.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>11,500.00</u>	(18.) \$ <u>11,500.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u>-</u>	(19.) \$ <u>-</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>11,500.00</u>	(20.) \$ <u>11,500.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>750.00</u>	(21.) \$ <u>750.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u>-</u>	(22.) \$ <u>-</u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>3,167.90</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>-</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>-</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>3,167.90</u>	(23.) \$ <u>3,167.90</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>-</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>-</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	<u>-</u>	(24.) \$ <u>-</u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>2,700.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u>-</u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>4,239.96</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>11,500.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>15,739.96</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>3,167.90</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>12,572.06</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 137600
2. Committee Name CTE Barb Dempsey

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>9-18-19</u>	
Name & Address: <u>Susan Burkhardt</u> <u>35786 Schmid Dr</u> <u>New Baltimore, MI 48047</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>Stephan R. Saph Jr.</u> <u>P.O. Box 46907</u> <u>44 Macomb Pl.</u> <u>Mount Clemens, MI 48043</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>Dr. Margaret Kennard</u> <u>32745 S. River Rd.</u> <u>Harrison, Twp., MI 48043</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-16-19</u>	
Name & Address: <u>Peter Ruggirello</u> <u>18087 Riverway Cir.</u> <u>Clinton Twp. MI 48038</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 200.00

Grand Total of All Schedules 1A
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 137600
2. Committee Name CTE Barb Dempsey

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>9-18-19</u>	
Name & Address: <u>Janet A. Ostin</u> <u>49760 Thunder Bay Cir N.</u> <u>Macomb, MI 48042</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-14-19</u>	
Name & Address: <u>Mary Johnson</u> <u>27 River LN</u> <u>Grosse Pointe Woods, MI 48236</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>Earl Stilson</u> <u>9334 River Rd</u> <u>Clay, MI 48001</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>Michael Malone</u> <u>46352 Candleberry Dr.</u> <u>Chesterfield Twp. MI 48047</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 137600
2. Committee Name CTE Barb Dempsey

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>9/18/19</u>	
Name & Address: <u>Marilyn Lane</u> <u>16558 Woodlane</u> <u>Fraser, MI 48026</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19.</u>	
Name & Address: <u>Charles Turnbull</u> <u>53957 Sutherland Ct</u> <u>Shelby Twp. MI 48316</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>David Meldrum</u> <u>38980 Parkway Circle</u> <u>Harrison Twp., MI 48045</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-17-19</u>	
Name & Address: <u>Marion Towner</u> <u>18061 Fleur De Lis</u> <u>Clinton Twp. MI 48038</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 137000
2. Committee Name CTE Barb Dempsey

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>9-10-19</u> Name & Address: <u>Elaine C. Johnston</u> <u>101 Hubbard</u> <u>Mount Clemens, MI 48043</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-18-19</u> Name & Address: <u>Nancy Dedenbach</u> <u>158 Eastman St.</u> <u>Mount Clemens, MI 48043</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-18-19</u> Name & Address: <u>Nancy Wilson</u> <u>35775 Hilton</u> <u>Clinton Township, MI 48035</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-20-19</u> Name & Address: <u>Charles Bell</u> <u>2000 Riverside Pl.</u> <u>Walton Manors, FL 33305</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE

1. Committee I.D. Number 137600
2. Committee Name CTE Barb Dempsey

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3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>Matthew Dreyer</u> <u>2000 Riverside Place</u> <u>Walton Manors, FL 33305</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-16-19</u>	
Name & Address: <u>George Curis</u> <u>37362 Fiore Trl.</u> <u>Clinton, Top. MI 48036</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-8-19</u>	
Name & Address: <u>Thomas Meldrum</u> <u>7295 Flamingo St.</u> <u>Algonac, MI 48001</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-9-19</u>	
Name & Address: <u>Fran Pient</u> <u>6005 River Rd.</u> <u>East China, MI 48054</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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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 all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-18-19</u> Name & Address: <u>Michael Murray</u> <u>35 W. Breitmeyer Pl.</u> <u>Mount Clemens, MI 48043</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ <u>100-</u>
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-2-19</u> Name & Address: <u>David Dempsey</u> <u>15069 Garney Cir</u> <u>Gainsville, VA 20155</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ <u>100-</u>
<p>3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8-28-19</u> Name & Address: <u>Gary Gamalski</u> <u>93 Kendrick St</u> <u>Mount Clemens, MI 48043</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Programmer</u> Employer <u>Wartron Machine System</u> Business Address <u>27786 Patmore Dr. Clinton Twp, MI 48036</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ <u>125.00</u>
<p>3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-18-19</u> Name & Address: <u>ML Kress</u> <u>21010 Harrington St.</u> <u>Mount Clemens, MI 48043</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ <u>100-</u>

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3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES Name & Address: <u>Debbie Boone</u> <u>35806 Foxwood Ct.</u> <u>Harrison Township, MI 48045</u>	4. Date of Receipt <u>9-18-19</u>	<u>\$ 100-</u>	<u>\$ 100-</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input checked="" type="checkbox"/> YES Name & Address: <u>CANDICE PAC</u> <u>Committee ID# 519174</u> <u>P.O. Box 7036</u> <u>Novi, MI 48376</u>	4. Date of Receipt <u>9-9-19</u>	<u>\$ 100.00</u>	<u>\$ 100-</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES Name & Address: <u>John MacArthur</u> <u>40 W. Breitmeyer Pl</u> <u>Mount Clemens, MI 48043</u>	4. Date of Receipt <u>9-7-19</u>	<u>\$ 100-</u>	<u>\$ 100-</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES Name & Address: <u>Patrick Simasko</u> <u>319 NB Gratiot</u> <u>Mount Clemens, MI 48043</u>	4. Date of Receipt <u>9-5-19</u>	<u>\$ 100-</u>	<u>\$ 100-</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-15-19</u>	
Name & Address: <u>Committee to Elect John Chirkun</u> <u>State Rep.</u> <u>31229 Merrily St</u> <u>Roseville, MI 48066</u>		\$ <u>100 -</u>	\$ <u>100 -</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>Roy Ross</u> <u>55620 Woodridge Dr.</u> <u>Shelby, MI 48316</u>		\$ <u>100 -</u>	\$ <u>100 -</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>Stephan Saph</u> <u>21178 Lilac Ln</u> <u>Clinton Twp, MI 48036</u>		\$ <u>100 -</u>	\$ <u>100 -</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>Paulette Trombley</u> <u>38984 Santa Barbara St</u> <u>Clinton Twp, MI 48036</u>		\$ <u>100 -</u>	\$ <u>100 -</u>
5. If over \$100.00 cumulative, please provide:		Click Here for Memo Itemization	
Occupation _____ Employer _____			
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal

400.00

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

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line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 137600
2. Committee Name CTE Barb Dempsey

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>9-18-19</u>	
Name & Address: <u>Michigan Justice, PLLC - Paul Addis</u> <u>18 First St.</u> <u>Mount Clemens, MI 48043</u>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Self</u> Business Address <u>18 First St. Mount Clemens, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-11-19</u>	
Name & Address: <u>James George</u> <u>19634 Westchester</u> <u>Clinton Twp. MI 48043</u>		\$ <u>1,000.00</u>	\$ <u>1,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Developer</u> Employer <u>Retired.</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-16-19</u>	
Name & Address: <u>HANK Riberas</u> <u>4607 Bancroftway, Sterling Hts. MI 48310</u>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Builder</u> Employer <u>Roncelli, Inc</u> Business Address <u>6471 Metro Pkwy Sterling Hts MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>Robert Leslie</u> <u>140 S. Wilson Blvd</u> <u>Mount Clemens, MI 48043</u>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CPA</u> Employer <u>Carabell-Leslie CPA's</u> Business Address <u>83 Macomb Pl Mount Clemens MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

2200.00

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

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line 3a of Summary
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 137600
2. Committee Name CTE Barb Dempsey

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>9-5-19</u>	
Name & Address: <u>James Gerlach</u> <u>31700 N. River Rd</u> <u>Harrison Twp, MI 48045</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-19-19</u>	
Name & Address: <u>Ferdinando Bartolotta</u> <u>4963 Brookside Ln</u> <u>Washington, MI 48094</u>		\$ <u>100.00</u>	\$ <u>100.-</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>Michelle Weiss</u> <u>18200 Tara Dr</u> <u>Clinton Twp, MI 48036</u>		\$ <u>100.00</u>	\$ <u>100.-</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>James Ketchum</u> <u>18200 Tara LN</u> <u>Clinton Twp, MI 48036</u>		\$ <u>100.00</u>	\$ <u>100.-</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 400.00

Grand Total of All Schedules 1A
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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 137600
2. Committee Name CTE Barb Dempsey

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>9-24-19</u>	
Name & Address: <u>Lois Hill</u> <u>15 S. Highland</u> <u>Mount Clemens, MI 48043</u>		\$ <u>100.00</u>	\$ <u>100.-</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-10-19</u>	
Name & Address: <u>Gary Peters</u> <u>39 Riverside Dr</u> <u>Mount Clemens, MI 48043</u>		\$ <u>100.00</u>	\$ <u>100.-</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-8-19</u>	
Name & Address: <u>Glenn Voorhess</u> <u>720 N. Esplanade</u> <u>Mount Clemens, MI 48043</u>		\$ <u>100.00</u>	\$ <u>100.-</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-9-19</u>	
Name & Address: <u>Teri Brisse</u> <u>5400 Great Foster Dr.</u> <u>Oakland Twp. MI 48306</u>		\$ <u>100.00</u>	\$ <u>100.-</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

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Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 137600
2. Committee Name CTE Barb Dempsey

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>9-16-19</u>	
Name & Address: <u>Daniel Goulette</u> <u>21673 Holly St.</u> <u>Clinton Twp., MI 48035</u>		\$ <u>100.00</u>	\$ <u>100 -</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>Lawrence Moloney, Sr.</u> <u>38422 Hidden Lane</u> <u>Clinton Twp, MI 48036</u>		\$ <u>100.00</u>	\$ <u>100 -</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>Paul Leone</u> <u>32 Bellevue St.</u> <u>Mount Clemens, MI 48043</u>		\$ <u>100.00</u>	\$ <u>100 -</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>Frank Rastique</u> <u>24699 Regal Pl</u> <u>Harrison Twp., MI 48045</u>		\$ <u>100.00</u>	\$ <u>100 -</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 400.00

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 137600
2. Committee Name CTE Barb Dempsey

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>9-18-19</u>	
Name & Address: <u>Frank Kostera</u> <u>49064 Morning Glory</u> <u>Macomb, MI 48044</u>		\$ <u>100.00</u>	\$ <u>100 -</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-19-2019</u>	
Name & Address: <u>Daniel Venet</u> <u>31257 Wagner Dr</u> <u>Warren, MI 48093</u>		\$ <u>100.00</u>	\$ <u>100 -</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>Stephan Pampori</u> <u>8106 Rosebud Ln</u> <u>Clarkston, MI 48348</u>		\$ <u>100.00</u>	\$ <u>100 -</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>Mary Grant</u> <u>15854 Palms Ave</u> <u>Clinton Twp., MI</u>		\$ <u>100.00</u>	\$ <u>100 -</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 400.00

Grand Total of All Schedules 1A
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 137600
2. Committee Name CTE Barb Dempsey

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>9-6-19</u>	
Name & Address: <u>Lawrence Scott</u> <u>12900 Hall Rd.</u> <u>Sterling Heights, MI 48313</u>		\$ <u>50.-</u>	\$ <u>50.-</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>FRANK Bernabei</u> <u>36220 N. Julian Dr.</u> <u>Clinton Twp. MI 48036</u>		\$ <u>50.00</u>	\$ <u>50.-</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-6-19</u>	
Name & Address: <u>Keith Carabell</u> <u>645 Wellington Cres</u> <u>Mount Clemens, MI 48043</u>		\$ <u>50.00</u>	\$ <u>50.-</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-16-19</u>	
Name & Address: <u>Joyce Eveningred</u> <u>38442 Kelmar St</u> <u>Clinton Twp, MI 48036</u>		\$ <u>50.00</u>	\$ <u>50.-</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 200.00

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 137600
2. Committee Name CTE Barb Dempsey

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>9-18-19</u>	
Name & Address: <u>Jamal Sage</u> <u>10 Cabri LN</u> <u>Dearborn Heights, MI 48127</u>		\$ <u>200.00</u>	\$ <u>200-</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Sajoe Restaurant</u> Business Address <u>36470 Moravian Dr. Clinton Twp, MI 48035</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-16-19</u>	
Name & Address: <u>Jerry Galeana</u> <u>12955 Pond Apple Dr. E.</u> <u>Naples, FL 34119</u>		\$ <u>250.00</u>	\$ <u>250-</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input checked="" type="checkbox"/> YES	4. Date of Receipt <u>9-10-19</u>	
Name & Address: <u>Lucido For A. Brighter Tomorrow, PAC</u> <u>6303 26 Mile Rd Suite 203</u> <u>Washington, MI 48094</u>		\$ <u>150.00</u>	\$ <u>150-</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-17-19</u>	
Name & Address: <u>Vito Stralis</u> <u>205 North Gratiot</u> <u>Mount Clemens MI 48043</u>		\$ <u>200.00</u>	\$ <u>200-</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>President/owner</u> Employer <u>Ruehles Towing</u> Business Address <u>205 N. Gratiot Mount Clemens, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 800.00

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

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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 137600
2. Committee Name CTE Barb Dempsey

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>9-18-19</u>	
Name & Address: <u>Jill Johnson</u> <u>26999 Alderman Ct.</u> <u>Harrison Twp. MI 48045</u>		\$ <u>200.00</u>	\$ <u>200 -</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Printing by Johnson</u>		Click Here for Memo Itemization	
Business Address <u>1430 South Bound Gratiot, Mount Clemens, MI 48043</u>			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>Gary Gamalski</u> <u>93 Kendrick St</u> <u>Mount Clemens, MI 48043</u>		\$ <u>25.00</u>	\$ <u>125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>programmer</u> Employer <u>Warton Machine Systems</u>		Click Here for Memo Itemization	
Business Address <u>27786 Patmore Dr. Clinton Twp. MI 48036</u>			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-17-19</u>	
Name & Address: <u>Patricia Marshall</u> <u>1449 Balmoral Dr.</u> <u>Mount Clemens, MI 48043</u>		\$ <u>75.00</u>	\$ <u>75.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>Charles M Towner</u> <u>39757 Brylor Ct</u> <u>Clinton Twp. MI 48043</u>		\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Charles R Towner + Assoc.</u>		Click Here for Memo Itemization	
Business Address <u>37211 Harper Ave. Clinton Twp. MI 48036</u>			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 450.00

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 137600
2. Committee Name CTE Barb Dempsey

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3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>Anthony Pellerito</u> <u>11702 Weingartz E</u> <u>Utica, MI 48315</u>		\$ <u>200-</u>	\$ <u>200-</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Happy's Pizza</u> Business Address <u>140 N. Gratiot, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-30-19</u>	
Name & Address: <u>James B Stanton, MD</u> <u>174 S. Wilson</u> <u>Mount Clemens, MI 48043</u>		\$ <u>100.00</u>	\$ <u>100-</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-3-19</u>	
Name & Address: <u>Robb Rose</u> <u>13620 County Rd 8 2</u> <u>Delta OH 43515</u>		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10-9-19</u>	
Name & Address: <u>John George</u> <u>19634 Westchester Dr</u> <u>Clinton Twp. MI</u>		\$ <u>1,000-</u>	\$ <u>1000.-</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u> Employer <u>Delta Management</u> Business Address <u>45511 Market St. Shelby, MI 48315</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 1350.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 137600
2. Committee Name CTE Barb Demps-y

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>9-16-19</u>	
Name & Address: <u>Henry Gordon</u> <u>160 S. Wilson</u> <u>Mount Clemens, MI 48043</u>		\$ <u>250-</u>	\$ <u>250-</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Galbraith Delic-James</u>		Click Here for Memo Itemization	
Business Address <u>660 Woodward Ave. Det. MI 48226</u>			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>Barbara Rossman</u> <u>14836 N. Park Dr.</u> <u>Shelby Township. MI 48315</u>		\$ <u>250-</u>	\$ <u>250-</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO/President</u> Employer <u>Henry Ford Macomb</u>		Click Here for Memo Itemization	
Business Address <u>15855 19 Mile Rd. Clinton Township. MI 48038</u>			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>Randall Buchman</u> <u>7850 Shea Rd</u> <u>Fairhaven, MI 48023</u>		\$ <u>300-</u>	\$ <u>300-</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>RJB Enterprises Plus</u>		Click Here for Memo Itemization	
Business Address <u>5700 Crooks Rd. Troy, MI 48098</u>			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>9-18-19</u>	
Name & Address: <u>Joe Oram</u> <u>4585 Arline Dr</u> <u>West Bloomfield, MI 48323</u>		\$ <u>200.00</u>	\$ <u>200-</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Advertising</u> Employer <u>Self</u>		Click Here for Memo Itemization	
Business Address <u>PO Box 252755 West Bloomfield, MI 48325</u>			
Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			

Page Subtotal 1000.00

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

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 137600
2. Committee Name CTE Barb Dempsey

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: <u>Joseph Peter George</u> <u>19922 Westchester Dr</u> <u>Clinton Twp, MI 48038</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10-9-19</u>		\$ <u>1,000 -</u>	\$ <u>1000 -</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u> Employer <u>Delta Management</u> Business Address <u>45511 Market St. Shelby, MI 48315</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address: <u>David Femmininco</u> <u>110 S. Main St.</u> <u>Mount Clemens, MI 48043</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-30-19</u>		\$ <u>500.00</u>	\$ <u>500 -</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Femmininco Attorney, PLLC</u> Business Address <u>110 S. Main St. Mount Clemens, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address: <u>Robert Fellmy</u> <u>173 Smith</u> <u>Mount Clemens, MI 48043</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-19-19</u>		\$ <u>100 -</u>	\$ <u>100 -</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 Name & Address: <u>Mark Zuccaro</u> <u>600 N Snell</u> <u>Oakland Twp. MI 48306</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9-24-19</u>		\$ <u>100 -</u>	\$ <u>100 -</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal

1,700.00

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

11,500.00

Enter this total on
line 3a of Summary
Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 137600
2. Committee Name CTE Barb Dempsey

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Address <input type="checkbox"/> Fund Raiser	Purpose: Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	Date	\$
Expenditure #2 Name <u>Barb Dempsey</u> Address <u>1379 Kingsley St. Mount Clemens, MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/3/19</u> Date	\$ <u>92.99</u>
Expenditure #3 Name <u>The Italian Tribune</u> Address <u>P.O. Box 380407 Clinton Twp, MI 48038</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Display Ad</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/27/19</u> Date	\$ <u>277.00</u>
Expenditure #4 Name <u>Printing by Johnson</u> Address <u>1430 South Gratiot Ave Mount Clemens, MI 48043</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Yard Signs/Magnet Signs</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/27/19</u> Date	\$ <u>636.00</u>
Expenditure #5 Name <u>Printing by Johnson</u> Address <u>1430 S. Gratiot Ave Mount Clemens, MI 48043</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Post Cards, Flyer postage</u> Click Here for Memo Itemization Type <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/30/19</u> Date	\$ <u>2,161.91</u>

Subtotal this page

3,167.90

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

Enter this total
on line 8a of
Summary Page



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 137600

2. Committee Name Committee To Elect Barb Dempsey

This Schedule itemizes:

a ☒ Debts and obligations owed by or forgiven the committee OR b ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Neil E. Dempsey 1379 Kingsley St. Mount Clemens, MI 48043	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred:</u> <u>07/11/05</u> 6. <u>Original Amount of Debt:</u> \$ <u>500.00</u>	\$ \$ \$ \$ \$	\$	\$ <u>500.00</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: Neil E. Dempsey 1379 Kingsley St. Mount Clemens, MI 48043	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred:</u> <u>09/28/05</u> 6. <u>Original Amount of Debt:</u> \$ <u>500.00</u>	\$ \$ \$ \$ \$	\$	\$ <u>500.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Neil E. Dempsey 1379 Kingsley St. Mount Clemens, MI 48043	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred:</u> <u>10/03/05</u> 6. <u>Original Amount of Debt:</u> \$ <u>500.00</u>	\$ \$ \$ \$ \$	\$	\$ <u>500.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

\$1,500.00

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

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

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 137600
2. Committee Name Committee To Elect Barb Dempsey

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Neil E. Dempsey 1379 Kingsley St. Mount Clemens, MI 48043	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred:</u> <u>11/12/05</u> 6. <u>Original Amount of Debt:</u> \$ <u>1,000.00</u>	\$ \$ \$ \$ \$	\$	\$ <u>1,000.00</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: Neil E. Dempsey 1379 Kingsley St. Mount Clemens, MI 48043	4. Type: <u>loan</u> 5. <u>Date Debt Was Incurred:</u> <u>03/07/16</u> 6. <u>Original Amount of Debt:</u> \$ <u>200.00</u>	\$ \$ \$ \$ \$	\$	\$ <u>200.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ \$ \$ \$ \$	\$	\$ _____ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) **\$1,200.00**

Grand Total of all Schedules 1E **\$2,700.00**
(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.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 137600
2. Committee Name CTE Barb Dempsey

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 <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? <input type="checkbox"/> Yes Name & Address: <u>Saph, Stephan Jr.</u> <u>44 Macomb</u> <u>Mount Clemens, MI 48043</u> If over \$100.00 cumulative, please provide: Occupation: <u>Nickel-Saph, Inc</u> Employer Name & Business Address: <u>44 Macomb</u> <u>Mount Clemens, MI</u> <u>48043</u>	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input checked="" 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: <u>9-18-19</u> 6. Vendor Name & Address:	\$ <u>750.00</u>	\$ <u>800.00</u>
Click Here for Memo Itemization			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address:	\$ _____	\$ _____
Click Here for Memo Itemization			
<input type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address:	\$ _____	\$ _____
Click Here for Memo Itemization			
<input type="checkbox"/> Fund Raiser Contribution			

Page Subtotal 750.00 800.00

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) 750.00

Enter this total
on line 6 of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE

1. Committee I.D. Number 137600

2. Committee Name CTE Barb Dempsey

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>9-18-19</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>75</u>	5. Type of Fund Raising Activity <u>Meet + Greet</u> <u>Food / Beverage</u>	6. Address and Name (If any) of the place where the activity was held. <u>Madison's Pub</u> <u>15 N. Walnut</u> <u>Mount Clemens</u> <input type="checkbox"/> Private Residence <u>MI 48043</u>
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7. Total Contributions \$ 11,500.00

8. Other Receipts _____

9. Gross Receipts (Add lines 7 and 8) _____

10. Total Cost of Event \$ 750.00
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

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

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

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

