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.

3. This Statement covers From: 4/1/19 to 10/20/19

1. Committee I.D. Number
139744

2. Committee Name
Friends of Laura Kropp

4. Candidate Last Name: Kropp First Name: Laura M.I.

4a. Office Sought Including District # or Community Served (If applicable)
Mayor

4b. County of Residence MACOMB

5. Committee's Mailing Address
15 Belleview
Mount Clemens MI 48043

Area Code and Phone 586-933-3974
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

6. Treasurer's Name & Residential Address
Teresa Pionk
55510 E. Nocturne Ln
Shelby Twp MI 48316

Area Code & Phone 586-615-2001

FILED
19 OCT 25 PM 3:11
MACOMB COUNTY CLERK
MT. CLEMENS, MICHIGAN

7. Treasurer's Business Address
n/a, homemaker

Area Code and Phone

8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)

Area Code and Phone

9. **TYPE OF STATEMENT**

9a. [X] Pre-Election **OR** 9b. [ ] Post-Election

Pre-Election or Post-Election Statement relates to:

- [ ] Primary
- [X] General
- [ ] Convention
- [ ] Special
- [ ] School
- [ ] Caucus

Date of Election, Convention or Caucus
11/5/19

Required ONLY if candidate is not on the ballot for the current year:

- [ ] July Quarterly
- [ ] October Quarterly

9c. [ ] Annual Statement (_____) Coverage Year

9d. [ ] Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)

9e. **Dissolution of Candidate Committee**

[ ] 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 oustanding assets, owes no lates fees or has any oustanding 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: Teresa Pionk (Type or Print Name) / Teresa Pionk (Signature) Date 10/25/19

Candidate: Laura Kropp (Type or Print Name) / Laura Kropp (Signature) Date 10/25/19

Authority granted under P.A. 388 of 1976

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 139744

SUMMARY PAGE
CANDIDATE COMMITTEE

2. Committee Name Friends of Laura Kropp

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) $	17,045.00	
b. Unitemized (less than $20.01 each - no Schedule)	(3b.) $	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) $	$17,045.00	(18.) $ $17,045.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) $	$0.00	(19.) $ $0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) $	$17,045.00	(20.) $ $17,045.00
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) $	$908.61	(21.) $ $908.61
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) $	$0.00	(22.) $ $0.00
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) $	$13,403.78	
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.) $	$13,403.78	(23.) $ $13,403.78
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) $		
b. Unitemized (less than $50.01 each - no Schedule)	(10b.) $		
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) $		(24.) $
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed **by** the Committee (Schedule 1E)	(12a.) $	$542.17	
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
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + $	$0.00
15. SUBTOTAL Add lines 13 and 14	(15.) = $	$17,045.00
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - $	$13,403.78
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) $	$3,641.22 *

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 5/3/19

Name & Address:
John Hanna
1119 Forest Lane
Bloomfield, MI 48301

$1050 $1050

5. If over $100.00 cumulative, please provide:

Occupation Self Employed Employer Hanna Development

Business Address 306 S Washington Ave #212, Royal Oak, MI 48067

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 5/3/19

Name & Address
Tammy Hanna
1119 Forest Lane
Bloomfield, MI 48301

$1050 $1050

5. If over $100.00 cumulative, please provide:

Occupation Homemaker Employer n/a

Business Address n/a

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 6/30/19

Name & Address:
Brenda Beiter
4158 Kenmore
Berkley, MI 48072

$100 $100

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7/5/19

Name & Address
James Kopas
126 New St
Mount Clemens, MI. 48046

$100 $100

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

Click Here for Memo Itemization

Page Subtotal 2300.00

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 7/6/19

Name & Address:
John Emerson
190 Clinton River Court
Mount Clemens, MI. 48043

$25 $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 Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7/6/19

Name & Address
Dana Morrison
2528 Shakespeare Ave
Chicago, IL 60647

$35 $35

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 7/6/19

Name & Address:
Daniel Smykowski
2528 Shakespeare Ave
Chicago, IL 60647

$35 $35

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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7/6/19

Name & Address
Linda Rinke
14602 Eastport
Sterling Heights, MI. 48313

$100 $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

Page Subtotal 195.00

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

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 7/6/19 Name & Address: William Sowerby 37860 Saddle Ln Clinton Twp, MI. 48036 5. If over $100.00 cumulative, please provide: Occupation State Representative Employer State of Michigan Business Address 100 N Capitol Ave Lansing MI 48933 Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser	$250	$250 Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7/6/19 Name & Address Mark Verschaeve 111 South Wilson Mount Clemens, MI 48043 5. If over $100.00 cumulative, please provide: Occupation Retired Employer Business Address Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser	$250	$250 Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7/8/19 Name & Address: Edward Bruley 38157 Radde St Clinton Twp, MI. 48036 5. If over $100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser	$100	$100 Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7/8/19 Name & Address Paul Clyne 173 Robertson Mount Clemens, MI 48043 5. If over $100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser	$100	$100 Click Here for Memo Itemization

Page Subtotal 700

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7/8/19

Name & Address:
Cardi DeMonaco Jr
23225 Oakwood
Eastpointe, MI 48021

$100 $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 7/8/19

Name & Address
Amy Jones
26015 Clinton Shore Dr
Harrison Twp, MI 48045

$100 $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 # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7/8/19

Name & Address:
Rhonda Robinson
8358 Colony
Clay, MI 48001

$250 $250

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Marketing Employer Robinson Industries

Business Address 3051 W Curtis RdColeman, MI 48618

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7/10/19

Name & Address
Christina Mallery
235 Crocker
Mount Clemens, MI 48043

$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

Page Subtotal 500

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 7/13/19

Name & Address:
Jeffrey Kropp
35310 Bobcean
Clinton Twp, MI 48035

$100 $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 7/15/19

Name & Address
Dolores Gosciniak
250 Euclid
Mount Clemens, MI 48043

$35 $35

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 7/15/19

Name & Address:
Barbara Jacobs
10170 Saint John
Algonac, MI 48001

$100 $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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7/15/19

Name & Address
Stacy Skaltsounis
19959 Rosin
Clinton Twp, MI 48038

$100 $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

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Page Subtotal 335

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 7/16/19

Name & Address:
Danielle Tirpkoff
54 Dorotheas Street
Mount Clemens, MI 48043

$35 $35

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 7/16/19

Name & Address
Charity Marinelli
6507 Dyke Road
Clay Twp, MI 48001

$100 $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 # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7/16/19

Name & Address:
Sharanne Raye Miller
36 Eldridge St
Mount Clemens, MI 48043

$30 $30

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 7/16/19

Name & Address
Aaron Hall
155 S. Main St Unit 875
Mount Clemens, MI 48043

$35 $35

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

Page Subtotal 200

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 7/17/19

Name & Address:
Megan Bailer
23821 Bunker Hill Dr
Clinton Twp MI 48035

$35 $35

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 7/17/19

Name & Address
Tommy Barnes
291 Jones
Mount Clemens MI 48043

$35 $35

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 7/17/19

Name & Address:
M Brocker-Querio
46 Lincoln
Mount Clemens, MI 48043

$35 $35

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 7/17/19

Name & Address
Kevin Wegrzynowicz
38853 Lakeshore
Harrison Twp, MI 48045

$40 $40

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

Page Subtotal 145

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 7/17/19

Name & Address:
Rick Blok
229 Cambridge
Mount Clemens, MI 48043

$40 $40

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 7/17/19

Name & Address
Catherine Bulgarelli
22021 Englehardt
St. Clair Shores, MI 48080

$40 $40

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 7/17/19

Name & Address:
Jack Johns
35 Riverside Dr.
Mount Clemens, MI 48043

$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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7/17/19

Name & Address
Ronald Robinson
43341 Pointe Drive
Clinton Twp., MI 48038

$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

Page Subtotal 180

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 7/17/19

Name & Address:
Gina Badamo
155 Clinton St.
Mount Clemens, MI 48043

$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 #2 PAC Receipt? ☐ YES 4. Date of Receipt 7/17/19

Name & Address
Roger Bedell
41330 Gloca Mora
Harrison Twp, MI 48045

$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 7/17/19

Name & Address:
Susan Brewer
32671 Greenbriar Ave
Warren MI 48092

$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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7/17/19

Name & Address
Robert Nelson
22315 Alexander
St Clair Shores, MI 48081

$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

Page Subtotal 200

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 7/17/19

Name & Address:
Cheryl Walter
23809 Bunker Hill
Clinton Twp MI 48035

$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 #2 PAC Receipt? ☐ YES 4. Date of Receipt 7/17/19

Name & Address
Michelle Weiss
18200 Tara Dr
Clinton Twp MI 48036

$70 $70

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 7/17/19

Name & Address:
Michael Bernier
421 Robertson St
Mount Clemens MI 48043

$100 $100

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 7/17/19

Name & Address
Joesph Krupp
41233 Gloca Mora
Harrison Twp MI 48045

$100 $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

Page Subtotal 320

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 7/17/19

Name & Address:
Lucille Wilford
23448 Tawas Ave
Hazel Park MI. 48030

$100 $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 7/17/19

Name & Address
Heather Bedell
46647 Summertime Dr
Chesterfield MI 48047

$100 $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 # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7/17/19

Name & Address:
Marisa Nelson
30207 Manhattan
St Clair Shores MI 48082

$100 $100

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 7/17/19

Name & Address
Brook Hendrick
39314 Nautical Lane
Harrison Twp MI 48045

$100 $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

Page Subtotal 400

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 7/17/19

Name & Address:
Monica Baker
636 Huntington
Mount Clemens, MI 48043

$100 $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 7/17/19

Name & Address
Debbie Koehler
8359 Colony Dr
Pearl Beach MI 48001

$100 $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 # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7/17/19

Name & Address:
Leo Lalonde
24801 Rosalind Ave
Eastpointe MI 48021

$100 $100

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 7/17/19

Name & Address
Lori Stone
27582 Evelyn
Warren MI 48093

$100 $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

Page Subtotal 400

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 7/17/19

Name & Address:
Julie Wright
3342 Aquinas Dr
Sterling Heights MI 48314

$100 $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 7/17/19

Name & Address
Susan Blanchard
42661 Mayhew Dr
Sterling Heights, MI 48314

$150 $150

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Realtor Employer Anton Sowerby & Associates

Business Address 79 Macomb Place Mount Clemens, MI 48043

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7/17/19

Name & Address:
Amanda Czop
21704 Sandra Theresa Dr.
Macomb, MI 48044

$200 $200

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Social Worker Employer State of Michigan

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7/17/19

Name & Address
Teresa Pionk
55510 E. Nocturne Ln
Shelby Twp MI 48316

$200 $200

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation homemaker Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

Page Subtotal 650

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 7/17/19

Name & Address:
Jenica Tremberth
37848 Siesta St
Harrison Twp MI 48045

$250 $250

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Interior Designer Employer Twirl Interiors

Business Address 37848 Siesta Street, Harrison Township, MI 48043

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7/17/19

Name & Address
Michael Romska
54100 Shelby Rd
Shelby Twp MI 48316

$250 $250

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Operations Mgr Employer Bakes & Kropp

Business Address 154 S. Rose St Mount Clemens MI 48043

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7/17/19

Name & Address:
Austin Nelson
22315 Alexander
St. Clair Shores MI 48081

$250 $250

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Engineer Employer IDC Industries

Business Address 18901 15 Mile Rd Clinton Twp MI. 48035

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7/17/19

Name & Address
Todd Middleton
26144 Groesbeck Hwy
Warren MI 48089

$500 $500

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Owner Employer Opreum

Business Address 48 Cherry Street, Mount Clemens, MI

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

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Page Subtotal 1250

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 7/17/19

Name & Address:
Adam Staton
41330 Gloca Mora
Harrison Twp MI 48045

$500 $500

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation General Manager Employer Meade Lexus

Business Address 28300 Northwestern Hwy Southfield MI. 48034

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7/17/19

Name & Address
David Hanna
812 S. Main Ste 200
Royal Oak, MI 48067

$1000 $1000

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation L.A. Insurance Memb Employer L.A. Insurance

Business Address 812 S. Main St. Suite 200 Royal Oak, MI 48067

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7/17/19

Name & Address:
Ashley Rosaen
46980 N. Territorial Rd
Plymouth MI 48170

$1050 $1050

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Psychologist Employer Rosean Psychology

Business Address 46980 N. Territorial Rd Plymouth MI 48170

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7/17/19

Name & Address
Deborah Scott
39 S. Wilson Blvd
Mount Clemens MI 48043

$1050 $1050

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Homemaker Employer

Business Address

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

Page Subtotal 3600

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 7/19/19

Name & Address:
Chris Fisher
11 Belleview
Mount Clemens MI 48043

$300 $300

5. If over $100.00 cumulative, please provide:

Occupation Lawyer Employer Fischer Garon and Hoyumpa, I

Business Address 48 Market Street Ste 2B Mount Clemens MI 48043

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

Click Here for Memo Itemization

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7/20/19

Name & Address
Paul Charlier
147 Market St
Mount Clemens MI 48043

$100 $100

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 7/21/19

Name & Address:
Alicia Horvath
139 Belleview
Mount Clemens MI 48043

$50 $50

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 7/21/19

Name & Address
Irene Verschaeve
22005 Grossedale St
Saint Clair Shores MI 48042

$50 $50

5. If over $100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☑ Fund Raiser

Click Here for Memo Itemization

Page Subtotal 500

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 9/26/19

Name & Address:
Realtors Political Action Committee of Michigan
720 N. Washington Ave
Lansing MI 48906

$500 $500

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 9/28/19

Name & Address
Rita Teuscher
195 Hills Cir
Leroy MI 49655

$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 10/11/19

Name & Address:
Anthony Prainito
1609 N Pleasant St
Royal Oak MI 48067

$1000 $1000

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Owner Employer Hanna Development

Business Address 306 S Washington Ave #212, Royal Oak, MI 48067

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/11/19

Name & Address
Jack Hanna
9552 Mountain Ridge Dr
Boulder CO 80302

$1000 $1000

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Retired Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 2550

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 9/20/2019

Name & Address:
IAFF Local 838 PAC
2 Dickenson
Mount Clemens MI 48043

$500 $500

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 7/24/19

Name & Address
Barbara Smykowski
2764 Riverside Dr
Trenton, MI. 48183

$100 $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 # 3 PAC Receipt? ☐ YES 4. Date of Receipt 8/8/19

Name & Address:
Frances M. Rizzo
65 Macomb Place
Mount Clemens, MI 48043

$500 $500

Click Here for Memo Itemization

5. If over $100.00 cumulative, please provide:

Occupation Retired Employer _____

Business Address _____

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 8/21/19

Name & Address
Robert Staszak
9 Lana Ct.
Mount Clemens, MI. 48043

$1050 $1050

5. If over $100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Owner Employer Grouper Golf

Business Address 94 Macomb Place , Mount Clemens MI 48043

Type of Contribution: ☑ Direct ☐ Loan from a person ☐ Fund Raiser

---

Page Subtotal 2150

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 7/17/19

Name & Address:
Beverly Polega
16793 Blossom
Fraser MI 48026

$100 $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 7/17/19

Name & Address
Sandie Graber
526 Wellington Crescent
Mount Clemens, MI 48043

$35 $35

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 7/24/19

Name & Address:
Cheryl Goin
4370 Barchester Drive
Bloomfield Hills MI 48302

$100 $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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt 10/10/19

Name & Address
Michelle DeBeaussaert
39856 Brylor Ct
Clinton Twp MI 48038

$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

Page Subtotal 285

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

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 4/29/19

Name & Address:
Laura Kropp
15 Belleview
Mount Clemens MI 48043

$100 $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 _____

Name & Address
Thomas Ford
15 Breitmeyer Place
Mount Clemens, MI. 48043

$35 $35

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 7/17/19

Name & Address:
Michael Lesich
15201 Fairview Dr
Fraser MI 48026

$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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt _____

Name & Address

$ _____ $ _____

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

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Page Subtotal 135

Grand Total of All Schedules 1A (Complete on last page of Schedule) 17045

Enter this total on line 3a of Summary Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 139744

2. Committee Name Friends of Laura Kropp

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: Laura Kropp 15 Belleview Mount Clemens, MI 48043 **If over $100.00 cumulative, please provide:** Occupation: City Commissioner Employer Name & Business Address: City of Mount Clemens One Crocker Blvd Mount Clemens MI 48043 ☐ Fund Raiser Contribution	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** Description Office Supplies 5. Date Of Receipt: 6/20/19 6. **Vendor Name & Address:** Office Depot 44835 Schoenherr Rd Sterling Heights, MI 48313 Click Here for Memo Itemization	$ 157.08	$ 157.08
Contribution # 2 PAC Receipt? ☐ Yes Name & Address Laura Kropp 15 Belleview Mount Clemens, MI 48043 **If over $100.00 cumulative, please provide:** Occupation: City Commissioner Employer Name & Address: City of Mount Clemens One Crocker Blvd Mount Clemens MI 48043 ☐ Fund Raiser Contribution	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** Description Envelopes 5. Date Of Receipt: 6/25/19 6. **Vendor Name & Address:** Costco 27118 Gratiot Roseville MI 48066 Click Here for Memo Itemization	$ 11.65	$ 168.73
Contribution #3 PAC Receipt? ☐ Yes Name & Address: Laura Kropp 15 Belleview Mount Clemens, MI 48043 **If over $100.00 cumulative, please provide:** Occupation: City Commissioner Employer Name & Address: City of Mount Clemens One Crocker Blvd Mount Clemens MI 48043 ☐ Fund Raiser Contribution	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** Description Postage 5. Date Of Receipt: 6/26/19 6. **Vendor Name & Address:** USPS 155 S. Main St Mount Clemens MI 48043 Click Here for Memo Itemization	$ 220.00	$ 388.73
	Page Subtotal	388.73	388.73
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		

Enter this total on line 6 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number: 139744

2. Committee Name: Friends of Laura Kropp

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: Laura Kropp 15 Belleview Mount Clemens, MI 48043 **If over $100.00 cumulative, please provide:** Occupation: City Commissioner Employer Name & Business Address: City of Mount Clemens One Crocker Blvd Mount Clemens MI 48043 ☐ Fund Raiser Contribution	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** Description: Lunch for Campaign Meeting 5. Date Of Receipt: 6/26/19 6. **Vendor Name & Address:** John's Family Grill 304 Cass Ave Mount Clemens MI 48043 Click Here for Memo Itemization	$ 67.42	$ 456.15
Contribution # 2 PAC Receipt? ☐ Yes Name & Address Laura Kropp 15 Belleview Mount Clemens, MI 48043 **If over $100.00 cumulative, please provide:** Occupation: City Commissioner Employer Name & Address: City of Mount Clemens One Crocker Blvd Mount Clemens MI 48043 ☐ Fund Raiser Contribution	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** Description: Lunch for Campaign Meeting 5. Date Of Receipt: 7/10/19 6. **Vendor Name & Address:** Mae's 64 Macomb Mount Clemens MI 48043 Click Here for Memo Itemization	$ 21.08	$ 477.23
Contribution #3 PAC Receipt? ☐ Yes Name & Address: Alysa Diebolt 23225 Oakwood Eastpointe MI 48021 **If over $100.00 cumulative, please provide:** Occupation: Artist Employer Name & Address: Brick Town Glass 23225 Oakwood Eastpointe MI 48021 ☐ Fund Raiser Contribution	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** Description: Postage 5. Date Of Receipt: 7/24/19 6. **Vendor Name & Address:** USPS 155 S. Main St Mount Clemens MI 48043 Click Here for Memo Itemization	$ 210.00	$ 210.00
	Page Subtotal	308.50	687.23
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		

Enter this total on line 6 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number: 139744

2. Committee Name: Friends of Laura Kropp

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: Alysa Diebolt 23225 Oakwood Eastpointe MI 48021 **If over $100.00 cumulative, please provide:** Occupation: Artist Employer Name & Business Address: Brick Town Glass 23225 Oakwood Eastpointe MI 48021 ☐ Fund Raiser Contribution	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** Description: 11x17 posters 5. Date Of Receipt: 7/26/29 6. **Vendor Name & Address:** American Graphics 34895 Groesbeck Clinton Township, MI 48036 Click Here for Memo Itemization	$ 132.50	$ 342.50
Contribution # 2 PAC Receipt? ☐ Yes Name & Address Alysa Diebolt 23225 Oakwood Eastpointe MI 48021 **If over $100.00 cumulative, please provide:** Occupation: Artist Employer Name & Address: Brick Town Glass 23225 Oakwood Eastpointe MI 48021 ☐ Fund Raiser Contribution	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** Description: Candy for promotional event 5. Date Of Receipt: 9/23/19 6. **Vendor Name & Address:** Meijer 40445 S. Groesbeck Clinton Township, MI 48036 Click Here for Memo Itemization	$ 23.94	$ 366.44
Contribution #3 PAC Receipt? ☐ Yes Name & Address: Laura Kropp 15 Belleview Mount Clemens, MI 48043 **If over $100.00 cumulative, please provide:** Occupation: City Commissioner Employer Name & Address: City of Mount Clemens One Crocker Blvd Mount Clemens MI 48043 ☐ Fund Raiser Contribution	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** Description: Cookies and Candy for Coffee Chat 5. Date Of Receipt: 6. **Vendor Name & Address:** Meijer 40445 S. Groesbeck Clinton Township, MI 48036 Click Here for Memo Itemization	$ 64.94	$ 542.17
	Page Subtotal	221.38	908.61
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	908.61	

Enter this total on line 6 of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 139744

2. Committee Name Friends of Laura Kropp

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Chemical Bank Address 100 N Main St Mt Clemens, MI 48043 ☐ Fund Raiser	Purpose: Bank Fee ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	6/18/19 Date Click Here for Memo Itemization Type	$ 3.00
Expenditure #2 Name American Graphics Printing Address 34895 Groesbeck Clinton Twp., MI 48035 ☐ Fund Raiser	Purpose: Post Cards & Walking (literature ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	6/6/19 Date Click Here for Memo Itemization Type	$ 1520.04
Expenditure #3 Name Paypal Address Electronic Service ☐ Fund Raiser	Purpose: Fee on Donation ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	7/8/19 Date Click Here for Memo Itemization Type	$3.20
Expenditure #4 Name Paypal Address Electronic Service ☐ Fund Raiser	Purpose: Fee on Donation ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	7/10/19 Date Click Here for Memo Itemization Type	$ 1.75
Expenditure #5 Name Paypal Address Electronic Service ☐ Fund Raiser	Purpose: Fee on Donation ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	7/13/19 Date Click Here for Memo Itemization Type	$3.20

Subtotal this page	1531.19
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 139744

2. Committee Name Friends of Laura Kropp

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Chemical Bank Address 100 N Main St Mt Clemens, MI 48043 ☐ Fund Raiser	Purpose: Bank Fee Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	7/17/19	$ 3.00
Expenditure #2 Name Dark Horse Productions Address 306 S. Washington Ave #212 Royal Oak MI 48067 ☑ Fund Raiser	Purpose: Event Venue and Food Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	7/25/19	$ 725.00
Expenditure #3 Name Paypal Address Electronic Service ☐ Fund Raiser	Purpose: Fee on Donation Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	7/16/19	$3.20
Expenditure #4 Name Paypal Address Electronic Service ☐ Fund Raiser	Purpose: Fee on Donation Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	7/17/19	$ 17.42
Expenditure #5 Name Paypal Address Electronic Service ☐ Fund Raiser	Purpose: Fee on Donation Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	7/24/19	$3.20

Subtotal this page	751.82
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 139744

2. Committee Name Friends of Laura Kropp

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Chemical Bank Address 100 N Main St Mt Clemens, MI 48043 ☐ Fund Raiser	Purpose: Bank Fee ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	8/16/19	$ 3.00
Expenditure #2 Name Chemical Bank Address 100 N Main St Mt Clemens, MI 48043 ☐ Fund Raiser	Purpose: Purchase of checks ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	8/9/19	$ 39.80
Expenditure #3 Name USPS Address 155 S. Main St Mount Clemens MI 48043 ☐ Fund Raiser	Purpose: Postage & Mail Service ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	8/8/19	$ 140.00
Expenditure #4 Name Sawicki & Sons Address Mount Clemens MI 48043 Detroit, MI 48216 ☐ Fund Raiser	Purpose: Yard signs and buttons ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	8/23/19	$ 1278.36
Expenditure #5 Name Alyssa Diebolt Address 23225 Oakwood Eastpointe, MI 48021 ☐ Fund Raiser	Purpose: Reimbursement ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	8/24/19	$ 342.50

Subtotal this page	1803.66
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 139744

2. Committee Name Friends of Laura Kropp

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Chemical Bank Address 100 N Main St Mt Clemens, MI 48043 ☐ Fund Raiser	Purpose: Bank Fee ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	9/16/19	$ 3.00
Expenditure #2 Name The Home Depot Address 20777 Hall Road Macomb, MI 48044 ☐ Fund Raiser	Purpose: plywood for signs ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	9/11/19	$333.11
Expenditure #3 Name Change Media Address PO Box 776850 Chicago IL 60672 ☐ Fund Raiser	Purpose: Digital Media ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	9/20/19	$3055.00
Expenditure #4 Name Sawicki & Sons Address 1521 W. Lafayette Detroit, MI 48216 ☐ Fund Raiser	Purpose: Mini Billboards ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	9/6/19	$ 1415.10
Expenditure #5 Name USPS Address 35468 Mound Rd Sterling Heights MI 48310 ☐ Fund Raiser	Purpose: Postage & Mail Service ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement Click Here for Memo Itemization Type	9/29/19	$710.52

Subtotal this page	5516.73
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number: 139744

2. Committee Name: Friends of Laura Kropp

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name: American Graphics Printing Address: 34895 Groesbeck, Clinton Twp MI 48035 ☐ Fund Raiser	Purpose: Mailers Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/2/19	$ 1418.28
Expenditure #2 Name: American Graphics Printing Address: 34895 Groesbeck, Clinton Twp MI 48035 ☐ Fund Raiser	Purpose: Mailers Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/2/19	$ 696.42
Expenditure #3 Name: Mass Mailing Address: 35468 Mound Road, Sterling Heights MI 48310 ☐ Fund Raiser	Purpose: Postage and Mail Serv Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/3/19	$ 897.35
Expenditure #4 Name: Mass Mailing Address: 35468 Mound Road, Sterling Heights MI 48310 ☐ Fund Raiser	Purpose: Postage and Mail Serv Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/5/19	$ 759.64
Expenditure #5 Name: Paypal Address: Electronic Service ☐ Fund Raiser	Purpose: Fee on Donation Click Here for Memo Itemization Type ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/10/19	$ 1.75

Subtotal this page: 3773.44

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

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 139744

2. Committee Name Friends of Laura Kropp

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Alysa Diebolt Address 23225 Oakwood Eastpointe, MI 48021 ☐ Fund Raiser	Purpose: Reimbursement ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/11/19 Date Click Here for Memo Itemization Type	$ 23.94
Expenditure #2 Name Chemical Bank Address 100 N Main St Mt Clemens, MI 48043 ☐ Fund Raiser	Purpose: Bank Fee ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/16/19 Date Click Here for Memo Itemization Type	$ 3.00
Expenditure #3 Name Address ☐ Fund Raiser	Purpose: ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	Date Click Here for Memo Itemization Type	$
Expenditure #4 Name Address ☐ Fund Raiser	Purpose: ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	Date Click Here for Memo Itemization Type	$
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	Date Click Here for Memo Itemization Type	$

Subtotal this page	26.94
Grand Total of all Schedules 1B (Complete on last page of Schedule)	13403.78

Enter this total on line 8a of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

This Schedule itemizes:

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

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? ☐ Yes Owed to or by: Alysa Diebolt 23225 Oakwood Eastpointe, MI 48021	4. Type: Postage 5. Date Debt Was Incurred: 7/24/19 6. Original Amount of Debt: $ 210.00	8/24/19 $ 210.00 $ $ $ $	$ 210.00	$ 0 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				
Debt #2 Corp? ☐ Yes Owed to or by: Alysa Diebolt 23225 Oakwood Eastpointe, MI 48021	4. Type: Posters 5. Date Debt Was Incurred: 7/26/19 6. Original Amount of Debt: $ 132.50	8/24/19 $ 132.50 $ $ $ $	$ 132.50	$ 0 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				
Debt #3 Corp? ☐ Yes Owed to or by: Alysa Diebolt 23225 Oakwood Eastpointe, MI 48021	4. Type: Candy for ev 5. Date Debt Was Incurred: 9/23/19 6. Original Amount of Debt: $ 23.94	10/11/19 $ $ $ $ $	$ 23.94	$ ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: $ _____				

Page Subtotal (Outstanding debt) 0

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

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

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

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

This Schedule itemizes:

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

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? ☐ Yes Owed to or by: Laura Kropp 15 Belleview Mount Clemens, MI 48043	4. Type: Office Suppli 5. **Date Debt Was Incurred**: 6/20/19 6. **Original Amount of Debt**: $ 157.08	$ ____ $ ____ $ ____ $ ____ $ ____	$ ____	$ 157.08 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: ____ Amount Endorsed: $ ____				
Debt #2 Corp? ☐ Yes Owed to or by: Laura Kropp 15 Belleview Mount Clemens, MI 48043	4. Type: Envelopes 5. **Date Debt Was Incurred**: 6/25/19 6. **Original Amount of Debt**: $ 11.65	$ ____ $ ____ $ ____ $ ____ $ ____	$ ____	$ 11.65 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: ____ Amount Endorsed: $ ____				
Debt #3 Corp? ☐ Yes Owed to or by: Laura Kropp 15 Belleview Mount Clemens, MI 48043	4. Type: Postage 5. **Date Debt Was Incurred**: 6/26/19 6. **Original Amount of Debt**: $ 220.00	$ ____ $ ____ $ ____ $ ____ $ ____	$ ____	$ 220.00 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: ____ Amount Endorsed: $ ____				

Page Subtotal (Outstanding debt) 388.73

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

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

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

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

This Schedule itemizes:

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

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? ☐ Yes Owed to or by: Laura Kropp 15 Belleview Mount Clemens, MI 48043	4. Type: Camaign mtc 5. Date Debt Was Incurred: 6/26/19 6. Original Amount of Debt: $ 67.42	$ ____ $ ____ $ ____ $ ____ $ ____	$ ____	$ 67.42 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: ____ Amount Endorsed: $ ____				
Debt #2 Corp? ☐ Yes Owed to or by: Laura Kropp 15 Belleview Mount Clemens, MI 48043	4. Type: Campaign mtg 5. Date Debt Was Incurred: 7/10/19 6. Original Amount of Debt: $ 21.08	$ ____ $ ____ $ ____ $ ____ $ ____	$ ____	$ 21.08 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: ____ Amount Endorsed: $ ____				
Debt #3 Corp? ☐ Yes Owed to or by: Laura Kropp 15 Belleview Mount Clemens, MI 48043	4. Type: Cookies/Can 5. Date Debt Was Incurred: 9/15/19 6. Original Amount of Debt: $ 64.94	$ ____ $ ____ $ ____ $ ____ $ ____	$ ____	$ 64.94 ☐ FORGIVEN
If bank loan, name of endorser or guarantor: ____ Amount Endorsed: $ ____				

Page Subtotal (Outstanding debt) 153.44

Grand Total of all Schedules 1E 542.17
(Complete on last page of Schedule showing amounts owed by or to the committee)

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

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

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held	4. Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity	6. Address and Name (If any) of the place where the activity was held.
7/17/19	100	Dinner	The Emerald Theater 31 N Walnut St, Mt Clemens, MI 48043 ☐ Private Residence

7. Total Contributions 10160.00

8. Other Receipts

9. Gross Receipts (Add lines 7 and 8) 10160.00

10. Total Cost of Event 725.00
(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.