

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

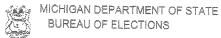
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by 3	. This Statement covers From:	1/1/2019	to 10/20/2	2019
1. Committee I.D. Number	4	. Candidate Last Name	First	Name	M.I.
137189	5	SCHMIDT	MARIA		G
	1	a. Office Sought Including Dist	trict # or Communit	v Served (If appli	cable)
2. Committee Name	1	Board Member - Local		,	
CTE MARIA G. SCHMI	OT 4	b. County of Residence MAC	OMB		
5. Committee's Mailing Address 35755 WOODVILLA DR. STERLING HEIGHTS, MI 48312	3	6. Treasurer's Name & Resider ROBERT J. SCHMIDT 85755 WOODVILLA DR. BTERLING HEIGHTS, MI 49			3
Area Code and Phone If the address in this box is different from the commitmailing address on the Statement of Organization, in be sent to this address by the filing official.		Area Code & Phone 5862649	9242	m m	PILE DCT 22
7. Treasurer's Business Address SAME		Designated Record Keeper Designated Record Keeper)	s Name and Addre	CHGA	tee has a 2:
Area Code and Phone		Area Code and Phone			
9. TYPE OF STATEMENT	na aranga mananana aranga makana		9e. Dissolution	of Candidate Co	mmittee
9a. Pre-Election OR 9b. Post-Election Pre-Election or Post-Election Statement relates to:	Required ONL is not on the bacurrent year: July Quarter	allot for the	by the committee to by discharged and the committee. The	to the candidate of the forgiven, and no ne committee has	tify any outstanding debt or his or her spouse is here o longer collectible from s no outstanding assets,
Primary	Surreconnection of the Contraction of the Contracti	•	owes no lates fees	or rias any oust	anding debt.
General Convention	October Qua	arterly	Further, if the disso	olution cannot be est for the Repor	granted, that this be ting Waiver.
Special	9c. Annual S	Statement () Coverage Year	Effective	e date of dissolut	ion
School	Amanda	_			
Caucus	(Comple	nent to Campaign Statement ete Item 9a, 9b, 9c or 9e to which Statement is being d.)	Note: The disposit		unds must be reported on ige.
Date of Election, Convention or Caucus					
11/5/2019					
-					
10. Verification: I\We certify that all reasonable dilige my\our knowledge and belief the contents are true, a	ence was used in accurate and con	the preparation of this statemonplete.	ent and attached so	chedules (if any)	and to the best of
Current Treasurer or Designated Record keeper	SCHMIDT,	Elt J	1666	Date 1	0/21/2019
Type or Print Name		Signature V			
Candidate MARIA G. SCHMIDT		Muss			0/21/2019
Type or Print Name		Signature			



1. Committee I.D. Number 137189

SUMMARY PAGE **CANDIDATE COMMITTEE**

RECEIPTS	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>6820.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	14.
c. Subtotal of "Contributions"	(3c.) \$ 6820.00	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ 0	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ 6820.00	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ 0	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ 0	(22.) \$
EXPENDITURES		
8. Expenditures	_	
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>3544.95</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ 3544.95	(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	0	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(10b.) \$ <u>0</u>	
DEBTS AND OBLIGATIONS	(11.) s <u>0</u>	(24.) \$
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>2180.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ 0	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ 355.36	To de la constanta de la const
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.) + \$ 6820.00	The control of the co
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$_7175.36	
 Amount expended during reporting period (Add lines 9 and 11) 	(16.) - \$ 3544.95	- Control of the Cont
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>3630.41</u>	*



1. Committee I.D. Number ____137189

CANDIDATE COMMITTEE

2. Committee Name CTE MARIA G. SCHMIDT

Enter contributor's name and address. If contribution is from an individual, enter last name, first name,	6. Amount	7 0
middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	o. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 3/14/19		r uate or receipt)
Name & Address: LAWRENCE CALCATERRA		
36900 SCHOENHERR		
STERLING HGTS, MI 48312	ءِ 200	
5 If over \$100.00 expendeding places were t		
5. If over \$100.00 cumulative, please provide: Occupation CFO Employer WUJEK-CALCATERRA FUNERA	Click Here for	or Memo Itemization
Business Address 36900 SCHOENHERR STERLING HGTS, MI 48312		
Type of Contribution: Direct Loan from a person V Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 3/14/19		
Name & Address		
BRIAN KERN		
44044 MERRILL RD STERLING HGTS, MI 48314	_s 100	
07ENEMO 11613, MI 46514	2	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
OccupationEmployer	0.101(7.01010	Memo Remization
Business Address		
Type of Contribution: Direct Loan from a person 🗸 Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 3/15/19		
Name & Address:		
55620 WOODBRIDGE DR.	100	
SHELBY TWP, MI 48316	_{\$} 100	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
OccupationEmployer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ✓ Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 3/16/19		
Name & Address WAYNE OEHMKE		
17610 21 MILE RD		
MACOMB, MI 48044	_{\$} 100	\$
5. If over \$100.00 cumulative, please provide:		V
Occupation Employer	Click Here for	Memo Itemization
Business Address		Compression
		PROPERTY
Type of Contribution:	500.00	
	500.00	Tananasian paga paga paga paga paga paga paga pa
Grand Total of All Schedules 1A (Complete on last page of Schedule)		**************************************
1	Enter this total on line 3a of Summary	

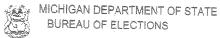
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CANDIDATE COMMITTEE

1. Committee I.D. Number 137189

Committee (PAC) Rep	port <u>all</u> contribution	ntrit s reg	ution is from a Political C	idual, e Commit	nter last name, first name, tee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: MARC KASZUBSKI 1096 BROMPTON F ROCHESTER HILLS			YES 4. Date of	Receip	3/18/19	, 200	, total of robotyty
5. If over \$100.00 cur	atilašina mlasa u	*	8			\$ 200	
Occupation ATTOR			Employer O'REILL	Y-RA	NCILIO	Click Here f	or Memo Itemization
			350 STERLING H				
Type of Contribution:	Direct	Г	Loan from a person	<u> </u>	Fund Raiser		
3. Contribution #2	PAC Receipt?	F		Receipt	3/18/19		
Name & Address	,	-	Notes of the second		- W 10/10		
MELISSA COHEN 15553 Sugar Maple Fraser, MI 48026						_{\$} 100	\$
5. If over \$100.00 cum	ulative, please pr	ovid	e:			Click Here fo	or Memo Itemization
Occupation		_ E	mployer				world herinzation
Susiness Address							
Type of Contribution:	Direct		Loan from a person		Fund Raiser		
3. Contribution # 3 Name & Address: Clark Andrews 53985 Sutherland Ln Shelby Twp, MI 4831	PAC Receipt?		YES 4. Date of	Receip	3/18/19	_{\$} 100	\$
5. If over \$100.00 cum	ulative, please pro	vid	e:			Click Here for	Memo Itemization
Occupation	•		Employer				
Business Address							
Type of Contribution:	Direct		Loan from a person	V	Fund Raiser		
3. Contribution # 4 Name & Address Lawrence Scott 12900 Hall Rd Sterling Heights, MI 4	PAC Receipt?		YES 4. Date of	Receip	t <u>3/16/19</u>	_{\$} 100	\$
5. If over \$100.00 cum	ulative, please pro	vid	a:				The state of the s
Occupation	rt 188 et Prinsett von Antonio Maria de Maria de La Antonio Antonio Antonio Antonio Antonio Antonio Antonio An	-	Employer			Click Here for	Memo Itemization
Business Address							The state of the s
Type of Contribution:	Direct		Loan from a person	V	Fund Raiser		To all december of the second
2			(C		Page Subtotal d Total of All Schedules 1A e on last page of Schedule)	500.00 Enter this total on line 3a of Summary	
Pageof						Page.	



CANDIDATE COMMITTEE

2. Committee Name CTE Maria G. Schmidt

Committee (PAC) Re	pox to indicate if co	ntrib	ution is from a Political (ridual, Commi	enter last name, first name, ttee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Craig Schoenherr 27655 Colony St. Farmington Hills, M	PAC Receipt	? [YES 4. Date of	Recei	ot <u>3/18/19</u>	_{\$} 100	\$\$
5. If over \$100.00 cu	mulative, please pi	ovio	le:				
Occupation			Employer	***************************************		Click Here	for Memo Itemization
Business Address	Economical	- procession		-			
Type of Contribution:	Direct		Loan from a person	✓	Fund Raiser		
3. Contribution #2 Name & Address Charles Turnbull	PAC Receipt?	And the state of t	YES 4. Date of	Receip	3/18/19		
53957 Sutherlund C Shelby Twp, MI 483						_{\$} 100	\$
5. If over \$100.00 cur			e: mployer			Click Here f	or Memo Itemization
Susiness Address		-	p g				
Type of Contribution:	Direct		Loan from a person	V	Fund Raiser		
3. Contribution # 3 Name & Address: Donald Denault 15731 Marcie Fraser, MI 48026	PAC Receipt?		YES 4. Date of	Receip	ot <u>3/18/19</u>	_{\$} 100	- \$
5. If over \$100.00 cun	nulative, please pro	vide	> :			Click Here fo	r Memo Itemization
Occupation	-	E	Employer				
Business Address	MANUSCHI STATE STA	to interest the same of the sa		-			
Type of Contribution:	Direct		Loan from a person	V	Fund Raiser		
 Contribution # 4 Name & Address Robin Yono 6186 Windemere Ln Shelby Twp, MI 4831 	PAC Receipt?		YES 4. Date of	Recei	ot <u>3/18/19</u>	_s 100	e
5. If over \$100.00 cum	nulative, please pro	vide	:				Ф <i>есоновичност</i>
Occupation			Employer			Click Here fo	r Memo Itemization
Business Address							
Type of Contribution:	Direct		Loan from a person	V	Fund Raiser		
				Vertexand Annual Control of the Cont	Page Subtotal	400.00	
3 16			(0		nd Total of All Schedules 1A te on last page of Schedule)	Enter this total on line 3a of Summary	
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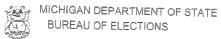


CANDIDATE COMMITTEE

1. Committee I.D. Number ______137189

2. Committee Name CTE Maria G. Schmidt

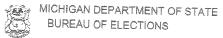
Committee (PAC) Re	port all contributions	ntric s req		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Alan Casmere 28836 Panama St	PAC Receipt	? [YES 4. Date of Receipt <u>3/18/19</u>		
Warren, MI				_{\$} 200	\$
5. If over \$100.00 cui	mulative, please pr	ovi	de:		
Occupation Owner		-	Employer Friendly Storage	Click Here t	for Memo Itemization
Business Address 33	3400 Maple La	ne	Sterling Hgts MI 48312		
Type of Contribution:	Direct		Loan from a person		
3. Contribution #2 Name & Address	PAC Receipt?		YES 4. Date of Receipt 3/18/19		
Hank Riberas					
6471 Metro Pkwy Sterling Hgts, MI 483	312			_{\$} 100	\$
5. If over \$100.00 cun	nulative, please pro	ovid	e:	Click Here fo	or Memo Itemization
Occupation		_ E	mployer		
Business Address					
Type of Contribution:	Direct		Loan from a person Fund Raiser		
3. Contribution # 3	PAC Receipt?		YES 4. Date of Receipt 3/20/19		
Name & Address: Sterling Hgts POA					
PO Box 546 Sterling Hgts, MI 483	311			ş <u>200</u>	. \$
5. If over \$100.00 cun	nulative, please pro	ovid	e:	Click Here fo	r Memo Itemization
Occupation			Employer		
Business Address					
Type of Contribution:	Direct		Loan from a person	DOZE SAN	
3. Contribution # 4 Name & Address Linda Belau	PAC Receipt?		YES 4. Date of Receipt 3/18/19		
43561 Salt Creek Dr Clinton Twp, Mi 4803	8			_{\$} 100	\$
5. If over \$100.00 cum	nulative, please pro	vid	e:		
Occupation		D-States	Employer	Click Here for	r Memo Itemization
Business Address					
Type of Contribution:	Direct		Loan from a person Fund Raiser		
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1. Committee I.D. Number 137189

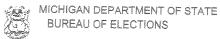
Committee (PAC) Re	port <u>all</u> contributions	rega	itton is from a Political Co ardless of amount,	ommi		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Robert Abratowski 30406 Westmore	PAC Receipt?		YES 4. Date of F	Recei	pt <u>3/21/19</u>		
Madison Hgts, MI 48	3071					_{\$} 100	\$
5. If over \$100.00 cus	mulative, please pr	ovid	3 ;			O1' 1 1 1	
Occupation		heritan.	Employer			Click Here t	or Memo Itemization
Business Address		Ministration of the Control of the C					
Type of Contribution:	Direct		Loan from a person	V	Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?		YES 4. Date of R	Receip	ot 3/18/19		
Ralph Maccarone 13921 Basilisco Cha Shelby Twp, MI 483						_{\$} 100	\$
5. If over \$100.00 cun	nulative, please pro	vide	đ.			Click Here fo	r Memo Itemization
Occupation		En	nployer	***************************************			
Business Address				·			
Type of Contribution:	Direct		Loan from a person	V	Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?		YES 4. Date of R	Recei	ot 3/19/19		
Lukas Bonner 4875 Sawgrass W Ann Arbor, MI 48108						_{\$} 100	\$
5. If over \$100.00 cum	ulative, please pro	vide	z 1			Click Here for	Memo Itemization
Occupation		E	mployer	*************			
Business Address	CO Co and a control of the Control o	operation of the last of the l		passona			
Type of Contribution:	Direct		Loan from a person	V	Fund Raiser	R6000000000000000000000000000000000000	
3. Contribution # 4 Name & Address John Bologna 19135 Saxon Dr	PAC Receipt?		YES 4. Date of F	Recei	pt 3/18/19		
Beverly Hills, MI 4802	25					<u>\$</u> 200	\$
5. If over \$100.00 cum		vide	:			mental in the	The state of the s
Occupation Develo	per		Employer Self	d in the second of the second		Click Here for	Memo Itemization
Business Address Sa	me						
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CANDIDATE COMMITTEE

1. Committee I.D. Number ______137189

Committee (PAC) Rep	ort <u>all</u> contribution	ntribution is from a Politi s regardless of amount.	inal Cammi	enter last name, first name, ttee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: GEORGE PARKER 13899 BROUGHAM	PAC Receipt	? YES 4. Dar	te of Recei	ot <u>3/25/19</u>		
STERLING HGTS, M					_{\$} 50.00	\$
5. If over \$100.00 cum	ulative, please pr	rovide:			OKALILA	6. at
Occupation		Employer			Click Here t	or Memo Itemization
Business Address	Activities and the second seco					
Type of Contribution:	Direct	Loan from a perso	on 🗸	Fund Raiser		
3. Contribution #2	PAC Receipt?	YES 4. Date	e of Receip	1 3/25/19`		
Name & Address MICHAEL MACDONA	in	maneracci				
18890 SAN QUENTIN					200.00	
LATHRUP VILLAGE,	MI 48076				_{\$} 200.00	\$
5. If over \$100.00 cumu	detivo ploggo pr	ni da				
Occupation ENIGINE		Employer HRC			Click Here fo	r Memo Itemization
Business Address 555			II C NAI	49202		
		TT DECOMMENDED IN	LLO IVII	40302		
Type of Contribution:	Direct	Loan from a persor		Fund Raiser		
3. Contribution # 3 Name & Address: LAWRENCE SCOTT	PAC Receipt?	YES 4. Dat	e of Receip	ot <u>3/25/19</u>		
12900 HALL RD #350					_s 100.00	, 200.00
STERLING HGTS, MI	48314				3	\$ 200.00
5. If over \$100.00 cumu	lative, please pro	ovide:			Click Here for	Memo Itemization
Occupation	When the second state of the second s	Employer				
Business Address		Especial Control Contr	processo			
Type of Contribution:	Direct	Loan from a persor		Fund Raiser	4	
3. Contribution # 4 Name & Address EDWARD MANCINI	PAC Receipt?	YES 4. Dat	te of Recei	ot 4/4/19		
7464 19 MILE RD					000 00	
STERLING HGTS, MI	48314				_{\$} 200.00	\$
5. If over \$100.00 cumu	lative, please pro	vide:				
Occupation OWNER		Employer MAN	ICINI HO	DLDINGS	Click Here for	Memo Itemization
Business Address SAN	ΛE					
Type of Contribution:	Direct	Loan from a persor	n 🗸	Fund Raiser		
			the second	Page Subtotal	550.00	
			Gra	nd Total of All Schedules 1A		
				te on last page of Schedule)	Enter this total on	_
Page 6 of 15					line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number ______137189

middle initial. Check I Committee (PAC) Rep	oox to indicate if con	tributi	on is from a Political 0	idual, e Commit	nter last name, first name, tee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: MICHAEL GILSON 37308 VANDYKE RI STERLING HGTS, M			YES 4. Date of	Receip	t <u>4/3/19</u>	_{\$} 100	\$
5. If over \$100.00 cur	nulative, please pro	vide:		_		054.11	W. W. De the set
Occupation De	velope/	_ E	mployer <u>5_e</u>	14		Click Here t	or Memo Itemization
Business Address	1	12	yle Sterl	125	HSt5, MI48312		
Type of Contribution:	Direct		Loan from a person		Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	Y	ES 4. Date of	Receipt	4/11/19		
DILJA JUNCEVIC 52756 BLUERIDGE						_s 500	
SHELBY TWP, MI 4	3316					\$	\$
5. If over \$100.00 cun		vide:				Click Here fo	or Memo Itemization
Occupation HOMEN		_ Emp	oloyer	· · · · · · · · · · · · · · · · · · ·			
Business Address SA	·ME			***************************************			
Type of Contribution:	Direct		oan from a person	V	Fund Raiser		
3. Contribution # 3 Name & Address: PHILIP RUGGERI 55764 ST. REGIS SHELBY TWP, MI 48	PAC Receipt?		YES 4. Date of	Receip	^t 4/11/19	_s 500	\$
						Click Here fo	r Memo Itemization
5. If over \$100.00 cun							i wicino itemization
Occupation ATTOR	NEY	En	nployer SELF				
Business Address 432	Charactering	unanoweday.		lanament .			
Type of Contribution:	Direct	<u> </u>	oan from a person	V	Fund Raiser		
3. Contribution # 4 Name & Address IQBAL SINGH PO BOX 1281	PAC Receipt?		YES 4. Date of	f Recei	ot 4/11/19		
STERLING HGTS, M	II 48311					_s 100	ę
5. If over \$100.00 cun	nulative, please pro	vide:				Click Here fo	r Memo Itemization
Occupation			Employer		1032 a.u. 2000 p. 1032 p. 1042 a.u. 1042 p. 104		
Business Address							***************************************
Type of Contribution:	Direct	П	oan from a person	V	Fund Raiser		
	leased 211 Oct	<u></u>			Page Subtotal	1200.00	
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CANDIDATE COMMITTEE

1. Committee I.D. Number ______137189

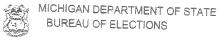
Committee (PAC) Re	pox to indicate if co port <u>all</u> contribution	ntrib s reg	ution is from a Political C ardless of amount.	ommi		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: TONY GALLO 6303 26 MILE RD WASHINGTON, MI	PAC Receipt 48094	? L	YES 4. Date of F	Receip	4/11/19	_{\$} 100	\$
5. If over \$100.00 cur	mulative, please p	ovio	le:			@.tf	
Occupation		-	Employer	alemania (notativo) de la constanta de la cons		Click Here	for Memo Itemization
Business Address							
Type of Contribution:	Direct		Loan from a person	V	Fund Raiser		
3. Contribution #2	PAC Receipt?	Г	YES 4. Date of R	Receip	t 4/11/19		
Name & Address LISA HARNESS 14142 BRANDYWIN STERLING HGTS, M		Eccasion				_{\$} 50	\$
5. If over \$100.00 cun						Click Here	for Memo Itemization
Occupation		_ =	mployer	***************************************	economic de estre exposur y desegan (estado estado estado estado estado estado estado estado estado estado esta		
Susiness Address				havarand			
Type of Contribution:	Direct		Loan from a person		Fund Raiser		
3. Contribution # 3 Name & Address: FRIENDS OF NATE 43313 INTERLAKEN	I DR		YES 4. Date of F	Receip	ot 4/11/19	_s 50	
STERLING HGTS, N	11 48313					9	<u> </u>
5. If over \$100.00 cun	nulative, please pro	ovid	e:			Click Here for	or Memo Itemization
Occupation		_ 1	Employer	***************************************			
Business Address							
Type of Contribution:	Direct		Loan from a person	V	Fund Raiser		
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HARPER WOODS, II	/// 40225					\$ 10	\$
5. If over \$100.00 cum	nulative, please pro	vid	à.°			Click Here fo	or Memo Itemization
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Page of 17						Page.	,



1. Committee I.D. Number ______137189

CANDIDATE COMMITTEE

A Date of Receipt 4/11/19 Click Here for Memo Itemization A Date of Receipt 4/11/19 Click Here for Memo Itemization Click Her	Committee (PAC) Re	port all contribution	ntrit s re		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
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STERLING HGTS, MI 48312 5. If over \$100.00 cumulative, please provide: Occupation Employer Business Address Type of Contribution: Direct Loan from a person	Name & Address CTE JOE ROMANO	PAC Receipt?		YES 4. Date of Receipt 4/11/19		
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line 3a of Summary Page	9 15	-		(Complete on last page of Schedule)	Enter this total on line 3a of Summary	



CANDIDATE COMMITTEE

1. Committee I.D. Number ___137189

THE WAR THE PARTY OF THE PARTY	DOVERD HORESTE HICK	ontribution is from a Political is regardless of amount.	dividual, enter last name, first name, al Committee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Name & Address: BRUCE LIKOWSKI 2809 GALWAY BAY METAMORA, MI 48	•	YES 4. Date	of Receipt 4/11/2019	_s 100	¢.
5. If over \$100.00 cur	mulative, please pi	rovide:		Communication and the state of the consequence and compression	
Occupation		Employer	999000 April program to the last above on the last and are all the last above on the last and are all the last above on the last and are all the last are al	Click Here	for Memo Itemization
Business Address			The second second of the second secon		
Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		
3. Contribution #2 Name & Address DEBBIE LIKOWSKI	PAC Receipt?	YES 4. Date of	of Receipt 4/11/2019		
400 SHORTRIDGE ROCHESTER HILLS	S, MI 48067			_{\$} 120	\$
5. If over \$100.00 cum		ovide:		Click Here f	or Memo Itemization
Occupation HOMEN	***************************************	Employer			m a 1 m a 1 m a 1
Business Address SA	ME				
Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		
3. Contribution # 3 Name & Address: KELLY EASTMAN 930 RIDGEVIEW LAKE ORION, MI 483	PAC Receipt?	YES 4. Date of	of Receipt <u>4/11/2019</u>	_{\$} 100	. \$
5. If over \$100.00 cum	ulative, please pro	ovide:		Click Here fo	r Memo Itemization
Occupation		Employer			
Business Address					
Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		
3. Contribution # 4 Name & Address ROBERT MIJAC 43710 VIA ANTINIO STERLING HGTS, MI	PAC Receipt?	YES 4. Date of	of Receipt <u>4/13/2019</u>	_{\$} 100	\$
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Occupation				Click Here for	Memo Itemization
Business Address					
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Page 10 of 15				line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number ___137189

2. Committee Name CTE MARIA G. SCHMIDT

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 5/2/2019 Name & Address: JOHN NITZ 57477 WILLOW WAY CT WASHINGTON, MI 48094	_s 100	¢
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer	Click Here fo	or Memo Itemization
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 6/29/2019 Name & Address PASHKO UJKIC		
38346 PHYLLIS CT STERLING HGTS, MI 48312	_{\$} 200	\$
5. If over \$100.00 cumulative, please provide: Occupation SELF EMPLOYED Employer DODGE PARK CONEY ISLAND	Click Here fo	r Memo Itemization
Business Address 35252 DODGE PARK STERLING HGTS, MI 48312		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 7/1/2019 PAUL CALMI		
37437 ALMONT DR W. STERLING HGTS, MI 48310	<u>\$ 100</u>	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/7/2019 Name & Address UAW MICHIGAN V-PAC		
B000 E. JEFFERSON DETROIT, MI 48214	_{\$} 1000	\$
5. If over \$100.00 cumulative, please provide:	Clieb Lleve for	Memo Itemization
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Business Address		STATE OF THE PROPERTY OF THE P
Type of Contribution: ✓ Direct Loan from a person Fund Raiser		To the control of the
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Page _____ of ____5

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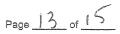
ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 137189

2. Committee Name CTE MARIA G. SCHMIDT

Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	
Expenditure #1	x.pood (r.equired information)	o. Date	6. Amount
Name SAM'S CLUB		4/40/00	
SAIVI S CLUB		4/10/20	s 24.32
Address 45600 UTICA PARK	Purpose: FLOWERS	Date	
UTICA MI 8315	Click	Here for Memo	Itemization Type
	promotomany		nemization type
V Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous	į.	
Expenditure #2	statement	Non-Colores Services Colores C	
Name VINCE AND JOES MARKET		4 4 4 5 5 7 7	
VINCE AND JOES WARKET		4/11/20	s 49.99
Address	Purpose: FRUIT PLATTER	Date	Control on the Control of the Contro
41790 GARFIELD			
CLINTON TWP, MI 48038	Click	Here for Memo	Itemization Type
	Check box if this expenditure is payment of	:	
✓ Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name CENTURY BANQUET		4/11/19	
Address	FLINDPAISED	Date	s <u>1049.74</u>
33204 MAPLE LANE	Purpose: FUNDRAISER	Date	
STERLING HGTS, MI 48312	Click I	Here for Memo	Itemization Type
	Check box if this expenditure is payment of		
✓ Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4		Windows Management and Comment	
Name APCC	VV	6/28/19	
A.11	EFOTIVAL OLONG	Date	s 100
Address 33204 MAPLE LANE	Purpose: FESTIVAL SIGN	Date	
STERLING HGTS, MI 48312	Click H	Here for Memo I	temization Type
	Check box if this expenditure is payment of	iolo for Michio :	remization Type
Fund Raiser	debt or obligation reported on previous		
	statement	Der Miller von der Anthonisch und Propins der Anthonisch und gegen der	
Expenditure #5			
Name ST MALACHY CHURCH FESTIVAL	The state of the s	8/13/19	. 400
Address	Purpose: FESTIVAL SIGN	Date	\$ 100
14115 FOURTEEN MILE RD STERLING HGTS, MI 48312	Click	dere for Mome!	temization Type
	Check box if this expenditure is payment of	ICIG IOT MICHIO!	телнидация туре
Fund Raiser	debt or obligation reported on previous statement		
inceptal		otal this page	1224.05
			1324.05
	Grand Total of all 9 (Complete on last page		si birangayaya

Enter this total on line 8a of Summary Page





ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

137189

2. Committee Name CTE MARIA G. SCHMIDT

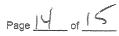
2 Roma and adding	POLITICISTO PROBLEM		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name AMERICAN GRAPHICS		9/18/19	s 1287.90
Address 34895 GROESBECK	Purpose: PRINTING LIT	Date	
CLINTON TWP, MI 48035	Systematical Control of Control o		o Itemization Type
Fund Raiser	Check box if this expenditure is payment debt or obligation reported on previous statement	of	
Expenditure #2	Comment of the Commen		
Name WHITLOCK		9/20/19	s 53.00
Address	Purpose: STICKERS FOR SIGN	Date	3 00.00
275 E. 12 MILE RD MADISON HGTS, MI 48071		k Here for Memo	o Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	of	
Expenditure #3			
Name MASS MAILING		10/5/19	\$ 152
Address 35468 MOUND RD	Purpose: MAIL HOUSE	Date	
STERLING HGTS, MI 48310	Click	Here for Memo	Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous	of	
Fund Raiser	statement		
Expenditure #4			
Name POSTMASTER		10/5/19	. 700
Address	Purpose: POSTAGE	Date	\$ 728
200 W 2ND ST ROYAL OAK,MI 48068			
	pointenance.		Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	f	
Expenditure #5			
Name			
Address	Purpose:	Date	\$
	Click	Here for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment or debt or obligation reported on previous statement		••
		total this page	2220.90

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

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Enter this total

Enter this total on line 8a of Summary Page





DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number 137189

CANDIDATE COMMITTEE

2. Committee Name CTE MARIA G. SCHMIDT

This Schedule itemizes:				
Debts and obligations owed by or forgiven the co	ommittee OR b. Deb	ts and obligations owed to o	or forgiven <u>by</u> the co	mmittee.
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was	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: ROBERT J. SCHMIDT 35755 WOODVILLA DR STERLING HGTS, MI.48312 If bank loan, name of endorser or guarantor:	4. Type: LOAN 5. Date Debt Was Incurred: 01/24/03 6. Original Amount of Debt: \$ 1,600.00	12/17/07 _{\$} 720.00 \$ \$ \$	s 720.00	\$_880.00 FORGIVEN
Debt #2 Corp? Yes		Amo	ount Endorsed: \$ _	
Owed to or by: ROBERT J. SCHMIDT 35755 WOODVILLA DR STERLING HGTS, MI 48312	4. Type: LOAN 5. Date Debt Was Incurred: 5/30/03 6. Original Amount of Debt: \$ 300.00	\$ \$ \$ \$	\$ 0.00	\$ 300.00
If hank loop, name of any		\$		
If bank loan, name of endorser or guarantor: Debt #3 Com2 Vee		Am	ount Endorsed: \$	
Owed to or by: ROBERT J. SCHMIDT 35755 WOODVILLA DR. STERLING HGTS, MI 48312	4. Type: LOAN 5. <u>Date Debt Was Incurred</u> : 2/23/05 6. <u>Original Amount of Debt</u> : \$ 1,000.00	\$ \$ \$ \$	§ 0.00	\$_1,000.00
If bank loan, name of endorser or guarantor:		Arr	nount Endorsed: \$	мидеропривания
	Complete on last page of Schedule si	Page Subtotal ((Outstanding debt)	\$2,180.00 \$2,180.00

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

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

Page 15 of 15



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

137189

1. Committee I.D. Number

	- USE	A SEPARATE SH	EET FOR EACH EVENT		
3. Date Event Was Held		THE RESERVE THE PROPERTY OF TH			
o. Date Event was neig	or Particip	er of Individuals Attending Dating (whichever is	5. Type of Fund Raising Activity	Address and Name (If any) of the place where the activity was held.	
4/11/2019	greater)			CENTURY BANQUET	
7/11/2019	Ministration of the Contract o	50	DACTA DIMILED	CENTER	
MATTON A SAMPLE TO TO TO TO THE T	- Control (Control Control Con	¥ ¥	PASTA DINNER	33204 MAPLE LANE STEDLING LICTS AND AGO.	
		FF00 00	то под под добова на режения на под) Commence of the Control of the Con	
7. Total Contributions		5520.00			
8. Other Receipts		0			
9. Gross Receipts (Add lines 7 a	and 8)	5520.00	nn om de de la companya de la compa	,	
10. Total Cost of Event	x, 10, 0)	1124.05			
(Total Cost includes In-Kind Cor	ntributions		Made For the Eventy		
promotives					
11. Check if event was a joi	nt fund ra	iser and complete the	following:		
Co-Sponsor(s)		Contribution Split (%)		Expenditure Split (%)	
			And the state of t	400ccs/services (QSD) planting intercept (SSD) and planting (QSD) planting interpolation and Committee and	
ACCUPATION OF SIMPLE AND SQUARE ACCUS OF THE STATE OF THE			RETURNED Wildelphosphological State		
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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.