

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

30121(17,02				<u> </u>
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by andidate.	3. This Statement covers From	10-21-19 to	11-25-19
1. Committee I.D. Number		4. Candidate Last Name	First Name	M.I.
136969-50		Ziarko	Barbara	A.
2. Committee Name		4a. Office Sought Including Dis	trict # or Community Served	(If applicable)
CTE Barbara A. Ziar	ko	City Council		<u>!</u>
	NO	4b. County of Residence	*****	·
5. Committee's Mailing Address 13805 Deepwood Ct.		6. Treasurer's Name & Reside Barbara A. Ziarko	ntial Address	19
Sterling Heights, MI 48312		13805 Deepwood Ct		
		Sterling Heights, MI		2h
				-9 -9
Area Code and Phone (586) 939-0332				A B
If the address in this box is different from the commit mailing address on the Statement of Organization, r		Area Code & Phone (586) 9	39-0332	0:
be sent to this address by the filing official. 7. Treasurer's Business Address		B. Designated Record Keeper		
Barbara A. Ziarko		Designated Record Keeper)	5 Hanne and Address (II the	collusinee nagat
13805 Deepwood Ct.		Barbara A. Ziarko 13805 Deepwood Ct		,
Charling Heights MI 40040		Sterling Heights, MI		
Sterling Heights, MI 48312				
Area Code and Phone		Area Code and Phone		
9. TYPE OF STATEMENT	Required ON	√LY if candidate	9e. Dissolution of Candid	date Committee
9a. Pre-Election OR 9b. Post-Election	is not on the current year:	ballot for the		We certify any outstanding debt
Pre-Election or Post-Election Statement relates to:	.		by discharged and forgiven	ndidate or his or her spouse is here , and no longer collectible from ittee has no oustanding assets,
Primary	July Quart	erly	owes no lates fees or has a	-
X General	October G	Quarterly	Further if the dissolution of	innot be granted, that this be
Convention			considered a request for the	Reporting Waiver.
Special	9c. Annua	al Statement ()		
School		Coverage Year	Effective date of	dissolution
Caucus		dment to Campaign Statement plete Item 9a, 9b, 9c or 9e to		<u>.</u>
	indica	te which Statement is being	Note: The disposition of res Schedule 1B and the Sumi	sidual funds must be reported on mary Page.
	ameno	dea.)	Solidate 15 and the dum	, . ugo.
Date of Election, Convention or Caucus				
11/05/19				
		A		
10. Verification: I\We certify that all reasonable dilige			ent and attached schedules	(if any) and to the best of
my\our knowledge and belief the contents are true, a	accurate and co	omplete.	7/-//	
Current Treasurer or Designated Record keeper Barbara A. Zi	arko `	John Gardle	Lesiko	12-10-19
Type or Print Name	2	Signature	/) /) Date	
Barbara A. Ziarko		Jack and Market	bibs	12-10-19
Candidate Type or Print Name		Signature Signature	Date	
Authority granted under P.A. 388 of 1976		Signature		

1. Committee I.D. Number 136969-50

SUMMARY PAGE **CANDIDATE COMMITTEE**

2. Committee Name CTE Barbara A. Ziarko

CANDIDATE COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 0.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ _\$0.00	(18.) \$ \$0.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ _\$0.00	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ _\$0.00	(20.) \$ \$0.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$0.00	(21.) \$ \$0.00
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.) \$ \$2,839.93	
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.) \$ _\$2,839.93	(23.) \$ \$0.00
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$ \$0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.)\$ \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ \$0.00	(24.) \$ \$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ \$5,600.00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ \$0.00	
 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15) 	## STATEMENT ##	



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

136969-50 1. Committee I. D. Number

2. Committee Name CTE Barbara A. Ziarko

Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			······································
Name Mass Mailing		10/30/19	s 197.50
Address	Purpose: Mailing Labor	Date	
35486 Mound Rd.	- urpose		
Sterling Heights, MI 48310	Click	Here for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name Postmaster		10/30/19	. 700 00
	Dantaga	Date	\$ <u>798.00</u>
Address	Purpose: Postage	24.0	
7007 Metro Parkway	Olista		Manainatian Tura
Sterling Heights, MI 48312	Click	nere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #3	statement		
Name Mass Mailing		10/30/19	\$374.26
Address	Purpose: Labor for Mailing	Date	
35468 Mound Rd.			
Sterling Heights, MI 48310	Click	Here for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4	Statement		
Name Doctmastor			
Name Postmaster		10/30/19	s 1417.17
Address	Purpose: Postage	Date	
7007 Metro Parkway	Fulpose.		
Sterling Heights, MI 48312	Click	Here for Memo	Itemization Type
	Check box if this expenditure is payment of		
П	debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name EA Graphics		11/08/19	
·	Label Printing		\$ 53.00
Address	Purpose: Label Printing	Date	
42111 Van Dyke	Click	Here for Memo	Itemization Type
Sterling Heights, MI 48314	Check box if this expenditure is payment of		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
□ ss.:	debt or obligation reported on previous		
Fund Raiser	statement		· · · · · · · · · · · · · · · · · · ·
	Subt	otal this page	\$2,839.93
	Grand Total of all	Schedules 1B	\$2,830,03

Enter this total on line 8a of Summary Page

\$2,839.93

(Complete on last page of Schedule)



DEBTS	AND	OBI	LIGA	IOIT/	NS
5	CHE	MI	E 45	=	

1. Committee i.D. Number

136969-50

Committee to Elect Barbara A. Ziarko 2. Committee Name **CANDIDATE COMMITTEE** This Schedule Itemizes: e Debts and obligations owed by or forgiven the committee OR b. Debts and obligations owed by or forgiven by the committee.

(Check either a or b. Use only for the purpose checked.) 9. Outstanding 3. Name and Mailing Address of person, vendor or 4. Type of Obligation Date and amount of A Corrudathe Bulunce at clos financial institution to whom debt is owed. of fnemme (Description)
5. Indicate date debt was each payment of this period data on debt Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please (Dem 6 minus incurred 6. Indicate original amount ttem 8) provide information regarding the endorsers or of debt guarentors, If any. Debt #1 Corp? Yes 4. Type: loan Owed to or by: **Tommy Ziarko** 5. Data Data Was Incorred: 13805 Deepwood Ct. 02/18/05 Sterling Heights, MI 48312 \$ 1,000.00 6. Original Amount of Dabit 1,000.00 FORGIVEN if bank loan, name of endorser or guarantor. Amount Endorsed: \$ Debt #2 Corp? Yes 4. Type: loan Owed to or by: Tommy Ziarko 5. Date Debt Was Incorrect: 13805 Deepwood Ct. 07/01/01 Sterling Heights, MI 48312 1,100.00 6. Orleinel Amount of Date: 1,100.00 FORGIVEN 8 Amount Endorsod: \$ If bank loan, name of endorser or guarantor: Debt #3 Corp? Yes 4. Type: toen Owed to or by: Tommy Ziarko 5. Date Debt Was Incurred: 13805 Deepwood Ct. 4/2003 \$ 900.00 Sterling Heights, MI 48312 6. Original Amount of Debt: 3 900.00 FORGIVEN ount Endors If benk loan, name of endorser or guarantor: \$3,000.00 Page Subtutal (Outstanding debt Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee) \$5,600.00 Enter this total on line 12a "owed

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 Compelign Statement or it was forgiven during the period covered by this Compelign Statement.

by" or line 12b ed to of the Summery Page

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DEBTS AND OBLIGATIONS	1. Committee I.D. Number	136969-50
SCHEDULE 1E CANDIDATE COMMITTEE	2. Committee Name Committee to Elect Barbara A. Zia	
nis Schedule Itemizes:		
Debts and obligations owed by or targiven the	ie committee OR (Check either a or b. Use or	 Debts and obligations owed to or longiven by the committee. by for the purpose checked.)

the control of the co

This Schedule Itemizes:	·····			
Debts and obligations owedby or torgiven the com (Che	mittee OR b. Debt ck either a or b. Use only for the pu	is and obligations owed to o urpose checked.)	r forgiven <u>by</u> the co	nmittee.
Name and Mailing Address of person, vendor or financial Institution to whom dabt is owed. Check box to indicate whother dabt is owed to an incorporated business. If debt is a bent lean, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 8. 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 (term 6 minus term 8)
Debt 91 Corp? Yes Owed to or by: Barbara A Ziarko 13805 Deepwood Ct. Sterling Heights, MI 48312	4. Type: loan 5. Date Debt Was Incorred: 05/01/05 6. Original Amount of Debt: \$ 600.00	\$ \$ \$	\$	\$_600.00
If benk loan, name of endorser or guerantor:		Am	ount Endorsect \$ _	
Owed to or by: Barbara A. Ziarko 13805 Deepwood Ct. Sterling Heights, MI 48312	5. Date Debt Was Incomed: 10/01/17 6. Original Amount of Debt: 2,000.00	\$.	\$ 2,000.00 PORGIVEN
If bank loan, name of endorser or guarantor:		Ar	nount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type: 5. Desc Debt Was lecurred: 6. Oriotisel Amount of Debt: 8	\$ 	\$	\$
If benit logn, name of endorser or guarantor.		^	mount Endorsed: \$	
(0	complete on less page of Schedule	Grand Yabi	of all Schedules 15 or all Schedules 15 or to the committee)	Enter this total on tine 129 *Ower
A debt or obligation must be shown on this Sched	ule if there was an outstanding s	smount owed on it at the c	toeing date of	by" or line 12b "owed to" of the

this Campaign Statement or it was forgiven during the period covered by this Campaign Statem

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