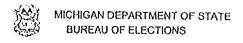


CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed the treasurer (or designated record keeper) and cand	Igned by	3. This Statement covers From	^{n:} 01/01/19	07/00/	4.6
1. Committee I.D. Number		4. Candidate Last Name		to 07/20/	~~~~
138881	1	PREVITI		STIAN	М.I. S
0.0	1	4a. Office Sought Including Di			
2. Commiltee Name		WASHINGTON TOWN			· · · · · · · · · · · · · · · · · · ·
CTE SEBASTIAN PREVITI FOR TRUSTEE	≣	4b. County of Residence MA	СОМВ		liéin
5. Committee's Mailing Address 61614 COTSWOLD DRIVE		6. Treasurer's Name & Reside	ential Address		100
WASHINGTON, MI 48094		SEBASTIAN PREVI			
10001		61614 COTSWOLD WASHINGTON, MI	DRIVE	ro E	
		***************************************	40094	्री हें।	්
Area Code and Phone (586) 206-5185				<u> </u>	
If the address in this box is different from the committe mailing address on the Statement of Organization, mai	il mou			F.C.	25 1
oe sent to this address by the filing official.	ili Illay	Area Code & Phone (586) 2	06-5185		on to
7. Treasurer's Business Address		8. Designated Record Keeper	's Name and Addi	ess (If the commit	ee ha s a
SEBASTIAN PREVITI 61614 COTSWOLD DRIVE		Designated Record Keeper) SEBASTIAN PREVI	TI		ministration of the state of th
WASHINGTON, MI 48094		61614 COTSWOLD	DRIVE		1 42,45
	'	WASHINGTON, MI	48094		•
(E96) 000 E40F	İ				
Area Code and Phone (586) 206-5185		Area Code and Phone (586	3) 206-5185		 ,
9. TYPE OF STATEMENT	Required ONL	Y if candidate	9e. Dissolution	of Candidate Cor	nmittee
Pre-Election OR 9b. Post-Election	is not on the b current year:	allot for the	By checking	this item I/We cert	ify any outstanding debt
Pre-Election or Post-Election Statement relates to:	outlone your.		TOV OISCDAFGED AT	AA AAC AGMINININI	or his or her spouse is here longer collectible from
Primary	☑July Quarter	iy	the committee,	he committee has sor has any ousta	no oustanding assets
General	October Qua	arterly	Further if the die	colution connet be	granted, that this be
Convention			considered a requ	uest for the Reporti	ng Waiver.
Special 9c.). [[] Annual (Statement ()			
School	LAnnual (Coverage Year	Effectiv	e date of dissolution	n
Caucus 9d	Amendr	nent to Campaign Statement			•••
	(Comple	ele Item 9a, 9b, 9c or 9e to which Statement is being	Note: The dispos	ition of residual for	nds must be reported on
	amende	d.)	Schedule 1B and	I the Summary Pag	e.
Date of Election, Convention or Caucus					
 Verification: I/We certify that all reasonable diligence mylour knowledge and belief the contents are true, according 	e was used in urale and com	the preparation of this statement plete.	ent and altached s	chedules (if any) ar	nd to the best of
Current Treasurer or Designated Record keeper SEBASTIAN S. P.	REVITI,	- TO 13	4	7/	/25/2019
Type or Print Name	·································	Signature		— Date	
Candidate SEBASTIAN S. PREVIT	1	At /in	<u> </u>	Date7/	/25/2019
Type or Print Name		Signature		D 41.0	



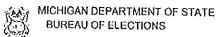
1. Committee I.D. Number 138881

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SUMMARY PAGE **CANDIDATE COMMITTEE**

2. Committee Name CTE SEBASTIAN PREVITI FOR TRUSTEE

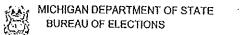
RECEIPTS	Column I	Column II
3. Contributions	This Period	Column II Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) § 13,275.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c, Subtotal of "Contributions"	(3c.) \$	(18.)\$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>\$13,275.00</u>	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$5,862.00	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$5,862.00	(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$	
b. Unitemized (less than \$50.01 each - no Schedule)		
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(10b.)\$	
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$	(24.) \$
a. Owed by the Committee (Schedule 1E)	(12a.) \$	
b. Owed to the Committee (Schedule 1E)	(12b.)\$ \$16,639.97	
	BALANCE STATEMENT	
 Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 	(13.) \$ \$10.92	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ \$13,275.00	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ \$13,285.92	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.)- \$ \$5,862.00	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$7,423.92	•



CANDIDATE COMMITTEE

1. Committee I.D. Number 138881

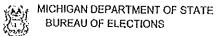
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/20/2019 Name & Address: JOE CARADONNA 5801 LOCKWOOD DRIVE WASHINGTON, MI 48094	_{\$} 1000	_{\$} 1000
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation CEO Employer GIO-CON LLC	Oldk Hold	or Mento Remization
Business Address 5801 LOCKWOOD DRIVE - WASHINGTON, MI 48094		
Type of Contribution: Direct Loan from a person V Fund Raiser		Manual large program (West his arrest program (Alberta and Alberta
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5-20-19 Name & Address		
TONY GALLO 6303 26 MILE ROAD WASHINGTON, MI 48094	_{\$} 500	<u>\$ 500</u>
5. If over \$100.00 cumulative, please provide:	Click Here for	or Memo Itemization
Occupation CEO Employer GALLO COMPANIES	·	
Business Address 6306 26 MILE ROAD, WASHINGTON, MI 48094		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 5-20-19	See a geographic and the second s	
SALVATORE LEONE 61251 BURNINGWOOD WASHINGTON, MI 48094	_{\$} 180	ş 180
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
OccupationEmployer SELF-EMPLOYED		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 5-20-19		
MIKE KLIEMAN 13400 30 MILE ROAD WASHINGTON, MI 48094	_{\$} 80	_s 80
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here fo	r Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser		
Page Subtotal	\$1,760.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule) Page	Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number 138881

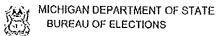
Enter contributor's name and address. If contribution is from an Individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/20/20 1 9 Name & Address: DR. SALVATORE VENTIMIGLIA 57162 MOONCREEK CT WASHINGTON, MI 48094	_s 80	s 80
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here for	or Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5-20-19 DON BROWN	**************************************	nn yn maenteillitheir weren sie - Lathidele en en en san de siede een
45463 CARRIAGE HILLS DRIVE WASHINGTON, MI 48094	ş <u>50</u>	<u>\$ 50</u>
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 5-20-19 Name & Address:		
DOMENICO GAGLIO 60550 KITTLE ROAD WASHINGTON, MI 48094	_{\$} 50	_{\$} 50
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer SELF-EMPLOYED		
Business Address		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 5-20-19 ROSE IACOBACCI		and the state of t
78672 PEARL DRIVE ROMEO, MI 48065	_{\$} 500	_{\$_} 500
5, if over \$100,00 cumulative, please provide:		
Occupation SELF EMPLOYED	Click Here for	Memo Itemization
Business Address 48572 VAN DYKE - SHELBY TWP., MI 48315		
Type of Contribution: Direct Loan from a person V Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 2 of 17	\$680.00 Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number 138881

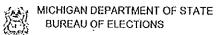
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/20/20 (*) Name & Address: RUTH HEIDLEBREICHT 350 SALEM DRIVE	E 90	500
ROMEO, MI 48065	_{\$} 580	_{\$} 580
5. If over \$100,00 cumulative, please provide: Occupation SELF-EMPLOYED Employer MITTT TV	Click Here fo	or Memo Itemization
Business Address 350 SALEM DRIVE - ROMEO, MI 48065		
Type of Contribution: Direct Loan from a person V Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5-20-19 Name & Address	 Quantities of the control of the contr	
ANGIE MILANA 326 MAE COURT ROMEO, MI 48065	<u>\$ 100</u>	_{\$} 100
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
OccupationEmployer_RETIRED		
Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 5-20-16		
MICHAEL FILLBROOK 7320 37 MILE ROAD BRUCE, MI 48065	§80	ş <u>80</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 5-20-19		
GIORGIO MARCHESE		
25854 IVANHOE HARPER WOODS, MI 48070	_{\$} 50	_{\$} 50
5. If over \$100.00 cumulative, please provide:		
Occupation SELF EMPLOYED	Click Here for	Memo Itemization
Business Address 48572 VAN DYKE - SHELBY TWP., MI 48315		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$810.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		-]
Page 3 of 17	Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number 138881

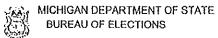
Enter contributor's name and address. If contribution is from an Individual, enter last name, first na middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	ime, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/20/20 9 ROSE CAMPI 49320 SHERIDEN CT.		amanganinga at at at ang
SHELBY TOWNSHIP, MI 48315	_{\$} 500	_{\$} 500
5. If over \$100.00 cumulative, please provide:	Ottobelland	. \$
OccupationEmployer_RETIRED	——- Click Here to	r Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5-20-19 Name & Address		
VITO IACONA 46341 PALMER DRIVE SHELBY TOWNSHIP, MI 48315	_{\$} 100	ş 100
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
OccupationEmployer_RETIRED		
Business Address	-	
Type of Contribution: Direct Loan from a person V Fund Reiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 5.20 - 19		
JOHN DELL'ISOLA	100	400 :
52611 ARAGON SHELBY TOWNSHIP, MI 48315	<u>\$ 100</u>	<u>\$ 100 </u>
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation ENGINEER Employer PEA ENGINEERS		monto itomization
Business Address 2430 ROCHESTER CT - TROY, MI 48083		
Type of Contribution: Direct Loan from a person Fund Raiser	-	
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 5-20-19		The state of the s
PINO GENOVESE		
13160 LACH DRIVE	_s 100	100
SHELBY TOWNSHIP, MI 48315	\$ 100	<u>\$ 100</u>
5. If over \$100.00 cumulative, please provide:	Ollote I I and for	6.2
Occupation Employer RETIRED	Glick Here for	Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser		
Page Si	ubtotal \$800.00	
Grand Total of All Schedul		
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Page 4 of //	line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number ______138881

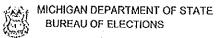
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/20/2019 Name & Address: FRANK ARAGONA		an managama maganas sa antaka da mada managama panga panga a sa
3321 VINEYARD HILL ROCHESTER, MI 48307	_{\$} 250	_{\$} 250
5. If over \$100.00 cumulative, please provide:	~	
OccupationSELF-EMPLOYED	Click Here for	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 5.20-19 Name & Address	a and the second	andre die Gebeure zu eine er eine gegen gegen zu eine er eine der er bei der bij dem gegen gegen der eine der
PAUL ARAGONA 5440 ORION ROAD ROCHESTER, MI 48307	_{\$} 250	<u>\$ 2</u> 50
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
OccupationSELF EMPLOYED		
Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 5 - 20 - 19 Name & Address:	Charles and the sufficient and t	
STEPHEN ZERVOS 24724 SOUTHFIELD ROAD SOUTHFIELD, MI 48034	ş250	_{\$} 250
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation OWNER Employer ZERVOS INSURANCE GROUP		
Business Address 24724 SOUTHFIELD ROAD - SOUTHFIELD, MI 48034		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 5-20-19		And the state of t
CINZIA FILIPOWSKI		
60480 CAMPGROUND WASHINGTON, MI 48094	<u>\$250</u>	_{\$_} 250
5. If over \$100.00 cumulative, please provide:		
Occupation OWNER Employer CAMPGROUND PEDIATRICS	Click Here for	Memo Itemization
Business Address 60480 CAMPGROUND, WASHINGTON, MI 48094		
Type of Contribution: Direct Loan from a person V Fund Raiser		
Page Subtotal	\$1,000.00	
Grand Total of All Schedules 1A		
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CANDIDATE COMMITTEE

1. Committee I.D. Number 138881

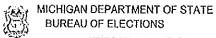
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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address: GORDON WILSON		n varan en manuten en e
49572 COMPASS POINT	-	r= A
CHESTERFIELD, MI 48051	_s 50	_s 50
5. If over \$100.00 cumulative, please provide:	·	or Memo Itemization
Occupation Employer		N WOMO HOME AND H
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address		
STEVE PANGORI	hari 🙉	
8106 ROSEBUD	_{\$} 50	_s 50
CLARKSTON, MI 48099	·	V
5. If over \$100.00 cumulative, please provide:	Click Here fo	r 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 05/20/19 Name & Address:		
FRANK MARELLA		
35979 CARLISLE COURT	_s 50	_s 50
CLINTON TOWNSHIP, MI 48038	3	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address	i tamini kalangangan dan dan saman kanangan penganan kanangan saman saman kanangan saman saman saman saman sam	
VINCE MANZELLA		
39999 GARFIELD ROAD	50	EO
CLINTON TOWNSHIP, MI 48038	_{\$} 50	_{\$} 50
5. If over \$100.00 cumulative, please provide:	Click Here to	r Memo Itemization
OccupationEmployer	Chor Hole to	
Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser		
Page Subtotal	\$200.00	
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Grand Total of All Schedules 1A (Complete on last page of Schedule)		
Page 6 of 17	Enter this total on line 3a of Summary Page.	,



CANDIDATE COMMITTEE

1. Committee I.D. Number 138881

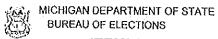
Enter contributor's name and address. If contribution is from an individual, enter last name, first middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	t E	. Cumulative for lection Cycle for Each contributor (Through ate of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address: JOE LUCIDO 39999 GARFIELD ROAD CLINTON TOWNSHIP, MI 48038	_s 50	_{\$} 50
5. If over \$100.00 cumulative, please provide:	·	
Occupation Employer	Click Here for N	lemo Itemization
Business Address	·	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address	And the second service and a support of the second	
LEO RUSSO 16431 DOMINION ROAD MACOMB, MI 48044	_{\$} 50	_s 50
5. If over \$100.00 cumulative, please provide:	Click Here for M	emo Itemization
Occupation Employer	-	
Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address:		
WAYNE OEHMKE 17610 21 MILE ROAD MACOMB, MI 48044	_{\$} 50	<u>\$</u> 50
5. If over \$100.00 cumulative, please provide:	Click Here for Me	emo Itemization
Occupation Employer		
Business Address	_	
Type of Contribution: Direct	er til framer skrivet skrive i framer skrivet skrivet skrivet fra fra fra skrivet skrivet skrivet skrivet skri	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address ROSA BONNI 45820 TILCH	 _s 50	50
MACOMB, MI 48044	\$ 50	_{\$_} 50
5. If over \$100.00 cumulative, please provide:	Click Horo for NA	oman fhausi-alian
Occupation Employer	Click Here for Me	erno itemization
Business Address Type of Contribution: Direct Loan from a person V Fund Raiser	_	
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CANDIDATE COMMITTEE

1. Committee I.D. Number 138881

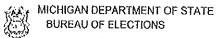
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address: SANTINO LUPO 5848 BONN CT	ii igaa taa saadaa ah a	and the second s
SHELBY TOWNSHIP, MI 48315	_s 50	_s 50
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 05/20/19 Name & Address	a na tanàna dia kaominina mpikambana ao	
JOEL BALLOR 50383 HEATHERWOOD SHELBY TOWNSHIP, MI 48315	ş <u>50</u>	ş 50
5. If over \$100.00 cumulative, please provide:	Click Here fo	r 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 05/20/19		OR THE STATE OF TH
LISA D'AGOSTINI 20151 WALKER DRIVE STERLING HEIGHTS, MI 48312	<u>\$50</u>	_{\$} 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		NAMES OF THE PROPERTY OF THE P
3. Contribution #4 PAC Receipt? YES 4, Date of Receipt 05/20/19 Name & Address LUIGI MANCINI		
49422 MONTE ROAD CHESTERFIELD, MI 48051	_{\$} 50	_{\$} _50
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here for	Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$200.00 Enter this total on line 3a of Summary Page.	A Marie Control of Marie Control of Assessment Control of Assessme



1, Committee I.D. Number ___138881

CANDIDATE COMMITTEE

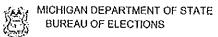
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.					6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)	
3. Contribution # 1 Name & Address: VITO PIANELLO			YES 4. Date of F	Receipt	05/20/19		
39212 BOURNE SHELBY TOWN		243	:		,	_s 50	° 50
						\$ 00	\$ 00
5. If over \$100.00 cumu					•	Click Here for	or Memo Itemization
			Employer				
Business Address							
Type of Contribution:	Direct		Loan from a person		Fund Raiser		
Contribution #2 Name & Address	PAC Receipt?		YES 4. Date of R	eceipt	05/20/19	•	
MICHAEL TALL						5 0	
13321 TOWERING SHELBY TOWN		318	5			_{\$} 50	<u>\$ 50</u>
5. If over \$100.00 cumu						Click Here fo	r Memo Itemization
Occupation		En	ployer				
Business Address							
Type of Contribution:	Direct		Loan from a person	V	Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?		YES 4. Date of F	Receipt	05/20/19	en e	igg stade de la magella give la governa estador de policia de se a su papa por una se resultada de la magella d
BRIAN PANNEB 30151 RIVERSI						_s 50	_s 50
HARRISON TWI						V	\$ 00
5. If over \$100.00 cumu	lative, please pro	vide	I			Click Here for	Memo Itemization
Occupation		. 8	mployer				
Business Address							
Type of Contribution:	Direct	<u> </u>	Loan from a person	V	Fund Raiser		
3, Contribution # 4 Name & Address	PAC Receipt?		YES 4. Date of	Recelp	05/20/19		
LYLE WINN 62263 HIDDEN (JVKIVVE					FF 6	
CLINTON TOWN		03	8			<u>\$50</u>	_s 50
5. If over \$100.00 cumu	·						V
Occupation Employer			Click Here for	Memo Itemization			
Business Address							
Type of Contribution:	Direct		Loan from a person	V	Fund Raiser		
		e distribution		in the same of the same	Page Subtotal	\$200.00	
				Gran	d Total of All Schedules 1A		-
			(C		e on last page of Schedule)	Enter this total on	Ţ
Page 9 of 17						line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number 138881

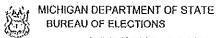
Enter contributor's name and address. If contribution is from an individual, enter last name, firm middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	st name, 6. Amount 7. Cumulative for dent Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address: MIKE NICELY 60440 VAN DYKE WASHINGTON, MI 48094	_s 50 _s 50
5, if over \$100.00 cumulative, please provide:	\$ 5 5
Occupation Employer	Click Here for Memo Itemization
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	·
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address	
JASON ARLOW 5709 ARNOLD TROY, MI 48083	ş <u>50</u> ş 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 V Fund Raiser	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address:	
MARY ANN RIZZA 78000 PEARL DRIVE ROMEO, MI 48065	\$80 <u>\$80</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 V Fund Raiser	·
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address	The state of the s
VITO GIAMBANCO 16500 DAWN COURT CLINTON TOWNSHIP, MI 48038	_{\$} 80 _{\$} 80
5. If over \$100,00 cumulative, please provide:	
Occupation Employer	Click Here for Memo Itemization
Business Address	
Pa	ge Subtotal \$260.00
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CANDIDATE COMMITTEE

1. Committee I.D. Number _____138881

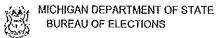
Enter contributor's name and address. If contribution is from an individual, enter last name, first name middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	me, 6. Amount	7, Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address: JOSEPHINE DEMARIA		A COLUMN TO THE PARTY OF THE PA
33901 JEFFERSON	9 <u>0</u>	90
ST. CLAIR SHORES, MI 48080	_{\$} 80	_{\$} 80
5. If over \$100.00 cumulative, please provide:	Click Hore	for Memo Itemization
Occupation Employer	——————————————————————————————————————	FIOI Memo dellization
Business Address	_	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address		ethiologia (a. 1900) ethiologi
MARYANN ORLANDO		
49548 GOLDEN PARK	_{\$} 80	_s 80
SHELBY TWP., MI 48315	* <u></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 V Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address:		
FRANCO SOLINA		
21412 SIENNA DRIVE	_s 80	_s 80
MACOMB, MI 48044	<u> </u>	<u> </u>
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Employer		
Business Address	_	
Type of Contribution: Direct		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address		
JOSEPHINE SCIBILIA		
45810 WINTHROP PLACE	_{\$} 80	ູ 80
MACOMB, MI 48044 5. If over \$100.00 cumulative, please provide:	3	_ \$
	Click Here	for Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser	_	
Page St	ubtotal \$320.00	
	402,0100	
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CANDIDATE COMMITTEE

1. Committee I.D. Number 138881

Enter contributor's name and address. If contribution is from an Individual, enter last name, first name, middle initial. Check box to Indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address: JOSEPH VIVIANO 16239 DUNSTON	_	
MACOMB, MI 48044	_s 85	_s 85
5. If over \$100,00 cumulative, please provide:	V	
Occupation Employer	Click Here	for Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address		
MIKE ARCY 30456 JEWELL WASHINGTON, MI 48094	<u>\$</u> 80	ş 80
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 05/20/19	A CONTRACTOR OF THE CONTRACTOR	
Name & Address: 357.257.15		
13239 KOZAK	_s 100	_s 100
STERLING HEIGHTS, MI 48312	<u> </u>	_
5. If over \$100,00 cumulative, please provide:	Click Here f	or Memo Itemization
OccupationEmployer RETIRED		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address		A SA A MARANAN (A MARANAN MARA
SANDRA TORNBERG		
53794 WHITBY WAY	_s 100	. 100
SHELBY TWP., MI 48315	\$ <u>-</u>	_ \$ <u></u>
5. If over \$100.00 cumulative, please provide:	Click Here f	or Memo Itemization
OccupationEmployer RETIRED		
Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser		:
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Page 12 of 17	line 3a of Summa Page.	



CANDIDATE COMMITTEE

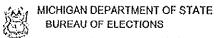
1. Committee I.D. Number __138881

2. Committee Name CTE SEBASTIAN PREVITI

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7, Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address: EDWARD MORIDIAN		
10405 UTICA ROAD STERLING HEIGHTS, MI 48312	_s 100	ر 100
	\$ 100	\$ 100
5. If over \$100.00 cumulative, please provide: Occupation PROJECT MANAGER Employer GEN-CO	Click Here fo	or Memo Itemization
Business Address 1220 23 MILE ROAD - MACOMB, MI 48044		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address		
MARY LOU PENNA		
38840 VAN DYKE	_{\$} 100	_s 100
STERLING HEIGHTS,. MI 48312	-	T
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation OWNER Employer PENNA'S		
Business Address 38840 VAN DYKE - STERLING HEIGHTS, MI 48312		
Type of Contribution: Direct Loan from a person V Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/20/19	CARROLL CONTRACTOR OF THE STATE	
Name & Address: JOE ORAM		
2187 ORCHARD LAKE	_s 100	_s 100
SOUTHFIELD, MI 48034	<u> </u>	\$ 100
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation ATTORNEY Employer SELF EMPLOYED		
Business Address 2187 ORCHARD LAKE - SOUTHFIELD, MI 48034		
Type of Contribution: Direct Loan from a person Fund Raiser	_	
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address		
SONNY RANDAZZO 37180 WILLOW LANE	4.0.0	
CLINTON TOWNSHIP, MI 48036	_{\$} 100	_s 100
5. If over \$100,00 cumulative, please provide:		. *
Occupation SELF EMPLOYED Employer RANDAZZO FRESH MARKET Click Here for Men		
Business Address 3660 GARFIELD, CLINTON TOWNSHIP,MI 48036		
Type of Contribution: Direct Loan from a person V Fund Raiser		
Page Subtotal	\$400.00	
Grand Total of All Schedules 1A		1
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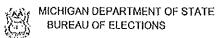


CANDIDATE COMMITTEE

1. Committee I.D. Number

138881

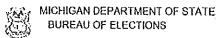
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6, Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address: ROB HUTH	ALTERNA NAME AND	
19500 HALL ROAD	400	400
CLINTON TOWNSHIP, MI 48038	<u>\$ 100</u>	_{\$} 100
5. If over \$100.00 cumulative, please provide:	Click Hara fo	r Memo Itemization
Occupation ATTORNEY Employer SELF-EMPLOYED	Onch Fictorio	Wello Remization
Business Address 19500 HALL ROAD - CLINTON TOWNSHIP, MI 48038		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address		
ROBERT KIRK		
19500 HALL ROAD	_s 100	, 100
CLINTON TOWNSHIP, MI 48038	\$	3
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation ATTORNEY Employer SELF EMPLOYED		
Business Address 19500 HALL ROAD- CLINTON TOWNSHIP, MI 48038		
Type of Contribution: Direct Loan from a person V Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address:		
ROBERT SIEBERT	450	
19500 HALL ROAD	_{\$} 150	_s 150
CLINTON TOWNSHIP, MI 48038		Y
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation ATTORNEY Employer SELF EMPLOYED		
Business Address 19500 HALL ROAD - CLINTON TOWNSHIPM MI 48038		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address	<u> Майлічна при печання при печання біблічна при дорга д</u>	
LARRY ROCCA		
19790 NICKE STREET	100	400
CLINTON TOWNSHIP, MI 48038	<u>\$100</u>	<u>\$ 100</u>
5. If over \$100.00 cumulative, please provide:	Clink Horn for	Mama Itamiratian
Occupation COUNTY TREASURER Employer MACOMB COUNTY	CHON FIGHE 101	Memo Itemization
Business Address 34 MARKET STREET - MT. CLEMENS, MI 48043		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$450.00	Marie Control of the
Grand Total of All Schedules 1A		-
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Page 14 of 17	Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number 138881

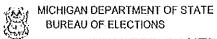
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address: MIKE CHIRCO 46600 ROMEO PLANK	350	350
MACOMB, MI 48044	_{\$} 350	_{\$} 350
5. If over \$100,00 cumulative, please provide: Occupation SELF EMPLOYED Employer MJC COMPANIES	Click Here fo	or Memo Itemization
Business Address 46600 ROMEO PLANK - MACOMB, MI 48044		
Type of Contribution: Direct Loan from a person V Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address		
PETE LUCIDO 39999 GARFIELD CLINTON TOWNSHIP, MI 48038	_{\$} 250	ş 250
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation STATE SENATOR Employer STATE OF MICHIGAN		
Business Address 39999 GARFIELD - CLINTON TOWNSHIP MI 48038		
Type of Contribution: Direct Loan from a person V Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address:		
JAMES BIONDO	_s 250	250
56390 BIRKDALE MACOMB, MI 48044	\$ 200	_{\$} 250
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation SELF EMPLOYED Employer BIONDO CEMENT		•
Business Address 21540 23 MILE ROAD - MACOMB MI 48044		
Type of Contribution: Direct		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address		
FILOMENA VITALE		
64646 TURNBERRY WAY WASHINGTON, MI 48094	_{\$} 250	_{\$} _250
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer HOUSEWIFE	Click Here for	Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser		
Page Subtotal	\$1,150.00	
Grand Total of All Schedules 1A		
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1. Committee I.D. Number 138881

CANDIDATE COMMITTEE

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address: FAYE PREVITI 46474 JACKSON DR		
MACOMB, MI 48044	_s 150	¸150
5. If over \$100.00 cumulative, please provide:	*	V
OccupationRETIRED	Click Here for	or Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Ralser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address	1. Enter Children Character and Children Childre	
LOU GUGLIELMENTI 39999 GARFIELD	_s 130	ູ 130
CLINTON TOWNSHIP, MI 48038	\$ 100	\$ 100
5. If over \$100.00 cumulative, please provide: Occupation ACCOUNTANT Employer SELF EMPLOYED	Click Here fo	r Memo Itemization
Business Address 39999 GARFIELD - CLINTON TOWNSHIP MI 48038		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address:		
MARTIN SHKRELI 24000 30 MILE ROAD WASHINGTON, MI 48095	<u>\$100</u>	ş 100
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation SELF-EMPLOYED		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 05/20/19	Action (a British of the Control of South Control of C	ete Madidage generale i grande en de la Maria de l
Name & Address JOSEPH LONGO		
27630 SYLVAN	100	400
WARREN, MI 48080	_{\$} 100	<u>\$ 100</u>
5. If over \$100,00 cumulative, please provide:	Olinic I Ioan fac	• \$ \$ = = = = f = = = f = = = f = = =
Occupation JUDGE Employer FERNDALE COURT	Olick Here to	r Memo Itemization
Business Address		After the second
Type of Contribution: Direct Loan from a person V Fund Raiser		
Page Subtotal	\$480.00	A STATE OF THE STA
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
Page 16 of 17	line 3a of Summary Page.	



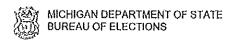
CANDIDATE COMMITTEE

2. Committee Name CTE SEBASTIAN PREVITI

Enter contributor's name and address. If contribution is from an individual, enter last name, first name,	6. Amount	7. Cumulative for		
middle initial. Check box to Indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		Election Cycle for Each Contributor (Through date of receipt)		
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address: SANDY PREVITI	nomencus Zindo, N. die V. 1800. sp. of The Fifth (S. Zight Art Zindo)	Anna Marian Con Princip Con Maria Con		
15644 BOREAS DRIVE MACOMB, MI 48044	_{\$} 1000	_{\$} 1000		
5. If over \$100.00 cumulative, please provide:				
OccupationEmployer RETIRED	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 05/20/19		And the state of t		
Name & Address DAVID LeDUC				
3108 MARTELL ROCHESTER HILLS, MI 48089	ş <u>1000</u>	_{\$} 1000		
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization		
Occupation TEACHER Employer WATERFORD SCHOOLS	·			
Business Address				
Type of Contribution: Direct Loan from a person				
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address:		·		
SALVATORE PREVITI				
15644 BOREAS DRIVE	<u>\$ 1000</u>	s 1000		
MACOMB, MI 48044	Click Here for Memo Itemization			
5. If over \$100.00 cumulative, please provide:	Ollok Fisio (c	THORIO ROMAZOROM		
OccupationEmployer				
Business Address				
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 05/20/19 Name & Address				
ANNA LeDUC				
3108 MARTELL ROCHESTER HILLS, MI 48089	_{\$} 1000	_{\$} 1000		
5. If over \$100.00 cumulative, please provide:				
Occupation Employer HOUSEWIFE	Click Here to	r Memo Itemization		
Business Address				
Type of Contribution; Direct Loan from a person Fund Raiser				
Page Subtotal	\$4,000.00			
Grand Total of All Schedules 1A (Complete on last page of Schedule)	13,275,00			
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Page 17 of 1/

Page.



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

13881

2. Commillee Name CTE SEBASTIAN PREVITI FOR TRUSTEE

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name ITALIAN CULTURAL CENTER		05/20/19	s 1440
Address	Purpose: BANQUET HALL -DINNER	Date	V 1110
43843 ROMEO PLANK	·		
CLINTON TOWNSHIP, MI 48038	Click	Here for Memo	Itemization Type
✓ Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	•	
Expenditure #2			
Name NOELLE MORABITO		05/20/19	\$ 4 50
A 11	Purpose: ENTERTAINMENT-PIANO	Date	\$ 400
Address 7261 RENWOOD	Purpose:		
WASHINGTON, MI 48095	Click I	Here for Memo I	temization Type
777.07.11.10.701.1, 1111.70000	Check box if this expenditure is payment of		
V Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3	Sidlemen	***	
Name US FLAGS.COM		5544545	
USTEAGS.COM		06/15/19	\$456
Address	Purpose: US FLAGS FOR CONSTITUENTS	Date	
WEBSITE	Click I	lere for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
Expenditure #4	stalement		•
Name ROMEO PRINTING			
ROMEO FRINTING		05/03/19	s 1016
Address	Purpose: NEWSLETTER PRINTING	Date	
225 N. MIAN STREET			
ROMEO, MI 48065		Here for Memo I	temization Type
 	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name GRAPHICS EAST		05/20/19	
Address	Purpose: MAILING OF NEWSLETTER	Date	\$ <u>2500</u>
11550 GROESBECK	r uipose,		
ROSEVILLE, MI 48066	l ——	Here for Memo	Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement	·····	
	Subte	otal this page	\$5,862.00
	Grand Total of all		\$5,862.00
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DEBTS AND OBLIGATIONS	ż
SCHEDULE 1E	

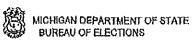
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This Schedule Hamizes:			A A A A A A A A A A A A A A A A A A A	110
Debts and obligations owedby or forgiven the com (Che	unittee OR b. Debts ok alther a or b. Use only for the pu	s and obligations owed <u>to</u> or rpose checked.)	r forgiven <u>by</u> the cor	nmillee.
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Chack 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 emount of debt	7. Date and amount of each payment	8, Cumulative payment to date on debt	9. Outstanding Belance at close of this period (Item 6 minus Item 8)
Debt#1 Corp? Yes Owed to or by: SEBASTIAN S. PREVITI	4. Type: LOAN	<u> </u>		
8903 INVERNESS DRIVE	5. Date Debi Was Incurred:	<u></u>		
WASHINGTON, MI 48095	05/16/12	<u> </u>	<u> </u>	\$ 20.00
	8. Original Amount of Debl	\$		
	\$ 20.00	\$		FORGIVEN
if bank loan, name of endorser or guarantor:			ount Endorsed: \$	
Debt #2 Corp? Yes Oved to or by:	4. Type: LOAN	8		
SEBASTIÁN S. PREVITI 8903 INVERNESS DRIVE	5. Date Debt Was Incurred:	<u> </u>		
WASHINGTON, MI 48095	05/23/2012 6. Original Amount of Debt:	\$		¢ 1,652,50
-	s 1,652.60	\$	· \$	4
	\$ 1,002.00	\$		FORGIVEN
If bank loan, name of endorser or guarantor;			nount Endorsed: \$-	
Debt #3 Corp7 Yes	4, Type: LOAN	1	Partit Established. V-	
Owed to or by: SEBASTIAN S. PREVITI		<u> </u>		
8903 INVERNESS DRIVE	5. <u>Date Debt Was Incurred</u> : 08/15/2012	\$		
WASHINGTON, MI 48095	6. Original Amount of Debt:	<u> </u>		s 1,042.00
	1,042.00	\$, 2	
	\$ 1,042,00	5		FORGIVEN
If bank loan, name of endotest of guarantor:		A	mount Endorsed: \$	
A CONTRACTOR OF THE PROPERTY O	C. Broom State College State C	Page Sublota	i (Outstanding debt)	\$2,714.50
(6	Complete on last page of Schedule	Grand Total showing amounts owed by	of all Schedules 1E or to the committee	
·				Enter this total on line 12a *ower

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.

by or line 12b lowed to of the Summary Page

Page 1 of 5



DEBTS AND OBLIGATIONS	1. Committee J.D. Number 138881
SCHEDULE 1E CANDIDATE COMMITTEE	2. Committee Name CTE SEBASTIAN PREVITI FOR TRUSTEE
This Schedule Itemizes:	
Debis and obligations owed by or forgiven it	ne committee OR b. Debts and obligations owed to or forgiven by the committee. (Check either a or b. Use only for the purpose checked.)

This Schedule Itemizes:	PANNSHINONOMAN AND AND AND AND AND AND AND AND AND A	The second second	**************************************	
Debts and obligations owed by or forgiven the	committee OR b, Debt Check either a or b. Use only for the pu	is and obligations owed <u>to</u> c urpose checked,)	v forgiven by the cor	nmittee.
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to Indicate whether debt is awed to an incorporated business. If debt is a bank loan, plea provide information regerding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred	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)
Dabt #1 Corp? Yes Owed to or by: SEBASTIAN S. PREVITI 8903 INVERNESS DRIVE WASHINGTON, MI 48095	4. Type: LOAN 5. Date Debt Was Incurred: 07/01/12 6. Original Amount of Debt: \$_310.00	\$ \$ \$	\$	\$ 310.00 FORGIVEN
If benk loan, name of endorser or guarantor.		Am	ount Endorsed: \$ _	
Debt#2 Com? Yes Owed to or by: SEBASTIAN S. PREVITI 8903 INVERNESS DRIVE WASHINGTON, MI 48095	4. Type: LOAN 5. Date Debt Was Incurred: 07/20/2012 6. Original Amount of Debt: \$ 74.06	\$\$\$	\$	\$ 74.06
If bank loan, name of endorser or guerentor;		Av	nount Endorsed; \$	
Debt#9 Coip? Yes Owed to or by: SEBASTIAN S. PREVITI 8903 INVERNESS DRIVE WASHINGTON, MI 48095	4. Type: LOAN 5. Pate Pebt Was Incurred: 07/21/2012 6. Oddinal Amount of Pebt: \$ 225.00	\$ \$ \$ \$	\$	\$ 225.00 Forgiven
If bank loan, name of endoreer or guaranter:		Α Α	mount Endorsed: \$_	
	(Complete on last page of Schedule	ŕ	i (Outstanding debt) of all Schadules 1E	\$609.06
A Address of the Allers of the	Combine on the ball of animals	amount and a	VI (V II W COMMISSION)	Enter this total on line 12a "owed by" or line 12b

"owed to" of the Summary Page

A dobt 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.

Page 2 of 5



DEBTS AND OBLIGATIONS 1. G	ommittee L.D. Number 13888	81		
SCHEDULE 1E		ASTIAN PREVI	TI FOR TRI	USTEE
CANDIDATE COMMITTEE 2.0	omnance name			
This Schedule Itemizes:				
n Debts and obligations owed by or torgiven the common (Chec	miltee OR b. Debt ck either a or b. Use only for the pu	s and obligations owed to o irpose checked.)	r forgiven <u>by</u> the con	omittee,
3, Name and Maling 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, pleaso provide information regarding the andorsers 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 dabt	9. Outstanding Balance at close of this period (hem 6 minus item 8)
Debt#1 Corp? Yes	4. Type: LOAN	s		
SEBASTIÁN S. PREVITI	5. Date Debt Was Incurred:	<u> </u>		
8903 INVERNESS DRIVE	08/01/12	\$		490.00
WASHINGTON, MI 48095	8. Original Amount of Debt:		\$	\$ 120.00
	s 120.00	<u> </u>		FORGIVEN
	V	§	ı	f feed
If bank loan, name of andorser or gustantor:		Am	ount Endorsed: \$ -	
Debt#2 Corp? Yes	4. Type: LOAN	5	}	
Owed to or by: SEBASTIAN S. PREVITI	5. Date Debt Was Incurred:			
8903 INVERNESS DRIVE	08/06/2012			
WASHINGTON, MI 48095	6. Original Amount of Debt:	\$	2	s 74,06
	s 74.06	\$. •	
	Y	. \$		FORGIVEN
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$-	
Debt #3 Corp7 Yes	LOAN	7,000		T
Owed to or by:	4. Type: LOAN	<u> </u>		
SEBASTIÁN S. PREVITI	5. Date Debt Was Incurred:	<u> </u>		
8903 INVERNESS DRIVE WASHINGTON, MI 48095	05/01/16	\$		\$ 1,482.38
WAGING CH, MI 40000	6. Original Amount of Debi:	\$	I \$	1 \$ 17402.00
	s_1,482.38			FORGIVEN
If bank loan, name of endorser or guarantor:			Amount Endorsed; \$	
is only touth trains of systems of Baseliness		Page Subiot	al (Outstanding debt	\$1,676.44
		-		
(6	Complete on last page of Schedule	shoving emounts owed by	or to the committee	Enter this total

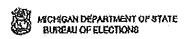
A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

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

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, . . Dec. 16. 2016 9:53AM

Ho. 0235 P. 7



DEBTS AND OBLIGATIONS 1.0	Committee LD, Number 1388	B1			
SCHEDULE 1E	Market Company of the				
CANDIDATE COMMITTEE 2.0	Connected Name OIL OLD	MOTIMIN PREVI	H POK IN	UOICE	
This Schodula Ismicos:					
roo ani nevignot to tel baseo enodegado bna extao[]a (Che	rollise OR b. Ooble ck either a or b. Use only for the pu	s and obligations owed lg or inposes chacked.)	forgiven by the cor	nnittee.	
3. Name and Meiting Address of person, vendor or theretal institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank toan, please provide information regarding the andersers or gueranting. If any.	4. Type of Obligation (Description) 5. Indicate data data was froumed 6. Indicate original amount of data	7. Data and emount of each payment	6, Countables payment to date on debt	9. Outstanding Balance at close of this period (Item 6 natus Item 8)	
Debi #1 Corp? Yes Owed to or by: SEBASTIAN S. PREVITI 8903 INVERNESS DRIVE WASHINGTON, MI 48095	4. Type: LOAN 5. Data Data Was Increase: 07/18/16 6. Original Amount of Data:	\$ \$ \$	\$	\$ 7,760.00	
If bank loan, name of endorser or guarantor:	\$ 7,760.00	\$Amo	tynt Endorsed: \$	FORGIVEN	
Debt #2 Corp? Yes Owed to or by: SEBASTIAN S. PREVITI 8903 INVERNESS DRIVE WASHINGTON, MI 48095	4. Type: LOAN 5. Date Date Was Incurred: 09/15/2016 6. Octobras Amount of Date \$ 2,000.00	\$ \$ \$ \$	\$	\$_2,000.00 ☐FORGIVEN	
If bank loan, name of endorses or guarantor:			ount Endorsed: \$_		
Debt to Copy Copy Yes SEBASTIAN S. PREVITY 8903 INVENTESS D. WASHigh, MI 48095	4. Type: LOAN 5. Pata Dabt Was Israired: 12-1-2016 6. Original Amount of Dabt: 3. 1, 560.	\$	\$	4 IS60.	
If bank loan, hame of endorser or guaranton.		N.	nount Endorsed: \$_		
(0	omplete on lest page of Schodule	Grand Total	(Outslanding debt) of all Schedules (F ir to the committee)	11,310,-	
d class are alstractive cours he whoever an little Calendar	ula 15 likuwa wasaa wa miita kandhen a		natuu daan na	Enter this total on this 12e "owed by" or the 12b	

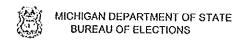
A debt or obligation must be shown on this Schedule II there was an outstanding amount errad on it at the closing date of this Campaign Statement or it was forgiven during the partod covered by this Campaign Statement.

"owed to" of the Summery Page

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	MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS
(Arrel)	Bureau of Elections

DEBTS AND OBLIGATIONS 1. Committee I.D. Number SCHEDULE 1E CANISHDATE COMMITTEE 2. Committee Nume CTE SEBASTIAN PREVITI FOR TRUSTEE This schedule lamber: (Check eliter a or b. Use only for the purpose checked.) 3. Nume and Making Address of person, vendor or (Check eliter a or b. Use only for the purpose checked.) 3. Nume and Making Address of person, vendor or (Check eliter a or b. Use only for the purpose checked.) 3. Nume and Making Address of person, vendor or (Check eliter a or b. Use only for the purpose checked.) 4. Type of Obligation (Description) 5. Indicate whether debt is owed to an incurred				9. Outstanding Bissance at close
Interporated business. If 66bit is a bank loan, plans a provide information regarding the enforcers or gueranion, Very,	6, Indicate original around of debt			flem 8)
Doct 81 Corp? Yes SEBASTIAN S. PREVITI 8903 INVERNESS DR WASHINGTON, MI 48095	4. Type: LOAN 1. Date Date Was Interred: 07/27/17 6. Original Amount of Date: 329.97	3	\$	\$ 928.97
Y bank loan, name of andorser or guarantor;		Ank	Whit Endoneed: \$	
Debt #2 Corp? Yes Cored to or by: # bank toon, name of endorser or guarantor;	4. Type; 5. Date Debt Was Japaned: 6. Oriodatel Amount of Debt	3 5	\$	\$FORGIVEN
Debt \$3 Corp7 Yes			Ount Endoned: 8_	
Owned to or by:	Data Data Was Isosoppi: Orbeinst Amount of Culat		\$	\$FORGIVEN
If bank loan, name of endorser or guerantor. Amount Endorser's				
Page Subtotal (Outstanding debt) \$329.97 (Complete on lest page of Schedule showing emounds owned by or to the committee) Enter this total				\$16,639.97 Enter this total
A sets of obligation stust be shown on this Ecnedule if there was an outstanding amount owed on it at the closing date of "owed to" of the tall this Campaign Statement. by" or line 125 "owed to" of the Summery Page.				"Owed to" of the
Page 5 of 5				



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number

CTE SEBASTIAN PREVITI FOR TRUSTEE

	2. Com	mittee Name OTE SEBASTIAN	PREVIII FOR TRUSTEE
	- USE A SEPARATE SH	EET FOR EACH EVENT	=
3. Date Event Was Held	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.
05/20/19	88	STROLLING DINNER	ITALIAN CULRAL CENTER 43843 ROMEO PLANK CLINTON TOWNSHIP, MI 480 Private Residence
7. Total Contributions	\$13,275.00		
8. Other Receipts	\$0.00		
9. Gross Receipts (Add lines	7 and 8) \$13,275.00		
10. Total Cost of Event (Total Cost includes In-Kind (\$1,890.00 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 S (%)	plit	Expenditure Split (%)
			
PA-91			

		-	
			
period covered by the Receipts and expend	uired to file a separate Fund Raise e Campaign Statement. litures listed on a Fund Raiser Sch zed in-Kind Contributions Schedule	iedule must also he reported o	n the Itemized Contributions
Summary Page.	participated in a joint fund raiser n		·
	, , , , , , , , , , , , , , , , , , , ,	The a fair trained Conede	IN TO BID GYGUL
Page 1 of 1			