



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**CANDIDATE COMMITTEE  
COVER PAGE**

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

3. This Statement covers From: 07/21/19 to 10/20/19

1. Committee I.D. Number

**138663**

2. Committee Name

**CTE Anthony Wickersham**

4. Candidate Last Name

**Wickersham**

First Name

**Anthony**

M.I.

**M.**

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

**Sheriff**

4b. County of Residence **MACOMB**

5. Committee's Mailing Address

**P.O. Box 752**

**Mt. Clemens, MI 48046**

Area Code and Phone (586) 713-8883

If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

6. Treasurer's Name & Residential Address

**Lauren Wickersham**

**72426 Sorrel**

**Bruce Twp., MI 48065**

Area Code & Phone \_\_\_\_\_

7. Treasurer's Business Address

**72426 Sorrel**

**Bruce Twp., MI 48065**

Area Code and Phone (586) 713-8883

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

**S/A**

Area Code and Phone \_\_\_\_\_

**9. TYPE OF STATEMENT**

9a. ☐ Pre-Election OR 9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

☐ Primary

☐ General

☐ Convention

☐ Special

☐ School

☐ Caucus

Date of Election, Convention or Caucus  
\_\_\_\_\_

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

☐ July Quarterly

☒ October Quarterly

9c. ☐ Annual Statement (\_\_\_\_\_) Coverage Year

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

**9e. Dissolution of Candidate Committee**

☐ By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt.

Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Effective date of dissolution  
\_\_\_\_\_

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Record keeper Lauren Wickersham

Type or Print Name

Signature

Date 10-24-19

Candidate Anthony M Wickersham

Type or Print Name

Signature

Date 10-24-19



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 138663

2. Committee Name CTE Anthony Wickersham

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>20,960.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>\$20,960.00</u>	(18.) \$ <u>\$20,960.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u>\$0.00</u>	(19.) \$ <u>\$0.00</u>
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$	<u>\$20,960.00</u>	(20.) \$ <u>\$22,660.00</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>\$5,444.00</u>	(21.) \$ <u>\$5,444.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u>\$0.00</u>	(22.) \$ <u>\$0.00</u>
<b>EXPENDITURES</b>			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>\$7,819.44</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>\$0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>\$0.00</u>	
<b>9. TOTAL EXPENDITURES</b> (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>\$7,819.44</u>	(23.) \$ <u>\$10,434.19</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>\$1,197.60</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>\$75.00</u>	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$	<u>\$1,272.60</u>	(24.) \$ <u>\$26,549.01</u>
<b>DEBTS AND OBLIGATIONS</b>			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>\$0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u>\$0.00</u>	
<b>BALANCE STATEMENT</b>			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>\$37,632.22</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>\$20,960.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>\$58,592.22</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>\$9,092.04</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$	<u>\$49,500.18</u>	*



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 138663

2. Committee Name CTE Anthony Wickersham

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 08/04/19

Name & Address:

Judith Fago  
46524 Country Ln  
Macomb, MI 48044

\$ 100.00

\$ 100.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

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

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt 08/06/19

Name & Address

James A. Santilli  
45668 Lakeview  
Macomb, MI 48044

\$ 300.00

\$ 300.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation CEO Employer Transportation Improvement Association

Business Address 100 E. Big Beaver Rd, Ste 900 Troy, MI 48083

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

3. Contribution # 3

PAC Receipt? ☐ YES

4. Date of Receipt 08/14/19

Name & Address:

Espedito D. Marra  
52874 W Seaton Drive  
Chesterfield, MI 48047

\$ 500.00

\$ 1700.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation Manager Employer J.E.G.

Business Address 220 Victor, Highland Park, MI 48203

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

3. Contribution # 4

PAC Receipt? ☐ YES

4. Date of Receipt 08/19/19

Name & Address

Catherine DeDecker  
29218 Cotton Rd  
Chesterfield, MI 48047

\$ 125.00

\$ 125.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation V.P. Business Manager Employer Spaulding, DeDecker

Business Address 905 S. Blvd., Rochester Hills, MI 48307

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

Page Subtotal \$755.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663  
2. Committee Name CTE Anthony Wickersham

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6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 07/24/19

Name & Address:

Donald Domin  
2128 Kingcross Dr  
Shelby Twp, MI 48316

\$ 125.00 \$ 125.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired 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 07/29/19

Name & Address

Raymond J. DeBuck, Jr.  
48858 Kings Dr  
Shelby Twp, MI 48315

\$ 125.00 \$ 125.00

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer Debuck Construction

[Click Here for Memo Itemization](#)

Business Address 6226 Auburn Ste 1, Shelby Twp, MI 48317

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 08/07/19

Name & Address:

John Kashinsky  
191 North Ave  
Mt. Clemens, MI 48043

\$ 125.00 \$ 125.00

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer Action Insurance Group

[Click Here for Memo Itemization](#)

Business Address 45445 Mound #100, Utica, MI 48317

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 08/04/19

Name & Address

David Lawler  
885 E Gunn Rd  
Rochester, MI 48306

\$ 500.00 \$ 500.00

5. If over \$100.00 cumulative, please provide:

Occupation Business Owner Employer Tank Truck Services

[Click Here for Memo Itemization](#)

Business Address 29150 Dequindre, Warren, MI 48091

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

Page Subtotal \$875.00

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

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 138663  
2. Committee Name CTE Anthony Wickersham

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6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 08/06/19

Name & Address:

Paul Shamo  
13500 Telegraph Rd  
Taylor, MI 48180

\$ 700.00 \$ 700.00

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer Taylor Ford

[Click Here for Memo Itemization](#)

Business Address 13500 Telegraph, Taylor, MI 48180

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 08/12/19

Name & Address

Vito Strolis  
205 North Gratiot  
Mt. Clemens, MI 48043

\$ 600.00 \$ 600.00

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer Ruehle's Towing

[Click Here for Memo Itemization](#)

Business Address 205 Northbound Gratiot, Mt. Clemens, MI 48043

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 08/12/19

Name & Address:

Andrew Palazzolo  
15540 Windmill Pointe  
Grosse Pointe Park, MI 48230

\$ 600.00 \$ 600.00

5. If over \$100.00 cumulative, please provide:

Occupation Sales Employer Spectrum Painters

[Click Here for Memo Itemization](#)

Business Address 27560 College Park Dr. Warren, MI 48088

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 08/10/19

Name & Address

Jeann Ann Bugajewski  
16982 Stewart Ct  
Clinton Twp, MI 48038

\$ 200.00 \$ 200.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address =

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

Page Subtotal \$2,100.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663

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6. Amount

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Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution # 1

PAC Receipt? ☐ YES

4. Date of Receipt 08/07/19

Name & Address:

Alice Watson  
Big Farms, LLC  
59539 Romeo Plank  
Ray, MI 48096

\$ 50.00

\$ 50.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

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

3. Contribution # 2

PAC Receipt? ☐ YES

4. Date of Receipt 08/06/19

Name & Address

Bob Rousch  
Serra Buick GMC Cadillac, LLC  
12300 30 Mile Rd  
Washington Twp, MI 48095

\$ 100.00

\$ 100.00

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 08/22/19

Name & Address:

Elizabeth McPhillips  
4819 Castle Wood Dr  
Kimbell, MI 48074

\$ 500.00

\$ 500.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation Stay at Home Mom Employer \_\_\_\_\_

Business Address \_\_\_\_\_

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

3. Contribution # 4

PAC Receipt? ☐ YES

4. Date of Receipt 08/26/19

Name & Address

Virginia Burke  
61267 Crown Pointe Dr  
Washington, MI 48094

\$ 1800.00

\$ 1800.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation Co-Owner Employer Burke Mechanical

Business Address 12310 24 Mile Rd. Shelby Twp, MI 48315

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

Page Subtotal \$2,450.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663  
2. Committee Name CTE Anthony Wickersham

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/13/19</u> Name & Address: <u>Daniel Rubino</u> <u>19857 Emerald Lane</u> <u>Clinton Twp, MI 48038</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/13/19</u> Name & Address: <u>Kevin Ventimiglia</u> <u>22486 Miller</u> <u>St. Clair Shores, MI 48080</u>		\$ <u>100.00</u>	\$ <u>180.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Pancake House</u> Business Address <u>41754 Hayes Rd. Clinton Twp, MI 48038</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/26/19</u> Name & Address: <u>William Stinson</u> <u>56540 Hayes Rd.</u> <u>Macomb, MI 48042</u>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Elite Fence Products</u> Business Address <u>50925 Richard W. Blvd., Chesterfield, MI 48051</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/21/19</u> Name & Address: <u>David Daniels</u> <u>45742 Lookout</u> <u>Macomb, MI 48044</u>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Captain</u> Employer <u>Macomb County Sheriff's Office</u> Business Address <u>43565 Elizabeth, Mt. Clemens, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$1,200.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663  
2. Committee Name CTE Anthony Wickersham

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/21/19</u> Name & Address: <u>Joe Sciortino</u> <u>Macomb County Sheriff's Motor Division</u> <u>43565 Elizabeth, Mt. Clemens, MI 48043</u>		\$ <u>600.00</u>	\$ <u>600.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Lear Corporation</u> Employer <u>Senior Product Engineer</u> Business Address <u>3000 Research Dr. Rochester Hills, MI 48309</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/19/19</u> Name & Address: <u>Nicholas Aiuto Jr.</u> <u>41100 Longe Bay Dr</u> <u>Harrison Twp, MI 48045</u>		\$ <u>600.00</u>	\$ <u>600.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Nick's Towing</u> Business Address <u>42870 Walnut St, Clinton Twp, MI 48036</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/29/19</u> Name & Address: <u>Anisse Didia</u> <u>49698 Keycove Ct</u> <u>Chesterfield, MI 48047</u>		\$ <u>1,100.00</u>	\$ <u>1,100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Co-Owner</u> Employer <u>Spectrum Electric</u> Business Address <u>49698 Keycove Ct. Chesterfield, MI 48047</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/16/19</u> Name & Address: <u>Lawrence M. Scott</u> <u>12900 Hall Rd. Ste 350, Sterling Heights, MI 48313</u>		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>O'Reilly Rancilio P.C.</u> Business Address <u>12900 Hall Rd. Ste 350, Sterling Heights, MI 48313</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$2,550.00

Grand Total of All Schedules 1A  
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Page.





**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663  
2. Committee Name CTE Anthony Wickersham

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3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/10/19</u> Name & Address: <u>Joel Ballor</u> <u>50383 Heatherwood Lane</u> <u>Shelby Twp, MI 48317</u>		\$ <u>600.00</u>	\$ <u>600.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Ballors Towing</u> Business Address <u>57760 Main St., New Haven, MI 48048</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/27/19</u> Name & Address: <u>Anthony Catenacci</u> <u>16050 Timberview Dr</u> <u>Clinton Twp, MI 48036</u>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Advanced Boring and Tool Company</u> Business Address <u>26950 23 Mile Rd., Chesterfield, MI 48051</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/07/19</u> Name & Address: <u>Domenic Belcastro</u> <u>11427 Heatherwood Ct</u> <u>Shelby Twp, MI 48315</u>		\$ <u>200.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Da Francesco's</u> Business Address <u>49521 Van Dyke, Shelby Twp, MI 48317</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/09/19</u> Name & Address: <u>Anthony Spiteri Jr.</u> <u>29260 30 Mile Rd.</u> <u>Lenox, MI 48050</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$1,100.00

Grand Total of All Schedules 1A  
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MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE

1. Committee I.D. Number 138663  
2. Committee Name CTE Anthony Wickersham

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/04/19</u>	
Name & Address: <u>Timothy Bugay</u> <u>23224 Recreation St</u> <u>St. Clair Shores, MI 48082</u>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</u> Employer <u>Royal Oak Recycling</u> Business Address <u>26999 Central Park Blvd Ste 200, Southfield MI 48076</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/05/19</u>	
Name & Address: <u>Wail Dickow</u> <u>4124 W. Point Ct</u> <u>Shelby Twp, MI 48316</u>		\$ <u>375.00</u>	\$ <u>375.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Air Voice Wireless, LLC</u> Business Address <u>4124 W. Point Ct Shelby Twp, MI 48316</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/09/19</u>	
Name & Address: <u>Lawrence Miller</u> <u>55654 Woodridge Dr.</u> <u>Shelby Twp, MI 48316</u>		\$ <u>260.00</u>	\$ <u>260.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>Lombardo Homes</u> Business Address <u>13001 23 Mile Rd, Ste 200, Shelby Twp, MI 48315</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/09/19</u>	
Name & Address: <u>Paul Pizzimenti</u> <u>61646 Woodland Ct</u> <u>Washington, MI 48094</u>		\$ <u>125.00</u>	\$ <u>125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$1,260.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663  
2. Committee Name CTE Anthony Wickersham

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 09/09/19

Name & Address:

Paul Van De Velde  
4685 Wind Ridge Court  
Rochester, MI 48306

\$ 125.00

\$ 125.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired 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 09/09/19

Name & Address

Angelo Lanni  
6325 Park Ave  
Washington, MI 48315

\$ 150.00

\$ 150.00

5. If over \$100.00 cumulative, please provide:

Occupation Construction Employer Florence Cement Company

[Click Here for Memo Itemization](#)

Business Address 51515 Corridor, Shelby Twp, MI 48315

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 09/09/19

Name & Address:

John Paul Rea  
57594 Suffield Dr  
Washington Twp, MI 48094

\$ 125.00

\$ 125.00

5. If over \$100.00 cumulative, please provide:

Occupation Deputy County Executive Employer Macomb County Executive Office

[Click Here for Memo Itemization](#)

Business Address One S. Main, Mt. Clemens, MI 48043

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 09/09/19

Name & Address

Mike Brattain II  
34297 W. Hill Dr.  
Chesterfield, MI 48047

\$ 125.00

\$ 125.00

5. If over \$100.00 cumulative, please provide:

Occupation Sales Employer Florence Cement Company

[Click Here for Memo Itemization](#)

Business Address 51515 Corridor, Shelby Twp, MI 48315

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

Page Subtotal \$525.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663  
2. Committee Name CTE Anthony Wickersham

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6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 09/09/19

Name & Address:

Mark Ousachi  
3024 Mangrove Dr  
Sterling Heights, MI 48314

\$ 125.00 \$ 125.00

5. If over \$100.00 cumulative, please provide:

Occupation Engineer Employer Lear Corporation

[Click Here for Memo Itemization](#)

Business Address 30000 Research Dr., Rochester Hills, MI 48309

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 09/09/19

Name & Address

Jonathan Wickersham  
55300 Azinger Dr.  
Macomb, MI 48042

\$ 500.00 \$ 500.00

5. If over \$100.00 cumulative, please provide:

Occupation Finance Employer Ascentium Capital

[Click Here for Memo Itemization](#)

Business Address 142 W. University, Rochester, MI 48307

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 09/09/19

Name & Address:

Steven Marceau  
11517 Laurel Wood Dr  
Washington, MI 48094

\$ 250.00 \$ 250.00

5. If over \$100.00 cumulative, please provide:

Occupation Heating and Cooling Employer Burke Mechanical

[Click Here for Memo Itemization](#)

Business Address 12310 24 Mile Rd, Shelby Twp, MI 48315

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 09/09/19

Name & Address

Bill Zoyes  
Zoyes Food LLC  
5739 Francesca Ln  
Shelby Twp, MI 48316

\$ 125.00 \$ 125.00

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer Zoey's Food LLC

[Click Here for Memo Itemization](#)

Business Address 5739 Francesca Ln Shelby Twp, MI 48316

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

Page Subtotal \$1,000.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663  
2. Committee Name CTE Anthony Wickersham

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6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 09/09/19

Name & Address:

Julian Lee  
5356 Smiths Creek Rd  
Kimball, MI 48074

\$ 500.00

\$ 500.00

5. If over \$100.00 cumulative, please provide:

Occupation Officer Employer Chesterfield PD

[Click Here for Memo Itemization](#)

Business Address 46525 Continental Dr. Chesterfield, MI 48047

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 08/28/19

Name & Address

Steven Mancini  
37532 Hidden Valley Ct.  
Clinton Twp, MI 48036

\$ 600.00

\$ 600.00

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer Ric-Man Construction LLC

[Click Here for Memo Itemization](#)

Business Address 38600 Van Dyke Ste 100, Sterling Heights, MI 48312

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 09/10/19

Name & Address:

Antonio Trivelloni  
1584 Kingsley  
Mt. Clemens, MI 48043

\$ 125.00

\$ 625.00

5. If over \$100.00 cumulative, please provide:

Occupation Financial Advisor Employer Trivelloni Asset Mgt

[Click Here for Memo Itemization](#)

Business Address 256 N. Main St. Mt. Clemens, MI 48043

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 09/10/19

Name & Address

David Kennedy  
4102 River Pointe Dr  
St. Clair Shores, MI 48079

\$ 125.00

\$ 125.00

5. If over \$100.00 cumulative, please provide:

Occupation Captain Employer MCSO

[Click Here for Memo Itemization](#)

Business Address 43565 Elizabeth, Mt. Clemens, MI 48043

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

Page Subtotal \$1,350.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663  
2. Committee Name CTE Anthony Wickersham

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 08/26/19

Name & Address:

Jeff Baldwin

J. Baldwin LLC

16981 18 Mile Rd, Clinton Twp, MI 48038

\$ 600.00

\$ 700.00

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer J. Baldwin's

[Click Here for Memo Itemization](#)

Business Address 16981 18 Mile Rd, Clinton Twp, MI 48038

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 08/21/19

Name & Address

Sebastian Lombardo

Cranbrook Custom Homes

13001 23 Mile Rd Ste 200

Shelby Twp, MI 48315

\$ 700.00

\$ 700.00

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer Cranbrook Custom Homes

[Click Here for Memo Itemization](#)

Business Address 13001 23 Mile Rd, Ste 200, Shelby Twp, MI 48315

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 09/06/19

Name & Address:

Ryan Ruttan

21158 Van K Dr.

Grosse Pointe Woods, MI 48236

\$ 50.00

\$ 50.00

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 09/05/19

Name & Address

Jason Abro

55205 Hearthside Dr

Shelby Twp, MI 48316

\$ 125.00

\$ 125.00

5. If over \$100.00 cumulative, please provide:

Occupation Lieutenant Employer MCSO

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Business Address 43565 Elizabeth, Mt. Clemens, MI 48043

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

Page Subtotal \$1,475.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663  
2. Committee Name CTE Anthony Wickersham

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 09/06/19

Name & Address:

Robert Doherty  
46228 Emerson Ct  
Macomb Twp, MI 48044

\$ 125.00

\$ 125.00

5. If over \$100.00 cumulative, please provide:

Occupation Lieutenant Employer MCSO

[Click Here for Memo Itemization](#)

Business Address 43565 Elizabeth, Mt. Clemens, MI 48043

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 09/06/19

Name & Address

Jeffrey McPherson  
65719 Haven Ridge Rd  
Lenox, MI 48050

\$ 125.00

\$ 125.00

5. If over \$100.00 cumulative, please provide:

Occupation Sergeant Employer MCSO

[Click Here for Memo Itemization](#)

Business Address 43565 Elizabeth, Mt. Clemens, MI 48043

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 09/05/19

Name & Address:

Eric Ehrler  
30738 School Section Rd  
Richmond, MI 48062

\$ 125.00

\$ 125.00

5. If over \$100.00 cumulative, please provide:

Occupation Sergeant Employer MCSO

[Click Here for Memo Itemization](#)

Business Address 43565 Elizabeth, Mt. Clemens, MI 48043

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 09/05/19

Name & Address

Clarence Petrykowski  
19550 Potomac Dr  
Macomb, MI 48044

\$ 125.00

\$ 125.00

5. If over \$100.00 cumulative, please provide:

Occupation Deputy Employer MCSO

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Business Address 43565 Elizabeth, Mt. Clemens, MI 48043

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

Page Subtotal \$500.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663  
2. Committee Name CTE Anthony Wickersham

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 09/03/19

Name & Address:

William Ash  
37910 Pine Ridge  
Harrison Twp, MI 48045

\$ 500.00

\$ 500.00

5. If over \$100.00 cumulative, please provide:

Occupation Sergeant Employer MCSO

[Click Here for Memo Itemization](#)

Business Address 43565 Elizabeth, Mt. Clemens, MI 48043

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 09/06/19

Name & Address

Jeffrey Budzynowski  
7639 Capital Circle S  
Washington, MI 48094

\$ 500.00

\$ 500.00

5. If over \$100.00 cumulative, please provide:

Occupation Lieutenant Employer MCSO

[Click Here for Memo Itemization](#)

Business Address 43565 Elizabeth, Mt. Clemens, MI 48043

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 09/09/19

Name & Address:

Lawrence Duda  
35113 Newport Dr  
New Baltimore, MI 48047

\$ 125.00

\$ 125.00

5. If over \$100.00 cumulative, please provide:

Occupation Lieutenant Employer MCSO

[Click Here for Memo Itemization](#)

Business Address 43565 Elizabeth, Mt. Clemens, MI 48043

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 09/09/19

Name & Address

Jason Conklin  
64655 North Avenue  
Ray, MI 48096

\$ 125.00

\$ 125.00

5. If over \$100.00 cumulative, please provide:

Occupation Sergeant Employer MCSO

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Business Address 43565 Elizabeth, Mt. Clemens, MI 48043

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

Page Subtotal \$1,250.00

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

Enter this total on  
line 3a of Summary  
Page.





**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663  
2. Committee Name CTE Anthony Wickersham

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 09/09/19

Name & Address:

Michael Shorkey  
19932 Riverwoods Dr  
Macomb Twp, MI 48044

\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation Sergeant Employer MCSO

[Click Here for Memo Itemization](#)

Business Address 43565 Elizabeth, Mt. Clemens, MI 48043

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 09/10/19

Name & Address

Ghanim Abro  
5541 Springbrook Dr.  
Troy, MI 48098

\$ 250.00 \$ 250.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 09/09/19

Name & Address:

Michael Schefka  
47234 Bobwhite Ln  
Shelby Twp, MI 48315

\$ 500.00 \$ 500.00

5. If over \$100.00 cumulative, please provide:

Occupation Project Director Employer Barton Malow

[Click Here for Memo Itemization](#)

Business Address 26500 American Dr, Southfield, MI 48034

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 09/09/19

Name & Address

Randall Haas  
57612 Suffield Dr.  
Washington, MI 48094

\$ 125.00 \$ 125.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

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

Page Subtotal **\$975.00**

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663  
2. Committee Name CTE Anthony Wickersham

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/19</u> Name & Address: <u>Eric Old</u> <u>20843 Summerfield</u> <u>Macomb, MI 48044</u>		\$ <u>125.00</u>	\$ <u>125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Lieutenant</u> Employer <u>Michigan State Police</u> Business Address <u>26211 Central Park Blvd, Ste 400, Southfield, MI 48076</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/19</u> Name & Address: <u>Joe Price</u> <u>37865 Cherry Lane</u> <u>Harrison Twp, MI 48045</u>		\$ <u>125.00</u>	\$ <u>125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Renegade Machining, LLC</u> Business Address <u>37865 Cherry Lane, Harrison Twp, MI 48045</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/19</u> Name & Address: <u>Dan Russell</u> <u>6176 Foxfire Cir</u> <u>Clarkston, MI 48346</u>		\$ <u>125.00</u>	\$ <u>125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Payroll/HR</u> Employer <u>Trion Solutions</u> Business Address <u>888 W. Big Beaver Rd, Ste 100, Troy, MI 48084</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/10/19</u> Name & Address: <u>Norman Kuchenmeister</u> <u>45791 Fairchild</u> <u>Macomb, MI 48042</u>		\$ <u>125.00</u>	\$ <u>125.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Lighting Supplier</u> Employer <u>Kuchenmeister Lighting</u> Business Address <u>295 SB Gratiot, Mt. Clemens, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$500.00

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

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

1. Committee I.D. Number 138663  
2. Committee Name CTE Anthony Wickersham

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6. Amount

7. Cumulative for  
Election Cycle for Each  
Contributor (Through  
date of receipt)

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 09/10/19  
Name & Address:  
Mike Terenzi  
16547 Lynette Dr  
Macomb, MI 48042

\$ 125.00 \$ 125.00

5. If over \$100.00 cumulative, please provide:

Occupation Superintendent Employer Bezlak

[Click Here for Memo Itemization](#)

Business Address 3173 NW Hwy, Farmington Hills, MI 48075

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 09/17/19  
Name & Address:  
Kevin Lee  
2785 28 Mile Rd  
Rochester, MI 48306

\$ 375.00 \$ 375.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 08/21/19  
Name & Address:  
Frank Wroblewski  
26214 Wagner Dr  
Warren, MI 48089

\$ 125.00 \$ 125.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer \_\_\_\_\_

[Click Here for Memo Itemization](#)

Business Address \_\_\_\_\_

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 09/17/19  
Name & Address:  
Michael Andros  
28610 Anchor  
Chesterfield, MI 48047

\$ 100.00 \$ 100.00

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 \$725.00

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

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663  
2. Committee Name CTE Anthony Wickersham

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 09/05/19

Name & Address:

Bill Jarvis  
Jarvis Property Restoration  
5050 N. Ocean  
Singer Island, MI 33404

\$ 100.00 \$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer Jarvis Property Restoration

Click Here for Memo Itemization

Business Address 41800 Executive Dr. Harrison Twp, MI 48045

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt \_\_\_\_\_

Name & Address

\$ \_\_\_\_\_ \$ \_\_\_\_\_

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt \_\_\_\_\_

Name & Address:

\$ \_\_\_\_\_ \$ \_\_\_\_\_

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt \_\_\_\_\_

Name & Address

\$ \_\_\_\_\_ \$ \_\_\_\_\_

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_

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

Page Subtotal \$100.00

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

\$20,960.00

Enter this total on  
line 3a of Summary  
Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 138663

2. Committee Name CTE Anthony Wickersham

CANDIDATE COMMITTEE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1      PAC Receipt? <input type="checkbox"/> Yes Name & Address: <b>Andrew Appleby</b> 400 Water St. Rochester, MI 48307 If over \$100.00 cumulative, please provide: Occupation: <b>CEO</b> Employer Name & Business Address: United Shore Professional Baseball League 7171 Auburn Rd. Utica, MI 48317	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- <b>LOAN</b> Description <u>Tickets for Game</u> 5. Date Of Receipt: <u>09/09/19</u> 6. Vendor Name & Address:	\$ <u>650.00</u>	\$ <u>650.00</u>
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2      PAC Receipt? <input type="checkbox"/> Yes Name & Address: <b>Jeff Baldwin</b> 16891 18 Mile Rd Clinton Twp, MI 48038 If over \$100.00 cumulative, please provide: Occupation: <b>Owner</b> Employer Name & Address: J. Baldwin's 16981 18 Mile Rd Clinton Twp, MI 48038	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- <b>LOAN</b> Description <u>4 - \$25 gift cards</u> 5. Date Of Receipt: <u>09/09/19</u> 6. Vendor Name & Address:	\$ <u>100.00</u>	\$ <u>700.00</u>
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3      PAC Receipt? <input type="checkbox"/> Yes Name & Address: <b>Espedito Marra</b> 52874 W. Seaton Chesterfield, MI 48047 If over \$100.00 cumulative, please provide: Occupation: <b>Manager</b> Employer Name & Address: J.E.G. 220 Victor Highland Park, MI 48203	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- <b>LOAN</b> Description <u>4 - Red Wing Tickets</u> 5. Date Of Receipt: <u>09/09/19</u> 6. Vendor Name & Address:	\$ <u>1200.00</u>	\$ <u>1700.00</u>
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal \$1,950.00 \$3,050.00

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

Enter this total  
on line 6 of Summary  
Page



# ITEMIZED IN-KIND CONTRIBUTIONS

## SCHEDULE 1-IK

1. Committee I. D. Number 138663

## CANDIDATE COMMITTEE

2. Committee Name CTE Anthony Wickersham

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1      PAC Receipt? <input type="checkbox"/> Yes Name & Address: Kevin Ventimiglia 22484 Miller St. Clair Shores, MI 48080  If over \$100.00 cumulative, please provide: Occupation: <u>Owner</u> Employer Name & Business Address: <u>Pancake House</u> <u>41754 Hayes Rd</u> <u>Clinton Twp, MI 48038</u>  <input checked="" type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- <b>LOAN</b> Description <u>3 - \$20 gift cards</u> 5. Date Of Receipt: <u>09/09/19</u> 6. Vendor Name & Address:	\$ <u>80.00</u>	\$ <u>180.00</u>
Contribution # 2      PAC Receipt? <input type="checkbox"/> Yes Name & Address: Domenic Belcastro 11427 Heatherwood Ct Shelby Twp, MI 48315  If over \$100.00 cumulative, please provide: Occupation: <u>Owner</u> Employer Name & Address: <u>Da Francesco's</u> <u>495221 Van Dyke Ave</u> <u>Shelby Twp, MI 48317</u>  <input checked="" type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- <b>LOAN</b> Description <u>4 - \$50 gift cards</u> 5. Date Of Receipt: <u>09/09/19</u> 6. Vendor Name & Address:	\$ <u>200.00</u>	\$ <u>400.00</u>
Contribution #3      PAC Receipt? <input type="checkbox"/> Yes Name & Address: Antonia Trivelloni 1584 Kingsley Mt. Clemens, MI 48045  If over \$100.00 cumulative, please provide: Occupation: <u>Financial Advisor</u> Employer Name & Address: <u>Trivelloni Asset Management</u> <u>25 N. Main St</u> <u>Mt. Clemens, MI 48043</u>  <input checked="" type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- <b>LOAN</b> Description <u>Cigars</u> 5. Date Of Receipt: <u>09/09/19</u> 6. Vendor Name & Address:	\$ <u>500.00</u>	\$ <u>625.00</u>
Page Subtotal		\$ <u>780.00</u>	\$ <u>1,205.00</u>

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

Enter this total  
on line 6 of Summary  
Page



# ITEMIZED IN-KIND CONTRIBUTIONS

## SCHEDULE 1-IK

### CANDIDATE COMMITTEE

1. Committee I. D. Number 138663

2. Committee Name CTE Anthony Wickersham

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1      PAC Receipt? <input type="checkbox"/> Yes Name & Address: Holly Alcolic 46723 Van Dyke Rd Utica, MI 48317  If over \$100.00 cumulative, please provide: Occupation: <u>Owner</u> Employer Name & Business Address: American Speedy Printing 46723 Van Dyke Rd Utica, MI 48317	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- <b>LOAN</b> Description <u>Postcards</u> 5. Date Of Receipt: <u>09/09/19</u> 6. Vendor Name & Address:	\$ <u>450.00</u>	\$ <u>450.00</u>
<a href="#">Click Here for Memo Itemization</a>			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution # 2      PAC Receipt? <input type="checkbox"/> Yes Name & Address: John Atsalis 35647 Oakdale St. Livonia, MI 48514  If over \$100.00 cumulative, please provide: Occupation: <u>Account Manager</u> Employer Name & Address: DTE Energy One Energy Plaza Detroit, MI 48226	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- <b>LOAN</b> Description <u>Tigers Tickets</u> 5. Date Of Receipt: <u>09/09/19</u> 6. Vendor Name & Address:	\$ <u>198.00</u>	\$ <u>198.00</u>
<a href="#">Click Here for Memo Itemization</a>			
<input checked="" type="checkbox"/> Fund Raiser Contribution			
Contribution #3      PAC Receipt? <input type="checkbox"/> Yes Name & Address: Jon Balsamo 30060 23 Mile Rd. Chesterfield, MI 48047  If over \$100.00 cumulative, please provide: Occupation: <u>Financial Advisor</u> Employer Name & Address: Trivelloni Asset Management 25 N. Main St. Mt. Clemens, MI 48043	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- <b>LOAN</b> Description <u>2 - \$50 Best Buy Gift Cards</u> 5. Date Of Receipt: <u>09/09/19</u> 6. Vendor Name & Address:	\$ <u>100.00</u>	\$ <u>100.00</u>
<a href="#">Click Here for Memo Itemization</a>			
<input checked="" type="checkbox"/> Fund Raiser Contribution			

Page Subtotal **\$748.00** **\$748.00**

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

Enter this total  
on line 6 of Summary  
Page



# ITEMIZED IN-KIND CONTRIBUTIONS

## SCHEDULE 1-IK

1. Committee I. D. Number 138663

## CANDIDATE COMMITTEE

2. Committee Name CTE Anthony Wickersham

3. Name and Address from whom received  
If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.

4. Type of In-Kind Contribution (Check applicable box)

5. Date of Receipt

6. Name & Address of Vendor from whom goods or services were purchased

7. Amount or Fair Market Value

8. Cumulative for Election Cycle (Through date in Item 5)

Contribution # 1 PAC Receipt? ☐ Yes

Name & Address:

Russ Milne  
619 N. Rosedale  
Grosse Pointe, MI 48236

If over \$100.00 cumulative, please provide:

Occupation: Owner

Employer Name & Business Address:

Russ Milne Ford  
24777 Hall Rd  
Macomb, MI 48042

4. ☐ Endorsement or Guarantee of Bank Loan

☒ Goods Donated or Loaned ☐ Services Donated

☐ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- **LOAN**

Description Vehicle Lease - Hole in one Sponsor

5. Date Of Receipt: 09/09/19

6. Vendor Name & Address:

[Click Here for Memo Itemization](#)

\$ 500.00 \$ 500.00

☒ Fund Raiser Contribution

Contribution # 2 PAC Receipt? ☐ Yes

Name & Address:

Ken Johnston  
50395 W. 10 Mile Rd  
Novi, MI 48374

If over \$100.00 cumulative, please provide:

Occupation: Supervisor

Employer Name & Address:

Links of Novi  
50395 W. 10 Mile Rd  
Novi, MI 48374

4. ☐ Endorsement or Guarantee of Bank Loan

☒ Goods Donated or Loaned ☐ Services Donated

☐ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- **LOAN**

Description 2 - Golf Foursomes

5. Date Of Receipt: 09/09/19

6. Vendor Name & Address:

[Click Here for Memo Itemization](#)

\$ 360.00 \$ 360.00

☒ Fund Raiser Contribution

Contribution #3 PAC Receipt? ☐ Yes

Name & Address:

David Weber  
7177 Frampton W.  
Washington, MI 48095

If over \$100.00 cumulative, please provide:

Occupation: Owner

Employer Name & Address:

Greystone Golf Club  
67500 Mound Rd  
Washington, MI 48095

4. ☐ Endorsement or Guarantee of Bank Loan

☒ Goods Donated or Loaned ☐ Services Donated

☐ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- **LOAN**

Description Golf Foursome

5. Date Of Receipt: 09/09/19

6. Vendor Name & Address:

[Click Here for Memo Itemization](#)

Page Subtotal \$ 1,100.00 \$ 1,100.00

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

Enter this total  
on line 6 of Summary  
Page





# ITEMIZED IN-KIND CONTRIBUTIONS

## SCHEDULE 1-IK

1. Committee I. D. Number 138663

2. Committee Name CTE Anthony Wickersham

### CANDIDATE COMMITTEE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1      PAC Receipt? <input type="checkbox"/> Yes Name & Address: <b>Bob Kirk</b> 19500 Hall Rd. #100 Clinton Twp, MI 48038  If over \$100.00 cumulative, please provide: Occupation: <b>Partner</b>  Employer Name & Business Address: <b>Kirk and Huth</b> 19500 Hall Rd. #100 Clinton Twp, MI 48038  <input checked="" type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- <b>LOAN</b> Description <u>Tigers Tickets</u>  5. Date Of Receipt: <u>09/09/19</u>  6. Vendor Name & Address:  <a href="#">Click Here for Memo Itemization</a>	\$ <u>330.00</u>	\$ <u>330.00</u>
Contribution # 2      PAC Receipt? <input type="checkbox"/> Yes Name & Address: <b>David Weber</b> 7177 Frampton W. Washington, MI 48095  If over \$100.00 cumulative, please provide: Occupation: <b>Owner</b>  Employer Name & Address: <b>Greystone Golf Club</b> 67500 Mound Rd Washington, MI 48095  <input checked="" type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- <b>LOAN</b> Description <u>Golf Package - 4 foursomes</u>  5. Date Of Receipt: <u>09/09/19</u>  6. Vendor Name & Address:  <a href="#">Click Here for Memo Itemization</a>	\$ <u>536.00</u>	\$ <u>776.00</u>
Contribution #3      PAC Receipt? <input type="checkbox"/> Yes Name & Address:   If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input checked="" type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input type="checkbox"/> Goods or Services Purchased by Candidate or Others- <b>LOAN</b> Description _____  5. Date Of Receipt: _____  6. Vendor Name & Address:  <a href="#">Click Here for Memo Itemization</a>	\$ _____	\$ _____

Page Subtotal      **\$866.00**      **\$1,106.00**

Grand Total of all Schedules 1-IK  
(Complete on last page of Schedule)      **\$5,444.00**

Enter this total  
on line 6 of Summary  
Page



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number **138663**  
2. Committee Name **CTE Anthony Wickersham**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <b>USPS</b>  Address <b>155 S. Main St Mount Clemens, MI 48046</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>Stamps</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>08/02/19</b> Date	<b>\$ 55.00</b>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #2 Name <b>American Graphics</b>  Address <b>34895 Groesbeck Clinton Township, MI 48036</b>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <b>Tickets</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>08/09/19</b> Date	<b>\$ 138.66</b>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #3 Name <b>Testa Barra</b>  Address <b>48824 Romeo Plank Macomb, MI 48044</b>  <input type="checkbox"/> Fund Raiser	Purpose: <b>Lunch with Constituents</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>08/28/19</b> Date	<b>\$ 122.82</b>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #4 Name <b>Sams Club</b>  Address <b>45600 Utica Parkway Blvd. Utica, MI 48315</b>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <b>Snacks</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>09/05/19</b> Date	<b>\$ 66.86</b>  <a href="#">Click Here for Memo Itemization Type</a>
Expenditure #5 Name <b>Greystone Golf Club</b>  Address <b>67500 Mound Rd Romeo, MI 48095</b>  <input checked="" type="checkbox"/> Fund Raiser	Purpose: <b>Food and Beverage cost for fundraiser</b>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<b>09/09/19</b> Date	<b>\$ 7436.10</b>  <a href="#">Click Here for Memo Itemization Type</a>

Subtotal this page **\$7,819.44**

Grand Total of all Schedules 1B  
(Complete on last page of Schedule) **7819.44**

Enter this total  
on line 8a of  
Summary Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**INCIDENTAL OFFICE EXPENSE  
DISBURSEMENTS  
SCHEDULE 1C  
CANDIDATE COMMITTEE**

(For use by officeholders only)

1. Committee I. D. Number 138663  
2. Committee Name CTE Anthony Wickersham

3. Name and address of person to whom disbursement was made	4. Description of Disbursement (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address: Southeastern Michigan Veterans Stand Down, Inc 58877 Christoper Road Ray, MI 48096	Purpose <u>Hole Sponsorship</u>	<u>08/02/19</u> Date	<u>\$ 150.00</u>
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>KO / GO</u> <input checked="" type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Disbursement # 2 Name & Address: Sams Club 45600 Utica Parkway Blvd. Utica, MI 48315	Purpose <u>Candy - Parade</u>	<u>08/08/19</u> Date	<u>\$ 199.60</u>
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>BO</u> <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Disbursement # 3 Name & Address: FOPA Lodge #112 33845 24 Mile Rd Chesterfield, MI 48047	Purpose <u>Hole Sponsorship</u>	<u>08/14/19</u> Date	<u>\$ 100.00</u>
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>KO / GO</u> <input checked="" type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Disbursement # 4 Name & Address: Cousino Sideliners Club Attn: Lisa Jolliffe 30758 Marrocco Drive Warren, MI 48088	Purpose <u>Quarter Page Ad</u>	<u>09/04/19</u> Date	<u>\$ 70.00</u>
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>KO</u> <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Subtotal this page			<b>\$519.60</b>
Grand Total of all Schedules 1C (Complete on last page of Schedule)			

Enter this total  
on line 10a of  
Summary Page

\*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**INCIDENTAL OFFICE EXPENSE  
DISBURSEMENTS  
SCHEDULE 1C  
CANDIDATE COMMITTEE**

(For use by officeholders only)

1. Committee I. D. Number 138663  
2. Committee Name CTE Anthony Wickersham

3. Name and address of person to whom disbursement was made	4. Description of Disbursement (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address: The Italian Tribune P.O. Box 380407 Clinton Twp, MI 48038	Purpose <u>Quarter Pg Ad</u>	<u>09/17/19</u> Date	<u>\$ 277.00</u>
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>KO</u> <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Disbursement # 2 Name & Address: New Baltimore Goodfellows PO Box 82 New Baltimore, MI 48047	Purpose <u>Qtr Pg ad</u>	<u>09/24/19</u> Date	<u>\$ 100.00</u>
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>KO</u> <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Disbursement # 3 Name & Address: Mt. Clemens Lions Club Attn: Dave Herrington 165 Crocker Blvd Mt. Clemens, MI 48043	Purpose <u>2nd Qtr Dues</u>	<u>10/01/19</u> Date	<u>\$ 85.00</u>
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>BO</u> <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Disbursement # 4 Name & Address: Central Macomb Optimist Club 16515 Festian Clinton Twp, MI 48035	Purpose <u>Annual Dues</u>	<u>10/11/19</u> Date	<u>\$ 108.00</u>
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>BO</u> <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Subtotal this page			<b>\$570.00</b>
Grand Total of all Schedules 1C (Complete on last page of Schedule)			

Enter this total  
on line 10a of  
Summary Page

\*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**INCIDENTAL OFFICE EXPENSE  
DISBURSEMENTS  
SCHEDULE 1C  
CANDIDATE COMMITTEE**

(For use by officeholders only)

1. Committee I. D. Number 138663  
2. Committee Name CTE Anthony Wickersham

3. Name and address of person to whom disbursement was made	4. Description of Disbursement (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address: Clinton Twp Area Optimist Club 17177 Kingsbrooke Dr Clinton Twp, MI 48038	Purpose <u>Annual Dues</u>	<u>10/15/19</u> Date	<u>\$ 108.00</u>
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>BO</u> <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Disbursement # 2 Name & Address:	Purpose _____	_____ \$ _____ Date	
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code _____ <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Disbursement # 3 Name & Address:	Purpose _____	_____ \$ _____ Date	
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code _____ <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Disbursement # 4 Name & Address:	Purpose _____	_____ \$ _____ Date	
<input type="checkbox"/> Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code _____ <input type="checkbox"/> Fund Raiser	Click for Memo Itemization Type	
Subtotal this page			<b>\$108.00</b>
Grand Total of all Schedules 1C (Complete on last page of Schedule)			<b>\$1,197.60</b>

Enter this total  
on line 10a of  
Summary Page

\*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

1. Committee I.D. Number **138663**

2. Committee Name **CTE Anthony Wickersham**

**- USE A SEPARATE SHEET FOR EACH EVENT -**

3. Date Event Was Held  <b>09/09/19</b>	4. Number of Individuals Attending or Participating (whichever is greater)  <b>132</b>	5. Type of Fund Raising Activity  <b>Golf Fundraiser</b>	6. Address and Name (If any) of the place where the activity was held. <b>67500 Mound Rd. Washington, MI 48095</b> <input type="checkbox"/> Greystone Golf Club <input type="checkbox"/> Private Residence
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7. Total Contributions **\$20,960.00**

8. Other Receipts **\$0.00**

9. Gross Receipts (Add lines 7 and 8) **\$20,960.00**

10. Total Cost of Event **\$13,085.62**  
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

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

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

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