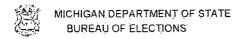


# MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

# CANDIDATE COMMITTEE COVER PAGE

#### FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink an the treasurer (or designated record keeper) and	d signed by candidate.	3. This Statement covers From	n: 11/28/17 <sub>to</sub> 07/20/18	
1. Committee I.D. Number	· · · · · · · · · · · · · · · · · · ·	4. Candidate Last Name	First Name	M.I.
139377		Radtke	Michael	
2. Committee Name		4a. Office Sought Including District # or Community Served (If applicable)  Sterling Heights City Council		
Citizens for Michael Rad	dtke	4b. County of Residence MA		
5. Committee's Mailing Address		6. Treasurer's Name & Reside		<u> </u>
34205 Barrett Dr.			anidal Address	3
Sterling Heights, MI 48312		Virginia La Rosa 13515 Parkridge Dr. Shelby Twp., MI 483	315	ncT 23 PH 4: 29
Area Code and Phone (586) 873-8427 If the address in this box is different from the commailing address on the Statement of Organization, be sent to this address by the filing official.	nittee mail may	Area Code & Phone (586) 73	39-8885 PE	h: 29
7. Treasurer's Business Address		8. Designated Record keeper	's Name and Mailing Address (If the committee	·
Virginia La Rosa		Designated Record keeper)		. == =:
13515 Parkridge Dr.				
Shelby Twp., MI 48315				
· •				
Area Code and Phone (586) 739-8885		Area Code and Phone		•
9. TYPE OF STATEMENT			9e. Dissolution of Candidate Committee	<del></del>
9a. Pre-Election OR 9b. Post-Election	is not on the		By checking this item I/We certify any ou	tstanding debt
Pre-Election or Post-Election Statement relates to:	current year:		by the committee to the candidate or his or he by discharged and forgiven, and no longer co the committee. The committee has no oustar	er spouse is here
Primary	X July Quart	erly	owes no lates fees or has any oustanding deb	t.
General	October Q	uarterly	European if the dissolution assess to assess the	Liket E
Convention			Further, if the dissolution cannot be granted, to considered a request for the Reporting Waive	nat this be
Special	9c. Annua	l Statement ( )		
School		Coverage Year	Effective date of dissolution	
Caucus	9d. X Amen	dment to Campaign Statement		*
•		plete Item 9a, 9b, 9c or 9e to be which Statement is being led.)	Note: The disposition of residual funds must be Schedule 1B and the Summary Page.	e reported on
Date of Election, Convention or Caucus				
·	1			
10. Verification: I\We certify that all reasonable dilig my\our knowledge and belief the contents are true,	ence was used i	in the preparation of this stateme	ent and attached schedules (if any) and to the	pest of
		a1	Page	
Designated Record keeper  Virginia La Ro  Type or Print Name	Jsa	1. Virginia Ja	Date $\frac{10/21/2}{2}$	-019
Type of Emit Name		Signature	21.	
Candidate Michael Radtke		My dul 0	10/21/2	019
Type or Print Name		Signature		
Authority granted under P.A. 388 of 1976:				

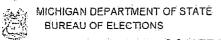


1. Committee I.D. Number \_1

. 139377
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SUMMARY PAGE CANDIDATE COMMITTEE

RECEIPTS	Column   This Period	Column II Cumulative this election cycle
3. Contributions		Summant this execution dyold
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 725.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$_\$725.00	(18.) \$ \$1,009.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$0.00	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) s. <u>\$725.00</u>	(20:) \$ \$1,009.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		1100-1
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$946.61	(21.) \$ 1,698,56
7. In-Kind Expenditures (Schedule 18-IK, Column 6)	(7.) \$ _\$0.00	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures	mia:	
a. Itemized (Schedule 1B, Column 6)	(8a;) § \$1,266.23	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) s <u>\$0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$1,266.03	(23.) \$ \$1,399.04
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1.C., Column 6)	(10a.)\$	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.)\$	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(100.)	
DEBTS AND OBLIGATIONS	(11.) \$	(24.) \$ \$0.00
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$5,640.59</u>	· •
b. Owed to the Committee (Schedule 1E)	(12b.) \$	·
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ \$1,211.77	
(Enter zero if no previous reports have been filed.)  14. Amount received during reporting period	(14.) + \$ \$725.00	
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$_\$1,936.77	
<ol> <li>Amount expended during reporting period</li> <li>(Add lines 9 and 11)</li> </ol>	(16.) = \$ \$1,266.23	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$670.54	
· · ·		1.9

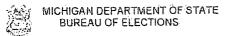


#### ITEMIZED CONTRIBUTIONS SCHEDULE 1A

#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_\_\_139377

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 11/30/17 Name & Address:	_	
White, Alexandré 156 Prospect Street Providence, RI 02906	<u>s</u> 25	<u>s</u> 25
5. If over \$100.00 cumulative, please provide:	Offati blanc	·F= - B #: 11 -:
Occupation Employer	Click Here	for Memo Itemization
Business Address	•	
Type of Contribution: V Direct Loan from a person Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/27/18  Name & Address		
Radtke Jr., Michael 34205 Barrett Dr. Sterling Heights, MI 48312	<sub>\$</sub> 700	\$ 1,091.69
5. If over \$100.00 cumulative, please provide:	Click Here:	for Memo Itemization
Occupation Consultant Employer Wolverine Strategies LLC	- ,.,	
Business Address 13515 Parkridge Dr., Shelby Twp., MI 48315		
Type of Contribution: Direct	ev.	•
3. Contribution #.3 PAC Receipt? YES 4. Date of Receipt Name & Address:		
	\$	<u>\$</u>
6. If over \$100.00 cumulative, please provide:	Click Here f	or 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		, ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
e ·	·\$	- `\$ <u></u>
5. If over \$100.00 cumulative, please provide:	Official district	T T T T T T T T T T T T T T T T T T T
OccupationEmployer	Click Here to	or Memo Itemization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$725.00	
Grand Total of All Schedules 1A	\$725.00	
(Complete on last page of Schedule)	Enter this total on line 3a of Summan	r .



## ITEMIZED IN-KIND CONTRIBUTIONS

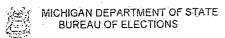
#### SCHEDIII F 1-IK

139377 1. Committee I. D. Number

1 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			**
CANDIDATE COMA	AITTEE 2. Committee Name Citizens for Mich	iael Radtke	<del></del>
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). Reportall 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; Michael Radtke 34205 Barrett Dr.	Goods or Services Purchased by Candidate or Others	, 16.42	, 68.37
Sterling Heights, MI 48312  If over \$100.00 cumulative, please provide: Occupation: CONSUL TANT  Employer Name & Business Address:	Goods or Services Purchased by Candidate or Others-LOAN  Description Office Supplies  5. Date Of Receipt: 11/21/17	٠	
Wolverine Strategies 13515 Parkridge Dr. Shelby Twp., MI 48315  Fund Raiser Contribution	6. Vendor Name & Address:	Click Here for Memo Ite	emization
Contribution # 2 PAC Receipt? Yes Name & Address  Michael Radike same as above	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		100.98
if over \$100.00 cumulative, please provide: Occupation:	Description food for ride-along  5. Date Of Receipt: 12/01/17		٠

34205 Barrett Dr.	Goods or Services Purchased by Candidate or Others	• •
Sterling Heights, MI 48312	Goods or Services Purchased by Candidate or Others-L	DAN
If over \$100.00 cumulative, please provide: Occupation: FONSUL TANT	Description office supplies	***************************************
Employer Name & Business Address:	5. Date Of Receipt: 11/21/17	
Wolverine Strategies	6. Vendor Name & Address:	Ottobal Hann for Assurant Hanning Vision
13515 Parkridge Dr.	Rite Aid	Click Here for Memo Itemization
Shelby Twp., MI 48315	11743 15 Mile Rd.	
Fund Raiser Contribution	Sterling Heights, MI 48312	
Contribution # 2 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan	
Name & Address	Goods Donated or Loaned Services Donated	
Michael Radtke	Goods or Services Purchased by Candidate or Others	s 32.61 s 100.98
same as above	Goods or Services Purchased by Candidate or Others- L	OAN
If over \$100.00 cumulative, please provide:	Description food for ride-along	
Occupation:	5. Date Of Receipt: 12/01/17	
Employer Name & Address:	6: Vendor Name & Address:	
same as above		••
	Honey Tree Restaurant	Click Here for Memo Itemization
	44667 Mound Rd	
Fund Raiser Contribution	Sterling Heights, MI 48314	
Contribution #3 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan	440.40
Name & Address:	Goods Donated or Loaned Services Donated	s 41.51 s 142.49
Michael Radtke	Goods or Services Purchased by Candidate or Others	
same as above	Goods or Services Purchased by Candidate or Others-Li	OAN
If over \$100.00 cumulative, please provide:	Description advertising	- -
Occupation:	5. Date Of Receipt:11/30/17	
Employer Name & Address:	6. Vendor Name & Address:	
same as above	Facebook	Click Here for Memo Itemization
	1 Hacker Way	
	Menlo Park, CA 94025	
Fund Raiser Contribution		
,	Page S	ubtotal \$90.54
	Grand Total of all Schedul	les 1-lK
	(Complete on last page of Sci	hedule)
		Enter this total

on line 6 of Summary Page



Page 2 of \_\_\_\_\_

## ITEMIZED IN-KIND CONTRIBUTIONS

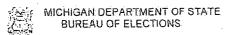
SCHEDULE 1-IK

1. Committee I. D. Number 139377

Page-

CANDIDATE	COMMIT	TEE
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<ol> <li>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.</li> </ol>		ś were	7, Amount or Fair Market Value:	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Ye Name & Address:  [Viichael Radtke same as above]	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others		198.50	<sub>s</sub> 340.99
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address: Same as above	Description Gifts  5. Date Of Receipt: 12/13/17  6. Vendor Name & Address:  White House Historical Assn.  Washington, DC	Click	k Here for Memo	) Itemization
Fund Raiser Contribution				
Contribution # 2 PAC Receipt? Yes Name & Address  Michael Radtke same as above	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others	s <u>3</u>	.00	s 343.99
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Goods or Services Purchased by Candidate or Others- Description advertising  5. Date Of Receipt: 01/08/18  6. Vendor Name & Address:	LUAN		
same as above	Facebook same as above	Click	k Here for Memo	Itemization
Contribution #3 PAC Receipt? Yes	Endorsement or Guarantee of Bank Loan  Goods Donated or Loaned Services Donated	§ 3.2	20	<sub>s</sub> 347.19
Michael Radtke same as above If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-1  Description parking  5. Date Of Receipt: 01/17/18	LOAN		: :
same as above	6. Vendor Name & Address:  RPS Ann Arbor-Meter  324 Maynard Street  Ann Arbor, MI 48104	*Clicl	k Here for Memo	temization
Fund Raiser Contribution		Subtotal	#204.70	
	Grand Total of all Sched (Complete on last page of Sc	ules 1-lK	\$204.70	



### ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK

1. Committee I. D. Number 139377

CANDIDA	TE	COM	A.	4	Œ
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	2 # 2 # Ten hom	
Name and Address from whom received if contribution is from an individual, enter last name first. Check box to indicate if confribution	Type of In-Kind Contribution (Check applicable box)     Date of Receipt	7. Amount or 8. Cumulative Fair Market for Election Value Cycle (Through
is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	6. Name & Address of Vendor from whom goods or services were purchased	
Contribution #1 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan	
Name & Address:	Goods Donated or Loaned Services Donated	s 14.50 s 361.69
Michael Radtke	Goods or Services Purchased by Candidate or Others	\$
same as above	Goods or Services Burchased by Candidate or Others-LOAN	
If over \$100.00 cumulative, please provide: Occupation:	Description meeting	
Employer Name & Business Address:	5. Date Of Receipt: 01/17/18	
same as above	6. Vendor Name & Address:	
	Rich J C Restaurant	Click:Here for Memo_Itemization
	1313 S University Ave.	
Fund Raiser Contribution	Ann Arbor, MI 48104	
Contribution # 2 PAC Receipt? Yes Name & Address	4. Endorsement or Guarantee of Bank Loag	
Michael Rädtke	Goods Donated or Loaned Services Donated	30 s 391.69
same as above	Goods or Services Pulchased by Candidate of Others	
44.	Goods or Services Purchased by Candidate or Others-LOAI	y .
If over \$100.00 cumulative, please provide:	Description O'Hara luncheon	
Occupation: Employer Name & Address:	5. Date Of Receipt: 02/05/18	
	6. Vendor Name & Address:	***
same as above	Macomb County Dem Committee	Click Here for Memo Itemization
	176 S Main St.	no acceptanting
Fund Raiser Contribution	Mt. Clemens, MI 48043	
Contribution #3 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan	222.22
Name & Address:	Goods Donated or Loaned Services Donated \$	200.00 <u>s</u> 200.00
Dominic La Rosa 13515 Parkridge Dr.	Goods or Services Purchased by Candidate or Others	
Shelby Twp., MI 48315	Goods or Services Purchased by Candidate or Others-LOAN	
If over \$100.00 cumulative, please provide:	Description advertising	***
Occupation: Advertising Executive	5. Date Of Receipt: 06/26/17	
Employer Name & Address:	6. Vendor Name & Address:	
Self-Employed	Italian Tribune	Click Here for Memo Itemization
	PO Box 380407	1
weekers;	Clinton Twp., MI 48038	
Fund Raiser Contribution		
	Page Subto	1a1 \$244.50
	Once of Transport of the Control of	
	Grand Total of all Schedules 1 (Complete on last page of Schedu	1 1
•	**************************************	Enter this total
		on line 6 of Summary
		Page



#### MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

### ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 14K

1. Committee I. D. Number 1393

139377

CANDIDATE COMP	NITTEE 2. Committee Name CHIZOIS TO WILL	Maei Kadike
5. Name and Address from whom received if contribution is from an individual, enter lest 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 5. Meme & Address of Vendor from whom goods or services were purchased.	7. Amount or Fair Market for Election Cycle (Through dats in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: Allichael Radtka 34205 Barrett Dr.	4	s 10 s 1,101.69
Sterling Heights, WI 48312  If over \$100.00 cumulative, please provide: Occupation: Consultant Employer Name 2 Business Address: Wolverine Stretegies 13515 Parkridge Dr. Shelby Twp., WI 48315	Goods or Services Purchased by Candidate or Others-LOAl Description Membership  5. Data Of Receipt: 01/05/18  5. Vendor Name & Address: DNC 430 South Capitol Street SE Washington, D.C. 20003	Nick Here for Memo Hemization
Contribution # 2 PAC Receipt? Yes Name & Address  Michael Redtke 34205 Barrett Or. Sterling Heights, MI 48312	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 LOA	25 s 1,126.99
if over \$180.00 cumulative, please provide: Occupation: Same Employer Name & Address: Same	Description membership  5. Date Of Receipt: 03/12/18:  6. Vendor Name & Address:  Michigan Democratic Party  606 Townsend St.  Lansing, IVI 48933	- Click Here for Memo Hemization
Fund Reiser Contribution  Contribution #3 PAC Receipt? Yes.	4. The Endorsement or Guarantee of Bank Loan	
Name & Address: Michael Radike 34205 Barrett Dr. Sterling Heights, MI 48312	Goods Donated or Loaned Services Donated S_Goods or Services Purchased by Candidate or Others.	100 s 1, 226.99
If over \$100.00 enmulative, please provide:  Occupation: Same Employer Name & Address:	Description fundraiser ticket  5. Date Of Receipt: 03/20/18  5. Vendor Marie & Address:	Click Here for Memo Itemization
Same	CTE Thomas Morgan 1432 Wickham Drive Lansing, MI 48906	- 1
Fund Raiser Contribution	Page Subtr	\$135.00
	Grand Tetal of all Schedules (Complete on last page of Sched	1-16



#### MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

#### ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 139377

الله الله الله الله الله الله الله الله	**	T - T
CANDIDATE COM	SETTEE 2. Committee Hame Citizens for Micha	ael Radike
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). Reportall 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 (or Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: Michael Radike		37.10 <b>, 1, 263.79</b>
34205 Barrett Dr. Sterling Heights, MI 48312	Goods or Services Furchased by Candidate of Others Goods or Services Purchased by Candidate or Others-LOAN	
if over \$100.00 cumulative, please provide: Occupation: Same	Description funeral glift	
Employer Name & Business Address:	5. Date Of Receipt: 04/10/18	•
Same	6. Vendor Name & Address: Randazzo Fresh Market 36800 Garfield Clinton Twp., WI 48035	ck-Here for Niemo Itemizztion
Contribution # 2 PAC Réceipt? Yes Name & Address Michael Radtke	# Sandorsement or Guarantee of Bank Loan Goods Donated of Loaned Services Donated	12:2/0
34205 Berrett Dr. Sterling Heights, MI 48312	Goods or Services Purchased by Candidate or Others  Goods or Services Purchased by Candidate or Others-LOAN	50 \$ <u>1,313.79</u>
If over \$180.00 cumulative, please provide: Occupation: Same Employer Name & Address:	Description fundraliser ticket  5. Date Of Receipt: 05/25/18	
Same  Fund Reiser Contribution	6. Vendor Namer & Address:  Brad O'Donnell for Utica cho 6685 Auburn Rd.  Utica, MI 48317	ck Heré for Memo Itamizetion
Contribution #3 PAC Receipt? Yes	4. Sendorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Services	s 1,353.79
Michael Radtke 34205 Barrett Dr. Sterling Heights, MI 48312	Goods or Services Furchased by Candidate or Others Goods or Services Furchased by Candidate or Others LOAN	A Commence of the Commence of
If over \$108.06 cumulative, please provide:	Description fundraiser ticket	÷
Occupation: Same	5. Date of Receipt: 06/11/18	
Employer Name & Address:	6. Vendor Name & Address:	
Same	North Macomb PAC 45451 Fielding St. Macomb, Mi 48042	sk Here for Memo Itamization
Fund Raiser Contribution		<del>- 1811</del>
	Päge Subtotal	\$127.10
	Grand Total of all Schadules 1-16 (Complete on last page of Schadule)	
		Enter this total on line 8 of Summery Page

Page 5 of 1

## ITEMIZED IN-KIND CONTRIBUTIONS

#### **SCHEDULE 1-IK**

1. Committee I. D. Number 139377

CANDIDATE COM	AITTEE 2. Committee Name Citizens for Mich	aei Radtke	
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:	Endorsement or Guarantee of Bank Loan     Goods Donated or Loaned Services Donated	16.00	, 1369.79
Michael Radtke Same	Goods or Services Purchased by Candidate or Others  Goods or Services Purchased by Candidate or Others-LOAN		
If over \$100.00 cumulative, please provide: Occupation:	Description holiday party		
Employer Name & Business Address:	5. Date Of Receipt: 12/13/17		
Same  Fund Raiser Contribution	6. Vendor Name & Address:  Sterling Heights Chamber 52000 Cherry Creek Dr. Shelby Twp., MI 48316	lick Here for Memo	Itemization
Contribution # 2 PAC Receipt? Yes Name & Address	4. Endorsement or Guarantee of Bank Loan Goods Donated Services Donated		
Michael Radtke Same	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN	19.16	\$ <u>1388.95</u>
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description campaign meeting  5: Date Of Receipt: 12/16/17  6. Vendor Name & Address:		
Same	Shawarma Stop c 13903 19 Mile Rd. Sterling Heights, MI 48313	lick Here for Memo	Itemization
Contribution #3 PAC Receipt? Yes Name & Address:  Michael Radtke Same	4.	.61	<sub>s</sub> 1398.56
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description campaign meeting  5. Date Of Receipt: 12/19/17  6. Vendor Name & Address:		· ÷
Same Fund Raiser Contribution	Louies Ham & Corned Beef 165 S. Main St. Mt. Clemens, MI 48043	lick Here for Memo	Itemization
-	Page Subtota	\$44.77	
	Grand Total of all Schedules 1- (Complete on last page of Schedule		

Enter this total on line 6 of Summary Page

Page 6 of 7



Page 7 of 7

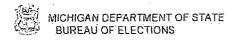
## ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 139377

CANDIDATE COMM	AITTEE 2. Committee Name Citizens for Micha	ael Radtke
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). Reportall 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 Salue 8. Cumulative for Election Cycle (Throug date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: Michael Radtke Same	4.	100.00 <sub>\$</sub> 1498.56
If over \$100.00 cumulative, please provide: Occupation: Consultant Employer Name & Business Address: Same Fund Raiser Contribution	Description fundraiser ticket  5. Date Of Receipt: 01/02/18  6. Vendor Name & Address:	ck Here for Memo Itemization
Contribution # 2 PAC Receipt? Yes Name & Address  If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	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 5. Date Of Receipt: 6. Vendor Name & Address:	\$
Fund Raiser Contribution	Clic	ck Here for Memo Itemization
Contribution #3 PAC Receipt? Yes Name & Address:  If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4.	\$sk Here for Memo Itemization
Fund Raiser Contribution	Page Subtotal	\$100.00
	Grand Total of all Schedules 1-IK (Complete on last page of Schedule)	\$946.61

Enter this total on line 6 of Summary Page



### **DEBTS AND OBLIGATIONS** SCHEDULE 1E

1. Committee I.D. Number

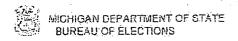
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CANDIDATE	COMMITTEE

Page 1 of 1

Citizens for Michael Radike

CANDIDATE COMMITTEE 2.0	ommittee Name	77 TOTAL TOTAL		
This Schedule itemizes:	<u> </u>			
a ✓ Debts and obligations owed by or forgiven the com (Che	mittee OR b. Debt ck either a or b. Use only for the pu	s and obligations owed <u>to</u> o	r forgiven <u>by</u> the co	mmittee.
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9 Outstanding Balance at close of this period (item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: In Kind Contributions	10/12/17 <sub>\$</sub> 820.76		
Michael Radtke Jr. 34205 Barrett Dr. Sterling Heights, MI 48312	5. <u>Date Debt Was Incurred:</u> 23/15/17 - 10/23/17  6. <u>Original Amount of Debt:</u> 3.209.24	10/12/17 \$ 961.95 10/12/17 \$ 392.00 10/12/17 \$ 98.00	\$ <u>2,272.71</u>	\$ 936,53
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by: Michael Radtke Jr:	4. Type: Loan  5. <u>Date Debt Was Jacurred</u> :	\$`		
34205 Barrett Dr. Sterling Heights, MI 48312	3/22/17 6. Original Amount of Debt:  \$ 2,000.00	\$	s <u>0.00</u>	\$ 2,000.00 FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	
Debt #3  Corp? Yes  Owed to or by:  Michael Radtke Jr.  34205 Barrett Dr.  Sterling Heights, MI 48312	4. Type: In Kind Contributions  5. <u>Date Debt Was Incurred</u> :  10/23/17-11/27/17  6. <u>Original Amount of Debt:</u> \$ 203 04	\$ \$ \$	\$_0.00	s_203,04 □ FORGIVEN,
If bank loan, name of endorser or guarantor:		Arr	nount Endorsed: \$_	
(Co A debt or obligation must be shown on this Schedu	mplete on last page of Schedule si	Grand Total c nowing amounts owed by or		Enter this total on line 12a "owed by" or line 12b "owed to" of the
this Campaign Statement or it was forgiven during t	he period covered by this Campa	ign Statement.	-	Summary Page



## DESTS AND OBLIGATIONS SCHEDULE 15

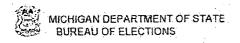
1. Committee I.D. Number

139377

SUHEDULE 15		Million - 2 Sha	0.0000000000000000000000000000000000000
and the professional devices and the control of the	2. Committee Name	Muzeus Idi	Michael Radike
CANDIDATE COMMITTEE	z. Gennine.ce name		

This Schedule itemizes:				<del></del>
	·			
a Poebts and obligations owed by or forgiven the com	nmiltee OR o. Deb	is and obligations owed to o	r forgiven <u>by</u> the co	mmittee.
	ck either a or b. Use only for the pr			
Name and Mailing Address of person, vendor or financial institution to whom debt is owed.	4. Type of Obligation (Description)	7. Date and amount of	8. Cumulative	9. Outstanding
I monicial institution to whom dependings.	5 Indicate date debt was	i each payment	payment to date on debt	Balance at close of this period
Check box to indicate whether debt is ewed to an	incurred		]	(Item 6 minus
incorporated pusiness. If debt is a bank loan, please provide information regarding the endorsers of	S. Indicate original amount			liem B)
guarantors, if any.	0. 645.			1
Debt #1 Corp? Yes	Loan			
Owed to or by:	4. Type Loan	<u>\$</u>		<u></u>
Michael Radtke Jr.	5. Date Dent Was Incurred:	\$	} }	
Same	10/31/17	\$		
	6. Original Amount of Debt		5 0.00	s_375.00
	\$ 375.00	S		
	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	\$	•	FORGIVEN
If bank loan, name of endorser or guarantor:			ount Endorsed: S _	
Debt #2 Corp? Yes			i	
Owed to of by:	4. Type: In-Kind Contributions	3	eler parecipi	
Michael Radtke Jr.	5. Dave Debt Was Incurred:	<b>š</b> .		
Same	3/15/17-10/22/17			
	6. Original Amount of Debt	<u> </u>	5 0.00	\$ 631.88
	<sub>\$</sub> 531.88	<u> </u>	<u> </u>	
		\$		FORGIVEN
If bank loan, name of endorser or guerantor:		Am	ount Endorséd: S	<del></del> .
Debt #3 Com? Yes	4. Type: In-Kind Contributions			
Owed to or by:	a. Obs.			*.
Michael Radtke Jr.	5. Date Debt Was Incurred:	\$		
Same	10/23/17-11/27/17	S:		‡.
	6. Original Amount of Debt:		S 0.00	8 47.53
·	s 47.53	<u> </u>	*	
;	<u> </u>	S		FORGIVEN
If bank loan, name of andorser or guarantor:		Δ'n	cunt Endorsed; \$	
			I	
		Page Subtotal	Outstanding debij	\$1,054.41
_		Grand Total o	fall Cabadulas IC	
(Co	mplete on last page of Schedule sl	noving amounts owed by or	to the committee)	tana ara-pa-pamanana ara-pa-pamanana ara-pa-pamanana ara-pa-pa-pamanana ara-pa-pa-pa-pa-pa-pa-pa-pa-pa-pa-pa-p
• •		*	· <del>·</del>	Enter this total on line 12a "owed
	a restaura con a constitui e e e e	سداد ده اوریزید بوشیدی		by"" or line 12b
A debt or obligation must be shown on this Schedul this Campaign Statement or it was forgiven during to	e it were was an ouistanding an he period covered by this Cappa	iount owad on it at the cid alon Statemant	sing date of	"owed to" of the
्राच्या च ्या, च्यार (प्राप्त <b>कार्य कार्य व्याप्त कार्य कार्य</b>	and the comment and a second second consister	ingir ermeéntifitée		Summary Page

Summary Page



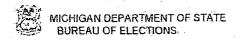
## **DEBTS AND OBLIGATIONS** SCHEDULE 1E

1. Committee I.D. Number

139377

	*		
CANDID	ATE	COMM	ITTEE

CHINDIDA IL COMMINI I ILL				
This Schedule itemizes:				
a $\label{eq:decomposition}$ Debts and obligations owed by or forgiven the com-	mittee OR b. Debt ok either a or b. Use only for the pu	s and obligations owed <u>to</u> ourpose checked.)	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 owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: In Kind Contributions	\$		
Michael Radtke	5. Date Debt Was Incurred:	\$		
Same	11/28/17-7/20/18	5		
,	6. Original Amount of Debt		\$ 0.00	\$ 339.74
·	s 339.74	\$		FORGIVEN
		5	.1	
If bank loan, name of endorser or guarantor:		Amo	unt Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type: Loan	\$		
Michael Radtke	5. Date Debt Was Incurred:	\$		
Same	6/27/18			
	6. Original Amount of Debt:		s 0.00	\$ 700.00
	\$_700.00		.i	FORGIVEN
		<u> </u>		
If bank loan, name of endorser or guarantor.		Am	ount Endorsed: \$	
Debt #3 Ccrp? Yes Owed to or by:	4. Type: In Kind Contributions	\$.		
Michael Radtke	5. <u>Date Debt Was Incurred</u> :	\$	:	
Same	11/28/17-7/20/18	\$		
	6. Original Amount of Debt:	<u>\$</u>	\$ 0.00	\$ 262.10
	<u>\$_262.10</u>			FORGIVEN
• · · · · · · · · · · · · · · · · · · ·		<u> </u>		17 J.
If bank loan, name of endorser or guarantor;		An	ount Endorsed: \$	
		Page Subtotal	Outstanding debt)	\$1,301.84
(Co	implete on last page of Schedule s	Grand Total o	fall Schedules 1E to the committee)	
·	· · · · · · · · · · · · · · · · · · ·		,	Enter this total on line 12a "owed
A debt or obligation must be shown on this Schedu this Campaigh Statement or it was forgiven during t		nount owed on it at the clo	osing date of	by or line 12b "owed to" of the Summary Page



## **DEBTS AND OBLIGATIONS** SCHEDULE 1E

1. Committee I.D. Number

139377

Citizens for Michael Radtke

CANDIDATE COMMITTEE	ommace name		<del></del>	
This Schedule itemizes:			·····	
a ✓ Debts and obligations owed by or forgiven the com (Che	mittee OR b. Debt	s and obligations owed <u>to</u> ourpose checked.)	r forgiven <u>by</u> the co	mmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed.	4. Type of Obligation     (Description)     5. Indicate date debt was	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period
Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	incurred 6. Indicate original amount of debt		gate on debt	(Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: In Kind Contributions	<u> </u>		
Michael Radtke	5. Date Debt Was Incurred:	\$.		
Same	11/28/17 - 7/20/18	\$		
	6. Original Amount of Debt	5	s <u>0.00</u>	\$ 144.77
	s_144.77			FORGIVEN
If bank loan, name of endorser or guarantor:	<u>.</u> .	<u> </u>		
		Amo	ount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type:	\$		
•	5. Date Debt Was Incurred:	e		
	6. Original Amount of Debt:	<u> </u>	s	\$
	\$	<u> </u>		
		.\$		FORGIVEN
If bank loan, name of endorser or guarantor:		An	ount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type: In Kind Contributions	5		· .
Michael Radtke	5. Date Debt Was Incurred:	\$		
Same	* <del>************************************</del>	· ·s		
	6. Original Amount of Debt:	\$ \$	\$	\$
	<u>\$</u>	<u> </u>		FORGIVEN
		<u> </u>		· · · · · · · · · · · · · · · · · · ·
If bank loan, name of endorser or guarantor:		An	nount Endorsed: \$_	
		Page Subtotal	(Outstanding debt)	\$144.77
(Co	implete on last page of Schedule s	Grand Total howing amounts owed by o	of all Schedules 1E r to the committee)	\$5,640.59
		***		Enter this total on line 12a "owed
A debt or obligation must be shown on this Schedulinis Campaign Statement or it was forgiven during t			osing date of	by" or line 12b "owed to" of the Summary Page