



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: <u>10/21/19</u> to <u>12/31/19</u>		
4. Candidate Last Name Grot	First Name Stanley	M.I. T
4a. Office Sought Including District # or Community Served (If applicable) Board Member - Local - Shelby Township Clerk		
4b. County of Residence MACOMB		
6. Treasurer's Name & Residential Address Sylvia Grot 11927 Hiawatha Drive Shelby Township, MI 48315		
Area Code & Phone <u>(586) 677-2002</u>		
8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) n/a		
Area Code and Phone _____		

1. Committee I.D. Number 138846
2. Committee Name CTE Stanley T. Grot
5. Committee's Mailing Address 11927 Hiawatha Drive Shelby Township, MI 48315
Area Code and Phone <u>(586) 677-2002</u> 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.
7. Treasurer's Business Address Same
Area Code and Phone _____

9. TYPE OF STATEMENT	
9a. <input type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election	
Pre-Election or Post-Election Statement relates to:	
<input type="checkbox"/> Primary	
<input type="checkbox"/> General	
<input type="checkbox"/> Convention	
<input type="checkbox"/> Special	
<input type="checkbox"/> School	
<input type="checkbox"/> Caucus	
Date of Election, Convention or Caucus <u>08/04/20</u>	

Required ONLY if candidate is not on the ballot for the current year:	
<input type="checkbox"/> July Quarterly	
<input type="checkbox"/> October Quarterly	
9c. <input checked="" type="checkbox"/> Annual Statement (2019) Coverage Year	
9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)	

9e. Dissolution of Candidate Committee	
<input type="checkbox"/> 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	Sylvia Grot	Signature	<u>Sylvia Grot</u>	Date	<u>01/17/2020</u>
Candidate	Stanley Grot	Signature	<u>Stanley Grot</u>	Date	<u>01/17/2020</u>



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 138846

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name CTE Stanley T. Grot

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>3,762.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>\$3,762.00</u>	(18.) \$ <u>\$16,049.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u></u>	(19.) \$ <u></u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>\$3,762.00</u>	(20.) \$ <u>\$16,049.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u></u>	(21.) \$ <u></u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u></u>	(22.) \$ <u></u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>\$447.92</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u></u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u></u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>\$447.92</u>	(23.) \$ <u>\$1,059.92</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u></u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u></u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	<u></u>	(24.) \$ <u></u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>\$1,090.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u></u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>\$12,514.76</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>\$3,762.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>\$16,276.76</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>\$447.92</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>\$15,828.84</u>	*



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 138846

2. Committee Name CTE Stanley T. Grot

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 10/24/19

Name & Address:

GJ LaRouche
37461 Clubhouse Drive
Sterling Heights, MI 48310

\$ 30.00

\$ 30.00

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

Occupation _____ Employer _____

Business Address _____

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

[Click Here for Memo Itemization](#)

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 10/02/19

Name & Address

David Elya
48443 Pinewood Court
Shelby Township, MI 48315

\$ 30.00

\$ 30.00

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

Occupation _____ Employer _____

Business Address _____

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

[Click Here for Memo Itemization](#)

3. Contribution # 3 PAC Receipt? ☐ YES

4. Date of Receipt 10/02/19

Name & Address:

Lenore Kurek
69504 Saxon Drive
Bruce Township, MI 48065

\$ 30.00

\$ 80.00

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

Occupation _____ Employer _____

Business Address _____

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

[Click Here for Memo Itemization](#)

3. Contribution # 4 PAC Receipt? ☐ YES

4. Date of Receipt 10/18/19

Name & Address

John Dziwanowski
55577 Hearthside Drive
Shelby Township, MI 48316

\$ 50.00

\$ 50.00

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

Occupation _____ Employer _____

Business Address _____

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

[Click Here for Memo Itemization](#)

Page Subtotal

\$140.00

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138846
2. Committee Name CTE Stanley T. Grot

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>10/24/19</u>	
Name & Address: Rosemary Grzywacz 11109 Glenis Sterling Heights, MI 48312		\$ <u>50.00</u>	\$ <u>50.00</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>10/24/19</u>	
Name & Address: Theodore Hurd 57695 Campground Road Washington, MI 48094		\$ <u>60.00</u>	\$ <u>60.00</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 # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/24/19</u>	
Name & Address: Gaylene Hunter 11469 Richmond Washington, MI 48094		\$ <u>50.00</u>	\$ <u>50.00</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 # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/24/19</u>	
Name & Address: Clifford Frost 2629 Irma Street Warren, MI 48092		\$ <u>60.00</u>	\$ <u>160.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Broker</u> Employer <u>Century 21 AAA</u> Business Address <u>40682 Ryan Road, Sterling Heights, MI 48310</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 \$220.00

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 138846

2. Committee Name CTE Stanley T. Grot

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>10/24/19</u>	
Name & Address: Don VanSyckel 41128 Ginger Court Sterling Heights, MI 48314		\$ <u>60.00</u>	\$ <u>260.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>General Dynamics</u> Business Address <u>38500 Mound Road, Sterling Heights, MI 48310</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>10/01/19</u>	
Name & Address: Christine Comaty 60541 Fawnbrook Court Washington, MI 48094		\$ <u>60.00</u>	\$ <u>260.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Accountant</u> Employer <u>Decra-Scape, Inc.</u> Business Address <u>40110 Mound Road, Sterling Heights, MI 48310</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>10/24/19</u>	
Name & Address: Gary Boike 14139 Lowe Drive Warren, MI 48088		\$ <u>60.00</u>	\$ <u>60.00</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 # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/24/19</u>	
Name & Address: Donald Brown 6515 Old Coach Trail Washington, MI 48094		\$ <u>100.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>County Commissioner</u> Employer <u>Macomb County</u> Business Address <u>1 S. Main Street, 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 \$280.00

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 138846

2. Committee Name CTE Stanley T. Grot

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>10/24/19</u>	
Name & Address: Kurt Broadbridge 45619 Thorn Tree Lane Macomb, MI 48044		\$ <u>200.00</u>	\$ <u>700.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Spectrum Innovations, Inc.</u> Business Address <u>440 Burroughs Street, Suite 129, Detroit, MI 48202</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>10/23/19</u>	
Name & Address: Rob Huth 2486 Hawthorne Drive Shelby Township, MI 48316		\$ <u>70.00</u>	\$ <u>270.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Kirk Huth Lange Badamalmenti</u> Business Address <u>19500 Hall Road, Clinton Township, 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>10/23/19</u>	
Name & Address: Bob Kirk 37529 Hidden Valley Court Clinton Township, MI 48036		\$ <u>70.00</u>	\$ <u>270.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Kirk Huth Lange Badamalmenti</u> Business Address <u>19500 Hall Road, Clinton Township, 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 # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/23/19</u>	
Name & Address: Raechel Badalamenti 52792 Sable Court Shelby Township, MI 48315		\$ <u>70.00</u>	\$ <u>270.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Kirk Huth Lange Badamalmenti</u> Business Address <u>19500 Hall Road, Clinton Township, 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	

Page Subtotal \$410.00

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 138846

2. Committee Name CTE Stanley T. Grot

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>10/24/19</u> Name & Address: Catherine Smith 20200 21 Mile Road Macomb, MI 48044		\$ <u>60.00</u>	\$ <u>110.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</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>10/19/19</u> Name & Address: Anna Ford 15521 Grainger Drive Clinton Township, MI 48038		\$ <u>60.00</u>	\$ <u>260.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</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>10/24/19</u> Name & Address: Richard Kolasinski 14795 Patterson Drive Shelby Township, MI 48315		\$ <u>60.00</u>	\$ <u>160.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</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>10/24/19</u> Name & Address: Greg Childs 30247 Lund Warren, MI 48093		\$ <u>30.00</u>	\$ <u>30.00</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 **\$210.00**

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 138846

2. Committee Name CTE Stanley T. Grot

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>10/23/19</u> Name & Address: Mark Forton 48143 Mallard Drive Chesterfield, MI 48047		\$ <u>30.00</u>	\$ <u>70.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</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>10/24/19</u> Name & Address: Ryan Fantuzzi 360 Minot Street Romeo, MI 48065		\$ <u>30.00</u>	\$ <u>30.00</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 # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/12/19</u> Name & Address: Catherine Anderson 111 Lincoln Street Mt. Clemens, MI 48043		\$ <u>30.00</u>	\$ <u>80.00</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 # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/24/19</u> Name & Address: Mark Fredal 44056 Grinko Drive Sterling Heights, MI 48314		\$ <u>30.00</u>	\$ <u>30.00</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 \$120.00

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

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 138846

2. Committee Name CTE Stanley T. Grot

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>11/05/19</u> Name & Address: Dawn Dodge 297 North Drive Wyandotte, MI 48192		\$ <u>60.00</u>	\$ <u>60.00</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>10/24/19</u> Name & Address: Joseph Gorak 13199 Van Pamel Drive Shelby Township, MI 48315		\$ <u>30.00</u>	\$ <u>530.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</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>10/24/19</u> Name & Address: Lynda Wilson 34733 Fargo Drive Sterling Heights, MI 48312		\$ <u>30.00</u>	\$ <u>30.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</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>10/24/19</u> Name & Address: Paul Smith 41280 Utica Road Sterling Heights, MI 48313		\$ <u>32.00</u>	\$ <u>209.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</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 \$152.00

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

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line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138846
2. Committee Name CTE Stanley T. Grot

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>10/24/19</u> Name & Address: Michael Flynn 53218 Providence East Shelby Township, MI 48316		\$ <u>30.00</u>	\$ <u>30.00</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>10/24/19</u> Name & Address: Cindy Olsen 5430 Seven Lakes Drive North Washington, MI 48095		\$ <u>30.00</u>	\$ <u>30.00</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 # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/24/19</u> Name & Address: Craig Cowper 47439 Remer Avenue Shelby Township, MI 48317		\$ <u>30.00</u>	\$ <u>230.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Deputy Clerk</u> Employer <u>Shelby Township</u> Business Address <u>52700 Van Dyke Avenue, Shelby Township, 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 # 4 PAC Receipt? <input checked="" type="checkbox"/> YES 4. Date of Receipt <u>12/05/19</u> Name & Address: Stan Grot for Michigan Republicans 11927 Hiawatha Drive Shelby Township, MI 48315		\$ <u>1000.00</u>	\$ <u>1000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Committee ID 517987</u> Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$1,090.00**

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 138846

2. Committee Name CTE Stanley T. Grot

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 11/05/19

Name & Address:

Stanley T. Grot
11927 Hiawatha Drive
Shelby Township, MI 48315

\$ 700.00

\$ 700.00

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

Occupation Township Clerk Employer Shelby Township

[Click Here for Memo Itemization](#)

Business Address 52700 Van Dyke Avenue, Shelby Township, MI 48316

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 12/05/19

Name & Address

Stanley T. Grot
11927 Hiawatha Drive
Shelby Township, MI 48315

\$ \$390.00

\$ \$1,090.00

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

Occupation Township Clerk Employer Shelby Township

[Click Here for Memo Itemization](#)

Business Address 52700 Van Dyke Avenue, Shelby Township, MI 48316

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 12/15/19

Name & Address:

Maria Grot
1391 Alameola Blvd
Troy, MI 48085

\$ 50.00

\$ 100.00

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

Occupation Retired Employer Retired

[Click Here for Memo Itemization](#)

Business Address n/a

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:

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

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

Page Subtotal **\$1,140.00**

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

\$3,762.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 138846
2. Committee Name CTE Stanley T. Grot

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Esplendidos Address 50285 Mound Road Shelby Township, MI 48317 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Food / Beverage</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/24/19</u> Date	\$ <u>341.92</u>
Expenditure #2 Name Shelby Township Jingle Bell Run Address 51690 Van Dyke Avenue Shelby Township, MI 48316 <input type="checkbox"/> Fund Raiser	Purpose: <u>Sponsor</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/02/19</u> Date	\$ <u>100.00</u>
Expenditure #3 Name Credit Union One Address 400 E. Nine Mile Road Ferndale, MI 48220 <input type="checkbox"/> Fund Raiser	Purpose: <u>Bank Fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/31/19</u> Date	\$ <u>2.00</u>
Expenditure #4 Name Credit Union One Address 400 E. Nine Mile Road Ferndale, MI 48220 <input type="checkbox"/> Fund Raiser	Purpose: <u>Bank Fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/30/19</u> Date	\$ <u>2.00</u>
Expenditure #5 Name Credit Union One Address 400 E. Nine Mile Road Ferndale, MI 48220 <input type="checkbox"/> Fund Raiser	Purpose: <u>Bank Fee</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/31/19</u> Date	\$ <u>2.00</u>

Subtotal this page **\$447.92**

Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$447.92**

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 138846
2. Committee Name CTE Stanley T. Grot

This Schedule itemizes:

a. ☒ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

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 endorser 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? <input type="checkbox"/> Yes Owed to or by: Stanley T. Grot 11927 Hiawatha Drive Shelby Township, MI 48315 by CTE Stanley T. Grot	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>11/05/19</u> 6. <u>Original Amount of Debt:</u> <u>\$ 700.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$ 700.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Stanley T. Grot 11927 Hiawatha Drive Shelby Township, MI 48315 by CTE Stanley T. Grot	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>12/5/19</u> 6. <u>Original Amount of Debt:</u> <u>\$ 390.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$ 390.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) **\$1,090.00**

(Complete on last page of Schedule showing amounts owed by or to the committee) Grand Total of all Schedules 1E **\$1,090.00**

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

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138846
2. Committee Name CTE Stanley T. Grot

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>10/24/19</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>50</u>	5. Type of Fund Raising Activity <u>Reception w/Food and Beverage</u>	6. Address and Name (If any) of the place where the activity was held. <u>50285 Mound Road</u> <u>Shelby Twp, MI 4831</u> <input type="checkbox"/> Private Residence
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7. Total Contributions \$1,622.00
8. Other Receipts \$0.00
9. Gross Receipts (Add lines 7 and 8) \$1,622.00
10. Total Cost of Event \$341.92
(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 (%)
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

- 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.