

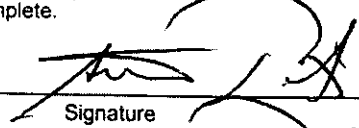
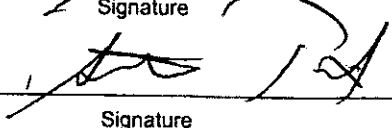


MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**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.

1. Committee I.D. Number 138881		3. This Statement covers From: <u>10/21/19</u> to <u>12-31-2019</u>	
2. Committee Name CTE SAM PREVITI		4. Candidate Last Name PREVITI First Name SEBASTIAN M.I. S 4a. Office Sought Including District # or Community Served (If applicable) WASHINGTON TWP TRUSTEE <input checked="" type="checkbox"/> 4b. County of Residence MACOMB <input checked="" type="checkbox"/>	
5. Committee's Mailing Address 61614 COTSWOLD DRIVE WASHINGTON, MI 48094 Area Code and Phone <u>(586) 206-5185</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.		6. Treasurer's Name & Residential Address SEBASTIAN PREVITI 61614 COTSWOLD DRIVE WASHINGTON, MI 48094 Area Code & Phone <u>(586) 206-5185</u>	
7. Treasurer's Business Address 61614 COTSWOLD DRIVE WASHINGTON, MI 48094 Area Code and Phone <u>(586) 206-5185</u>		8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) SEBASTIAN PREVITI 61614 COTSWOLD DRIVE WASHINGTON, MI 48094 Area Code and Phone <u>(586) 206-5185</u>	
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 _____		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 (<u>2019</u>) 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 SEBASTIAN PREVITI Type or Print Name		Signature  Date <u>1-31-2020</u>	
Candidate SEBASTIAN PREVITI Type or Print Name		Signature  Date <u>1-31-2020</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 138881

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name CTE SAM PREVITI

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>750.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u></u>	(18.) \$ <u></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>\$750.00</u>	(20.) \$ <u>\$13,975.00</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>\$4,040.80</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>\$4,040.80</u>	(23.) \$ <u>\$13,379.80</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></u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u>\$16,639.97</u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>\$3,716.92</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>\$750.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>\$4,466.92</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>\$4,040.80</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>\$426.12</u>	*



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 138881

2. Committee Name CTE SAM PREVITI

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report 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 10/31/20

Name & Address:

LUCIDO PAC FOR A BURGHTER TOMORROW
39999 GARFIELD
CLINTON TOWNSHIP, MI 48038

\$ 250.00 \$ 250.00

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

Occupation SELF EMPLOYED Employer STATE SENATOR

[Click Here for Memo Itemization](#)

Business Address 39999 GARFIELD ROAD, CLINTON TOWNSHIP, MI 48038

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

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 12/15/19

Name & Address:

LARRY ROCCA
15679 MORAVIAN
CLINTON TOWNSHIP, MI 48036

\$ 250.00 \$ 250.00

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

Occupation TREASURER Employer MACOMB COUNTY

[Click Here for Memo Itemization](#)

Business Address 41 N. MAIN - MT. CLEMENS, MI 48043

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:

DOUG WOZNAK
51543 VAN DYKE
SHELBY TOWNSHIP, MI 48315

\$ 150.00 \$ 150.00

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

Occupation ATTORNEY Employer SELF EMPLOYED

[Click Here for Memo Itemization](#)

Business Address 51543 VAN DYKE - SHELBY TOWNSHIP, MI 48315

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

3. Contribution # 4 PAC Receipt? ☐ YES

4. Date of Receipt 12/15/19

Name & Address:

CTE DOUG WOZNAK
51543 VAN DYKE
SHELBY TOWNSHIP, MI 48315

\$ 100.00 \$ 100.00

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

Occupation STATE REP Employer STATE OF MICHIGAN

[Click Here for Memo Itemization](#)

Business Address LANSING, MI

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

Page Subtotal \$ 750.00

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

\$ 750.00

Enter this total on
line 3a of Summary
Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number **138881**
2. Committee Name **CTE SAM PREVITI**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name ROMEO PRINTING Address 225 MAIN STREET ROMEO, MI 48065 <input type="checkbox"/> Fund Raiser	Purpose: MAILER <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	12/20/19 Date	\$ 2403.00 Click Here for Memo Itemization Type
Expenditure #2 Name CHEF RAMONE CATERING Address 370 N. GRATIOT CLINTON TOWNSHIP, MI 48036 <input type="checkbox"/> Fund Raiser	Purpose: PANCAKE BREAKFAST FOR RESIDENTS <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/22/19 Date	\$ 1187.80 Click Here for Memo Itemization Type
Expenditure #3 Name WASHINGTON LIONS CLUB Address 66580 VAN DYKE WASHINGTON, MI 48094 <input type="checkbox"/> Fund Raiser	Purpose: RENT FOR PANCAKE BREAKFAST <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/22/19 Date	\$ 450.00 Click Here for Memo Itemization Type
Expenditure #4 Name Address BLANK <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____ Click Here for Memo Itemization Type
Expenditure #5 Name Address BLANK <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____ Click Here for Memo Itemization Type

Subtotal this page **\$4,040.80**

Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$4,040.80**

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 138881

2. Committee Name CTE SEBASTIAN PREVITI FOR TRUSTEE

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: SEBASTIAN S. PREVITI 8903 INVERNESS DRIVE WASHINGTON, MI 48095	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>05/16/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 20.00</u>	\$ \$ \$ \$ \$	\$	\$ <u>20.00</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: SEBASTIAN S. PREVITI 8903 INVERNESS DRIVE WASHINGTON, MI 48095	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>05/23/2012</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1,652.60</u>	\$ \$ \$ \$ \$	\$	\$ <u>1,652.50</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: SEBASTIAN S. PREVITI 8903 INVERNESS DRIVE WASHINGTON, MI 48095	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>08/15/2012</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1,042.00</u>	\$ \$ \$ \$ \$	\$	\$ <u>1,042.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) **\$2,714.50**

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

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

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.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 138881
2. Committee Name CTE SEBASTIAN PREVITI FOR TRUSTEE

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.
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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 5 minus Item 8)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: SEBASTIAN S. PREVITI 8903 INVERNESS DRIVE WASHINGTON, MI 48095	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>07/01/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 310.00</u>	\$ \$ \$ \$ \$	\$	\$ <u>310.00</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: SEBASTIAN S. PREVITI 8903 INVERNESS DRIVE WASHINGTON, MI 48095	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>07/20/2012</u> 6. <u>Original Amount of Debt:</u> <u>\$ 74.06</u>	\$ \$ \$ \$ \$	\$	\$ <u>74.06</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: SEBASTIAN S. PREVITI 8903 INVERNESS DRIVE WASHINGTON, MI 48095	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>07/21/2012</u> 6. <u>Original Amount of Debt:</u> <u>\$ 225.00</u>	\$ \$ \$ \$ \$	\$	\$ <u>225.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) **\$609.06**

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

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

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.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 138881

2. Committee Name CTE SEBASTIAN PREVITI FOR TRUSTEE

This Schedule itemizes:				
<input type="checkbox"/> Debts and obligations owed by or forgiven the committee OR <input type="checkbox"/> 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: SEBASTIAN S. PREVITI 8903 INVERNESS DRIVE WASHINGTON, MI 48095	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>08/01/12</u> 6. <u>Original Amount of Debt:</u> <u>\$ 120.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$ 120.00</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: SEBASTIAN S. PREVITI 8903 INVERNESS DRIVE WASHINGTON, MI 48095	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>08/06/2012</u> 6. <u>Original Amount of Debt:</u> <u>\$ 74.06</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$ 74.06</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: SEBASTIAN S. PREVITI 8903 INVERNESS DRIVE WASHINGTON, MI 48095	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>05/01/16</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1,482.38</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$ 1,482.38</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Page Subtotal (Outstanding debt)				\$1,676.44
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

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.

Dec. 16. 2016 9:53AM

No. 0235 P. 7

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS
DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

 1. Committee I.D. Number 138881
 2. Committee Name CTE SEBASTIAN PREVITI FOR TRUSTEE

This Schedule itemizes:

☐ Debt and obligations owed by or forgiven the committee OR ☐ 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 guarantor, 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: SEBASTIAN S. PREVITI 8903 INVERNESS DRIVE WASHINGTON, MI 48095	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>07/18/16</u> 6. Original Amount of Debt: <u>\$ 7,750.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$ 7,750.00</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: SEBASTIAN S. PREVITI 8903 INVERNESS DRIVE WASHINGTON, MI 48095	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>09/15/2016</u> 6. Original Amount of Debt: <u>\$ 2,000.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$ 2,000.00</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: SEBASTIAN S. PREVITI 8903 Inverness Dr. Washington, MI 48095	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>12-1-2016</u> 6. Original Amount of Debt: <u>\$ 1,560.-</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$ 1,560.-</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Page Subtotal (Outstanding debt)				<u>11,310.-</u>
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				<u>11,310.-</u>

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

**DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE**

1. Committee ID Number 138881

2. Committee Name CTE SEBASTIAN PREVITI FOR TRUSTEE

This Schedule itemizes:

☐ Debts and obligations owed by or forgiven the committee OR ☐ 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 8 minus item 6)
Debt #1 Owed to or by: <input type="checkbox"/> Corp? <input type="checkbox"/> Yes SEBASTIAN S. PREVITI 8903 INVERNESS DR WASHINGTON, MI 48095	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>07/27/17</u> 6. Original Amount of Debt: <u>\$ 329.97</u>	\$ \$ \$ \$ \$	\$	\$ <u>329.97</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____	Amount Endorsed: \$ _____			
Debt #2 Owed to or by: <input type="checkbox"/> Corp? <input type="checkbox"/> Yes <i>BLANK</i>	4. Type: _____ 5. Date Debt Was Incurred: _____ 6. Original Amount of Debt: _____ \$ _____	\$ \$ \$ \$ \$	\$	\$ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____	Amount Endorsed: \$ _____			
Debt #3 Owed to or by: <input type="checkbox"/> Corp? <input type="checkbox"/> Yes <i>BLANK</i>	4. Type: _____ 5. Date Debt Was Incurred: _____ 6. Original Amount of Debt: _____ \$ _____	\$ \$ \$ \$ \$	\$	\$ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____	Amount Endorsed: \$ _____			
Page Subtotal (Outstanding debt)				\$329.97
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				\$16,639.97

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