

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in link and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement covers From			
1. Committee I.D. Number	4. Candidate Last Name	First Name	M.I.	
138846	Grot	Stanley	Ť	
2. Committee Name	4a. Office Sought Including District # or Community Served (If applicable) Board Member - Local - Shelby Township Clerk			
CTE Stanley T. Grot	4b. County of Residence MACOMB			
5. Committee's Mailing Address	6. Treasurer's Name & Reside	<u> </u>	- p	
11927 Hiawatha Drive	Sylvia Grot	(Marie a marique		
Shelby Township, MI 48315	11927 Hiawatha Drive Shelby Township, MI 48315			
		ii. 100 i Ç		
Area Code and Phone (586) 677-2002 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.	Area Code & Phone (586) 67	77-2002 <u>국</u> 국		
7. Treasurer's Business Address	8. Designated Record keeper	's Name and Mailing Address (If the	committee has a	
Same	Designated Record keeper)	E E E		
	n/a	<u> </u>	= =	
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		CLE Higa	$\dot{\Sigma}$	
Area Code and Phone	Area Code and Phone	EX.	32_	
9. TYPE OF STATEMENT		9e. Dissolution of Candidate Cor	mmittee	
Pre-Election OR 9b. Post-Election is not on the	NLY if candidate ballot for the :	By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here		
Pre-Election or Post-Election Statement relates to:		by discharged and forgiven, and no the committee. The committee has	langer callectible from	
Primary July Quart	erly	owes no lates fees or has any ousta	inding debt.	
Géneral October Q	luarterly	Euchor if the discolution about the second of the second		
Convention	7	Further, if the dissolution cannot be considered a request for the Reporti	granted, that this be ing Waiver.	
□Special 9c. [☑]	0020			
School School	al Statement (2019) Coverage Year	Effective date of dissolution	on .	
	ndment to Campaign Statement	<u> </u>		
(Com	plete Item 9á, 9b, 9c or 9e to ite which Statement is being	Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.		
Date of Election, Convention or Caucus	,			
08/04/20	-		J	
	!		1	
	Į.			
 Verification: I\We certify that all reasonable diligence was used my\our knowledge and belief the contents are true, accurate and co 	in the preparation of this stateme	ant and attached schedules (if any) a	nd to the best of	
Current Treasurer or Designated Record keeper Sylvia Grot	· Suller	(int)	2/04/2020	
Type or Print Name	Signature	Date Uz	2/04/2020	
Candidate Stanley Grot	, Skanley	Gnt o	2/04/2020	
Type or Print Name	Signature	Date		



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

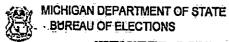
1. Committee I.D. Number 138846

2. Committee Name CTE Stanley T. Grot

line 3a of Summary

Page.

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:		
David Elya		
48443 Pinewood Court Shelby Township, MI 48315	_s 30.00	. 30.00
	\$ 30.00	\$ 30.00
5. If over \$100.00 cumulative, please provide:	Click Here t	for Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/24/19		
Lenore Kurek		
69504 Saxon Drive Bruce Township, MI 48065	_{\$} 30.00	\$ 80.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person V Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4: Date of Receipt 10/24/19		
John Dziwanowski 55577 Hearthside Drive Shelby Township, MI 48316	_{\$} 50.00	_{\$} 50.00
to desire the control of the process provides	。 新生物語で	ince forest.
Section of the sectio		
TO CONTROL TO SEE THE SECOND S		
Admire à Address		
Christine Comaty		
60541 Fawnbrook Court Washington, MI 48094	_s 60.00	260.00
5. If over \$100.00 cumulative, please provide:	<u> </u>	\$
Aggruphent	Click Here fo	r Memo Itemization
The state of the s		·
Business Address 40100 Mound Road, Sterling Heights, MI 48310		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$170.00	
Grand Total of All Schedules 1A		_
(Complete on last page of Schedule)	Enter this total on	۲



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ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 1:38846

2. Committee Name CTE Stanley T. Grot

Enter this total on

Pāge.

line 3a of Summary

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. Curnulative for Election Cycle for Each Contributor (Through date of receipt)	
3. Contribution # 1 Name & Address:	PAC Receipt?	YES 4. Date of Re	ceipt 10/24/19		
Anna Ford			-	_	
15521 Grainger Drive Clinton Township, MI 4	เชนุสซ			50 66	000.00
interi nominitali	10000			_s 60.00	_{\$} 260.00
5. If over \$100.00 cum	ılative, please pro			المالية المالية	
Occupation Retired	 	Employer Retired		Click Here	for Memo Itemization
Business Address			·		
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
Contribution #2 Name & Address	PAC Receipt?		celpt 10/24/19	4 M W W W	** ***********************************
Catherine Anderson					
111 Lincoln Street Mt. Clemens, Mi 4804	3			_{\$} 30.00	_s 80.00
-				*	- *
5. If over \$100.00 cumu	lative, please pro	vide:		Click Here t	or Memo Itemization
Occupation		Employer		•	
Business Address	<u> </u>	<u> </u>			
Type of Contribution:	Direct	Loan from a person	✓ Fund Raiser		
3. Contribution #3 Name & Address:	PAC Receipt?	YES 4. Date of Re	eceipt	-	· · · · · · · · · · · · · · · · · · ·
				\$ <u></u>	<u> </u>
5. If over \$100.00 cumu	lativę, please pro	vide:		Click Here fo	or Memo Itemization
Occupation		Employer	· · · · · · · · · · · · · · · · · · ·		
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution #4 Name & Address	PAC Receipt?	YES 4. Date of R	eceipt		,
	•				
				\$. S
5. If over \$100.00 cumu	lative, please pro	vide:		-	· · · · · · · · · · · · · · · · · · ·
Occupation				Click Here fo	r Memo Itemization
. ,	-	Employer	'		
Business Address		·			
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
•		 	Page Subtot	al \$90.00	
		, , , , , , , , , , , , , , , , , , ,	Grand Total of All Schedules 1	\$260.00	7
		(Col	mplete on last page of Schedul	<u></u>	