

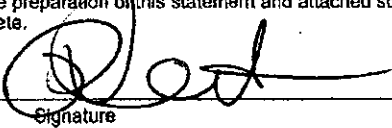
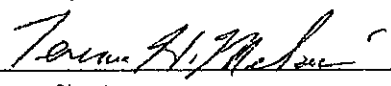


MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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 139793		3. This Statement covers From: 07/20/20 to 08/24/20	
2. Committee Name TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF		4. Candidate Last Name MEKOSKI First Name TERENCE M.I. H 4a. Office Sought Including District # or Community Served (If applicable) SHERIFF ☒ 4b. County of Residence MACOMB ☒	
5. Committee's Mailing Address 42211 Garfield Road, #238 Clinton Township, MI 48038 Area Code and Phone (586) 277-1136 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 Paula Verticchio P.O. Box 271 Washington, MI 48094 Area Code & Phone _____	
7. Treasurer's Business Address Paula Verticchio P.O. Box 271 Washington, MI 48094 Area Code and Phone _____		8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) Paula Verticchio P.O. Box 271 Washington, MI 48094 Area Code and Phone _____	
9. TYPE OF STATEMENT 9a. ☐ Pre-Election OR 9b. ☒ Post-Election Pre-Election or Post-Election Statement relates to: ☒ Primary ☐ General ☐ Convention ☐ Special ☐ School ☐ Caucus Date of Election, Convention or Caucus 08/04/20		Required ONLY if candidate is not on the ballot for the current year: ☐ July Quarterly ☐ October Quarterly 9c. ☐ Annual Statement (_____) Coverage Year 9d. ☐ Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.) 9e. Dissolution of Candidate Committee ☐ By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is hereby 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 Paula Verticchio Type or Print Name		 Signature Date 8/25/20	
Candidate Terence H. Mekoski Type or Print Name		 Signature Date 8/25/20	

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20 AUG 25 PM 1:54
MACOMB COUNTY CLERK
MI. ELECTIONS, MACOMB COUNTY



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 139793

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>15,250.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>\$15,250.00</u>	(18.) \$ <u>\$90,941.06</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u>\$0.00</u>	(19.) \$ <u>\$0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>\$15,250.00</u>	(20.) \$ <u>\$90,941.06</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>\$3,031.36</u>	(21.) \$ <u>\$11,157.77</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 8)	(7.) \$	<u>\$0.00</u>	(22.) \$ <u>\$0.00</u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>\$12,745.80</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>\$0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>\$0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>\$12,745.80</u>	(23.) \$ <u>\$88,692.50</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>\$0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>\$0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	<u>\$0.00</u>	(24.) \$ <u>\$0.00</u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>\$9,000.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u>\$0.00</u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>\$8,744.36</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>\$15,250.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>\$23,994.36</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>\$12,745.80</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>\$11,248.56</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139793

2. Committee Name TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF

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? ☐ YES 4. Date of Receipt <u>07/20/20</u> Name & Address: David Szydlowski 1744 Deepwood Circle Rochester, MI 48065 5. If over \$100.00 cumulative, please provide: Occupation <u>Deputy Sheriff</u> Employer <u>OCSO</u> Business Address <u>1201 N Telegraph, Pontiac, MI 48341</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>250.00</u>	\$ <u>1350.00</u>
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/20/20</u> Name & Address: Dov Lustig 240 Daines Street Birmingham, MI 48009 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Lustig Law Firm</u> Business Address <u>240 Daines Street, Birmingham, MI 48009</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/23/20</u> Name & Address: David Jaye 25810 Hickory Blvd., #603 Bonita Springs, FL 34134 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>50.00</u>	\$ <u>50.00</u>
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/23/20</u> Name & Address: Marie Gehringer 13329 Wyndemere Cir, Unit 24 Sterling Heights, MI 48313 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>100.00</u>	\$ <u>100.00</u>

Page Subtotal \$900.00

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 139793

2. Committee Name TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF

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 07/23/20

Name & Address:

Christine Glodich
36815 Park Place Dr.
Sterling Heights, MI 48310

\$ 10.00

\$ 10.00

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 07/23/20

Name & Address:

Jay Robb
4180 18 1/2 Mile Rd.
Sterling Heights, MI 48314

\$ 100.00

\$ 100.00

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 07/23/20

Name & Address:

Irene Marek
14915 Dover Ct.
Shelby Twp, MI 48315

\$ 25.00

\$ 25.00

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

[Click Here for Memo Itemization](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 07/28/20

Name & Address:

Max Fellsman
14612 Alpena Drive
Sterling Heights, MI 48313

\$ 50.00

\$ 325.00

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

[Click Here for Memo Itemization](#)

Occupation Consultant Employer City of Warren

Business Address 1 City Square, Warren, MI 48089

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

Page Subtotal \$185.00

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 139793

2. Committee Name TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF

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? ☐ YES 4. Date of Receipt <u>07/27/20</u> Name & Address: Carol Biondo 56390 Birkdale Macomb, MI 48042		\$ 250.00	\$ 450.00
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Decor Statuette Inc.</u> Business Address <u>43742 Mound Road, Sterling Heights, MI 48314</u> 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 <u>07/27/20</u> Name & Address: Michael Zeer 2785 Oak Trail Sterling Heights, MI 48314		\$ 100.00	\$ 100.00
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 <u>07/27/20</u> Name & Address: Michlene Trosper 45410 Nottingham Macomb, MI 48044		\$ 100.00	\$ 100.00
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 <u>07/29/20</u> Name & Address: John McNamara 23336 Courtland Ave. Eastpointe, MI 48021		\$ 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 **\$500.00**

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 139793
2. Committee Name TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF

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? ☐ YES	4. Date of Receipt <u>07/29/20</u>	
Name & Address: Motaz Haddad 34691 Kimberly Drive 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: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/29/20</u>	
Name & Address: Robert Kowalewaki 22464 Louise St. Clair Shores, MI 48081		\$ <u>100.00</u>	\$ <u>100.00</u>
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 <u>07/30/20</u>	
Name & Address: Francesca Biondo 16273 Kingsway Drive Macomb, MI 48044		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u> Employer <u>Creative Counters Inc.</u> Business Address <u>51458 Oro Drive, Shelby Township, MI 48315</u> 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 <u>07/30/20</u>	
Name & Address: Jim Safiedine 4767 Stoneleigh Drive Bloomfield Hills, MI 48302		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Safiedine Oil</u> Business Address <u>4767 Stoneleigh Drive, Bloomfield Hills, MI 48302</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$750.00**

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139793

2. Committee Name TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF

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3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/30/20</u> Name & Address: <u>Thomas Sokol</u> <u>20331 Vine Drive</u> <u>Macomb, MI 48044</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Self Employed</u> Employer <u>Sokol Insurance</u> Business Address <u>20371 Hall Road, Macomb, MI 48044</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>100.00</u>	\$ <u>300.00</u>
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/30/20</u> Name & Address: <u>Pauline Basilico</u> <u>12970 Michael Drive</u> <u>Shelby Township, MI 48315</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>150.00</u>	\$ <u>275.00</u>
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/30/20</u> Name & Address: <u>Alan Harajli</u> <u>700 Ridgemont</u> <u>Dearborn, MI 48124</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Coast Convenience Stores</u> Business Address <u>22977 23 Mile, Macomb, MI 48042</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/30/20</u> Name & Address: <u>Charles Regan Shaw PLC</u> <u>54802 Boyce Canyon</u> <u>Macomb, MI 48042</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Charles Regan Shaw</u> Employer <u>Charles Regan Shaw PLC</u> Business Address <u>16950 19 Mile Road, Suite 2, Clinton Township, MI 48038</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>250.00</u>	\$ <u>250.00</u>

Page Subtotal \$1,000.00

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139793

2. Committee Name TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/30/20</u> Name & Address: <u>Olivia R. El Akkari</u> <u>26584 Harvest Drive</u> <u>Chesterfield, MI 48051</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>PG Marathon</u> Business Address <u>186 N. Gratiot, Mount Clemens, MI 48043</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>300.00</u>	\$ <u>300.00</u>
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/30/20</u> Name & Address: <u>Elias Diamonds</u> <u>484 W. 14 Mile Road</u> <u>Troy, MI 48083</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Peter Ansava/Elias Diamonds</u> Business Address <u>484 W. 14 Mile Road, Troy, MI 48083</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>100.00</u>	\$ <u>100.00</u>
		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/30/20</u> Name & Address: <u>Joni Nabih Warra</u> <u>25525 W. 8 Mile Road</u> <u>Redford, MI 48240</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Royce Lighting</u> Business Address <u>34899 Bretton Drive, Livonia, MI 48152</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>250.00</u>	\$ <u>250.00</u>
		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/30/20</u> Name & Address: <u>Cloud Networks Professionals</u> <u>6 Hampton Court</u> <u>Dearborn, MI 48374</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Farely Hayjau/Cloud Network Professionals</u> Business Address <u>38701 7 Mile Road, Suite 290, Livonia, MI 48152</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
		Click Here for Memo Itemization	

Page Subtotal **\$1,150.00**

Grand Total of All Schedules 1A
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Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139793

2. Committee Name TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF

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? ☐ YES 4. Date of Receipt <u>07/30/20</u> Name & Address: <u>Josephine Szydlowski</u> <u>PO Box 380622</u> <u>Clinton Township, MI 48038</u>		\$ <u>200.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Administrative Assistant</u> Employer <u>Henry Ford Hospital</u> Business Address <u>15855 19 Mile, Clinton Township, MI 48038</u> 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 <u>07/30/20</u> Name & Address: <u>Larry Jones</u> <u>80854 Woodridge Ln.</u> <u>Romeo, MI 48065</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
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 <u>07/30/20</u> Name & Address: <u>Mark Grabow</u> <u>20425 - 25 Mile Road</u> <u>Macomb, MI 48042</u>		\$ <u>100.00</u>	\$ <u>100.00</u>
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 <u>07/30/20</u> Name & Address: <u>Hussein Jawad</u> <u>5016 Heather Drive, Apt. 111</u> <u>Deaborn, MI 48126</u>		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Self-Employed</u> Employer _____ Business Address <u>5016 Heather Drive, Apt. 111, Deaborn, MI 48126</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$600.00

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

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line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139793

2. Committee Name TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF

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? ☐ YES 4. Date of Receipt <u>07/30/20</u> Name & Address: Mohamed Al-Lahham 37643 Fiore Trail Clinton Township, MI 48036 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>8 Bach Property</u> Business Address <u>26741 Gratiot, Roseville, MI 48066</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>1250.00</u>	\$ <u>1250.00</u>
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/30/20</u> Name & Address: Mustafa Al-Lahham 18500 Tara Drive Clinton Township, MI 48036 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>City Automotive</u> Business Address <u>21427 Gratiot, Eastpointe, MI 48036</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>1250.00</u>	\$ <u>1250.00</u>
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/30/20</u> Name & Address: Amar Toma 53188 Pondview Drive Shelby Township, MI 48315 5. If over \$100.00 cumulative, please provide: Occupation <u>Self Employed</u> Employer <u>Amar Toma Holdings</u> Business Address <u>45185 Market Street, Shelby Township, MI 48315</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>250.00</u>	\$ <u>1000.00</u>
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/30/20</u> Name & Address: Ali Jawad 201 Hampshire Court Dearborn, MI 48124 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Armada Oil & Gas Company</u> Business Address <u>3335 Greenfield Road, Melvindale, MI 48122</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>

Page Subtotal \$3,250.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139793

2. Committee Name TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF

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? ☐ YES 4. Date of Receipt <u>07/30/20</u> Name & Address: <u>Oussama A. Siblani</u> <u>5706 Chase Road</u> <u>Dearborn, MI 48126</u>		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Publisher</u> Employer <u>Arab American Newspaper</u> Business Address <u>5706 Chase Road, Dearborn, MI 48126</u> 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 <u>07/30/20</u> Name & Address: <u>Derrick E. George</u> <u>444 South Washington</u> <u>Royal Oak, MI 48067</u>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Derrick E. George, Esq.</u> Business Address <u>444 South Washington, Royal Oak, MI 48067</u> 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 <u>07/30/20</u> Name & Address: <u>Randy Babi</u> <u>2598 Ivanhoe Drive</u> <u>West Bloomfield, MI 48324</u>		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Babi Law Firm PLLC</u> Business Address <u>8424 E. Twelve Mile, Suite 200, Warren, MI 48093</u> 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 <u>07/30/20</u> Name & Address: <u>Amer Shaba</u> <u>49727 Decker</u> <u>Shelby Township, MI 48317</u>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Self employed</u> Employer _____ Business Address <u>49727 Decker, Shelby Township, MI 48317</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$1,500.00

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 139793

2. Committee Name TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF

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? ☐ YES 4. Date of Receipt <u>07/30/20</u> Name & Address: Elizabeth Fredal 44056 Ginkgo Drive Sterling Heights, MI 48314 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>75.00</u>	\$ <u>75.00</u>
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/30/20</u> Name & Address: William MI Matouk 63 Michaux Court Grosse Pointe Woods, MI 48236 5. If over \$100.00 cumulative, please provide: Occupation <u>Self employed</u> Employer _____ Business Address <u>63 Michaux Court, Grosse Pointe Woods, MI 48236</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/03/20</u> Name & Address: Renee Murad 56412 Newport Drive Shelby Township, MI 48316 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>25.00</u>	\$ <u>25.00</u>
		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/03/20</u> Name & Address: Bryan Winsten 34701 E. Wilma Ct. Chesterfield, MI 48047 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>100.00</u>	\$ <u>100.00</u>
		Click Here for Memo Itemization	

Page Subtotal \$700.00

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 139793

2. Committee Name TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF

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? ☐ YES 4. Date of Receipt <u>08/04/20</u> Name & Address: <u>Amar Toma</u> <u>53188 Pondview</u> <u>Shelby Township, MI 48315</u>		\$ <u>500.00</u>	\$ <u>1000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Self employed</u> Employer <u>Amar Toma Holdings</u> Business Address <u>45185 Market Street, Shelby Township, MI 48315</u> 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 <u>08/04/20</u> Name & Address: <u>Lula Gjurashaj</u> <u>55973 Red Cedar Court</u> <u>Shelby Township, MI 48315</u>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u> Employer <u>Ford Motor Company</u> Business Address <u>41111 Van Dyke, Sterling Heights, MI 48314</u> 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 <u>08/04/20</u> Name & Address: <u>Anne Polizzi</u> <u>7089 24 Mile Road</u> <u>Shelby Township, MI 48316</u>		\$ <u>300.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Self employed</u> Employer <u>Palermo Construction</u> Business Address <u>7089 24 Mile Road, Shelby Township, MI 48316</u> 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 <u>08/04/20</u> Name & Address: <u>Matthew Aubrey</u> <u>53400 Tundra Drive</u> <u>Shelby Township, MI 48316</u>		\$ <u>250.00</u>	\$ <u>850.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Tap & Barrel</u> Business Address <u>50055 Van Dyke Rd, Shelby, MI 48317</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$1550.00

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 139793
2. Committee Name TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF

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? ☐ YES	4. Date of Receipt <u>08/04/20</u>	
Name & Address: Emilio Torres 55660 Whitney Court Shelby Township, MI 48315		\$ <u>200.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/04/20</u>	
Name & Address: Tommy Haji 6935 Valley Spring Road Bloomfield Township, MI 48301		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/04/20</u>	
Name & Address: Domenico Gaglio 60550 Kittle Road Washington, MI 48094		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____		Click Here for Memo Itemization	
Business Address _____			
Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/04/20</u>	
Name & Address: Max Fellsman 14612 Alpena Drive Sterling Heights, MI 48313		\$ <u>50.00</u>	\$ <u>325.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>City of Warren</u>		Click Here for Memo Itemization	
Business Address <u>1 City Square, Warren, MI 48089</u>			
Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal \$450.00

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 139793
2. Committee Name TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 08/04/20

Name & Address:

Ermira Cobo
57550 Schoenherr Road
Washington, MI 48094

\$ 500.00

\$ 500.00

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

Occupation Hair Dresser Employer Six Salon

[Click Here for Memo Itemization](#)

Business Address 306 W. Sixth Street, Royal Oak, MI 48067

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 08/04/20

Name & Address:

Mark Mhilli
18193 Pine Hill Drive
Macomb, MI 48044

\$ 500.00

\$ 1000.00

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

Occupation Owner Employer Floor Maintenance LLC

[Click Here for Memo Itemization](#)

Business Address 18193 Pine Hill Drive, Macomb, MI 48044

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 07/31/20

Name & Address:

Maria Chirco
46080 Snowbird
Macomb, MI 48044

\$ 50.00

\$ 300.00

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

Occupation Retired Employer _____

[Click Here for Memo Itemization](#)

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 08/06/20

Name & Address:

Nancy Tiseo
16155 Vista Woods Lt.
Clinton Township, MI 48038

\$ 200.00

\$ 250.00

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

Occupation Retired Employer _____

[Click Here for Memo Itemization](#)

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

Page Subtotal **\$1,250.00**

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

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line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139793

2. Committee Name _____

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 <u>08/06/20</u> Name & Address: Linda Thorp 38870 Ryan Court Harrison Township, MI 48045		\$ <u>100.00</u>	\$ <u>100.00</u>
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 <u>08/06/20</u> Name & Address: Carol Stewart 162 Mark Drive Mount Clemens, MI 48043		\$ <u>25.00</u>	\$ <u>25.00</u>
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 <u>08/06/20</u> Name & Address: Roger Lonsway 41800 Prunum Sterling Heights, MI 48314		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> 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 <u>08/06/20</u> Name & Address: Cathi Humphreys 21921 Lakeshire St. Clair Shores, MI 48081		\$ <u>20.00</u>	\$ <u>20.00</u>
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 **\$345.00**

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

Enter this total on
line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139793

2. Committee Name TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6. Amount

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

3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt 08/06/20

Name & Address:

Rose Ann Kandt
13320 Hartlein
Warren, MI 48088

\$ 10.00

\$ 10.00

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 08/06/20

Name & Address:

Robert Little
14625 Shirley
Warren, MI 48089

\$ 100.00

\$ 325.00

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

Occupation Retired 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 08/06/20

Name & Address:

Terry Champion
38714 Arcola Drive
Sterling Heights, MI 48312

\$ 80.00

\$ 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 08/06/20

Name & Address:

Linda Luotonen
38714 Arcola Drive
Sterling Heights, MI 48312

\$ 80.00

\$ 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](#)

Page Subtotal **\$270.00**

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

Enter this total on
line 3a of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139793

2. Committee Name TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF

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? ☒ YES 4. Date of Receipt <u>08/12/20</u> Name & Address: <u>Lucido for a Brighter Tomorrow PAC</u> <u>6303 26 Mile, Suite 203</u> <u>Washington, MI 48094</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>100.00</u>	\$ <u>350.00</u>
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/17/20</u> Name & Address: <u>Lyda Stanzione</u> <u>3779 Decade Street</u> <u>Las Vegas, NV 891212</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/18/20</u> Name & Address: <u>Mark Szydlowski</u> <u>5742 Murfield Drive</u> <u>Rochester Hills, MI 48306</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</u> Employer <u>Mark Allen & Associates</u> Business Address <u>5742 Murfield Drive, Rochester Hills, MI 48306</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>250.00</u>	\$ <u>250.00</u>
		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt _____ Name & Address: _____ 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 **\$850.00**

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

\$15,250.00

Enter this total on
line 3a of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number **139793**

2. Committee Name **TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF**

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: Eddie Jawad 19040 24 Mile Road Macomb, MI 48042 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address: Jawad Group Management 46820 North Avenue Macomb, MI 48042 ☒ Fund Raiser Contribution	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 Food & Drinks 5. Date Of Receipt: 07/30/20 6. Vendor Name & Address: Costco, Shelby Township, MI Alie's Lebanese Grill, Sterling Heights, MI TGF Cigar Martini Lounge, Shelby Township, MI Click Here for Memo Itemization	\$ 2077.48	\$ 2077.48
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: Amar Toma 53188 Pondview Drive Shelby Township, MI 48315 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: Amar Toma Holdings 45185 Market Street Shelby Township, MI 48315 ☒ Fund Raiser Contribution	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 Food & Drinks 5. Date Of Receipt: 08/04/20 6. Vendor Name & Address: BB's Party Store, Shelby Township, MI Kroger, Shelby Township, MI Hungry Howie's Pizza, Shelby Township, MI Click Here for Memo Itemization	\$ 317.96	\$ 317.96
Contribution #3 PAC Receipt? ☐ Yes Name & Address: Mark Mhilli 18193 Pine Hill Drive Macomb, MI 48044 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: Floor Maintenance LLC 18193 Pine Hill Drive Macomb, MI 48044 ☒ Fund Raiser Contribution	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 Food & Drinks 5. Date Of Receipt: 08/04/20 6. Vendor Name & Address: BB's Party Store, Shelby Township, MI Kroger, Shelby Township, MI Hungry Howie's Pizza, Shelby Township, MI Click Here for Memo Itemization	\$ 317.96	\$ 317.96
Page Subtotal		\$2,713.40	\$2,713.40

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

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on line 6 of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **139793**

2. Committee Name **TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF**

CANDIDATE COMMITTEE

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report 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: Ronald Torres 51929 Watkins Glen Drive Macomb, MI 48042 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address: Gardner White Furniture 4945 Dixie Waterford, MI 48329 ☒ Fund Raiser Contribution	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 Food & Drinks 5. Date Of Receipt: 08/04/20 6. Vendor Name & Address: BB's Party Store, Shelby Township, MI Kroger, Shelby Township, MI Hungry Howie's Pizza, Shelby Township, MI Click Here for Memo Itemization	\$ 317.96	\$ 317.96
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: ☐ Fund Raiser Contribution	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: Click Here for Memo Itemization	\$	\$
Contribution #3 PAC Receipt? ☐ Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: ☐ Fund Raiser Contribution	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: Click Here for Memo Itemization	\$	\$

Page Subtotal **\$317.96** **\$317.96**

Grand Total of all Schedules 1-IK **\$3,031.36**
(Complete on last page of Schedule)

Enter this total
on line 6 of Summary
Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number **139793**
2. Committee Name **TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name STRIPE Address 510 Townsend Street San Francisco, CA 94103 ☐ Fund Raiser	Purpose: <u>Service Fee (All done in house)</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/20/20</u> Date	\$ <u>22.35</u>
Expenditure #2 Name Nation Builder Address 520 S. Grand Ave., 2nd Floor Los Angeles, CA 90071 ☐ Fund Raiser	Purpose: <u>Advertising/Marketing (All done in house)</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/20/20</u> Date	\$ <u>83.00</u>
Expenditure #3 Name STRIPE Address 510 Townsend Street San Francisco, CA 94103 ☐ Fund Raiser	Purpose: <u>Service Fee (All done in house)</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/28/20</u> Date	\$ <u>1.75</u>
Expenditure #4 Name STRIPE Address 510 Townsend Street San Francisco, CA 94103 ☐ Fund Raiser	Purpose: <u>Service Fee (All done in house)</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/29/20</u> Date	\$ <u>3.20</u>
Expenditure #5 Name Party City Address 12220 Hall Road Sterling Heights, MI 48313 ☒ Fund Raiser	Purpose: <u>Fundraiser Supplies (7/30)</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/30/20</u> Date	\$ <u>14.84</u>

Subtotal this page **\$125.14**

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number **139793**
2. Committee Name **TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF**

3. Name and address of person or vendor to whom paid	4. Purpose (Required information)	5. Date	6. Amount
Expenditure #1 Name Office Max/Office Depot Address 44835 Schoenherr Sterling Heights, MI 48313 ☐ Fund Raiser	Purpose: Office Supplies ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/30/20 Date	\$ 37.09 Click Here for Memo Itemization Type
Expenditure #2 Name STRIPE Address 510 Townsend Street San Francisco, CA 94103 ☐ Fund Raiser	Purpose: service fee (all done in house) ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/29/20 Date	\$ 3.51 Click Here for Memo Itemization Type
Expenditure #3 Name Google LLC Address 1600 Amphitheatre Pkwy Mountainview, CA 94043 ☐ Fund Raiser	Purpose: Advertising/Marketing (all done in house) ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/03/20 Date	\$ 84.00 Click Here for Memo Itemization Type
Expenditure #4 Name Facebook Address 1 Facebook Way Menlo, CA 94025 ☐ Fund Raiser	Purpose: Advertising/Marketing (all done in house) ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/03/20 Date	\$ 500.00 Click Here for Memo Itemization Type
Expenditure #5 Name STRIPE Address 510 Townsend Street San Francisco, CA 94103 ☒ Fund Raiser	Purpose: service fee (7/30)(all done in house) ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/03/20 Date	\$ 22.35 Click Here for Memo Itemization Type
Subtotal this page			\$646.95
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number **139793**
2. Committee Name **TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name STRIPE Address 510 Townsend Street San Francisco, CA 94103 ☐ Fund Raiser	Purpose: <u>Service Fee (all done in house)</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/29/20</u> Date	<u>\$ 3.20</u>
Expenditure #2 Name SQUARE Address 901 Mission St., Suite 210 San Francisco, CA 94103 ☒ Fund Raiser	Purpose: <u>Service Fee (all done in house) 8/4</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/04/20</u> Date	<u>\$ 27.60</u>
Expenditure #3 Name Facebook Address 1 Facebook Way Menlo, CA 94025 ☐ Fund Raiser	Purpose: <u>Advertising/Marketing (all done in house)</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/05/20</u> Date	<u>\$ 250.00</u>
Expenditure #4 Name SQUARE Address 901 Mission St., Suite 210 San Francisco, CA 94103 ☐ Fund Raiser	Purpose: <u>Service Fee (all done in house)</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/06/20</u> Date	<u>\$ 13.11</u>
Expenditure #5 Name STRIPE Address 510 Townsend Street San Francisco, CA 94103 ☐ Fund Raiser	Purpose: <u>Service Fee (all done in house)</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/06/20</u> Date	<u>\$ 3.20</u>

Subtotal this page **\$297.11**
Grand Total of all Schedules 1B
(Complete on last page of Schedule)
Enter this total on line 8a of Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number

139793

2. Committee Name

TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name STRIPE Address 510 Townsend Street San Francisco, CA 94103 ☐ Fund Raiser	Purpose: Service Fee ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	07/29/20 Date	\$ 3.50
Expenditure #2 Name Facebook Address 1 Facebook Way Menlo, CA 94025 ☐ Fund Raiser	Purpose: Web Advertising (all done in house) ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/10/20 Date	\$ 400.00
Expenditure #3 Name VIP Marketing Pros Address 16850 Collins Ave., Ste 112-212 Sunny Isles, FL 33160 ☐ Fund Raiser	Purpose: Advertising/Marketing (all done in house) ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/14/20 Date	\$ 5025.00
Expenditure #4 Name VIP Marketing Pros Address 16850 Collins Ave., Ste 112-212 Sunny Isles, FL 33160 ☐ Fund Raiser	Purpose: Advertising/Marketing (all done in house) ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/17/20 Date	\$ 5825.00
Expenditure #5 Name Facebook Address 1 Facebook Way Menlo, CA 94025 ☐ Fund Raiser	Purpose: Web Advertising (all done in house) ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	08/18/20 Date	\$ 423.10

Subtotal this page **\$11,676.60**

Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$12,745.80**

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139793
2. Committee Name TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>07/30/20</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>68</u>	5. Type of Fund Raising Activity <u>MEET & GREET</u>	6. Address and Name (If any) of the place where the activity was held. <u>Eddie Jawad</u> <u>19040 24 Mile Road</u> <u>Macomb, MI 48042</u> ☒ Private Residence
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7. Total Contributions \$8,750.00
8. Other Receipts \$0.00
9. Gross Receipts (Add lines 7 and 8) \$8,750.00
10. Total Cost of Event \$2,114.67
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

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

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

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139793
2. Committee Name TERENCE MEKOSKI FOR MACOMB COUNTY SHERIFF

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>08/04/20</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>34</u>	5. Type of Fund Raising Activity <u>MEET & GREET</u>	6. Address and Name (If any) of the place where the activity was held. <u>Amar Toma</u> <u>53188 Pondview Drive</u> <u>Shelby Township, MI 48315</u> ☒ Private Residence
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7. Total Contributions \$3,000.00
8. Other Receipts \$0.00
9. Gross Receipts (Add lines 7 and 8) \$3,000.00
10. Total Cost of Event \$981.48
(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

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

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

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-K), 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.