



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 139943 2. Committee Name Committee to Elect Stanley Babinski 5. Committee's Mailing Address 11156 Millpond Lane Washington Twp, MI 48094 Area Code and Phone 586-362-3310 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 Stanley Babinski 11156 Millpond Lane Washington Twp MI 48094 Area Code and Phone 586-362-3310		3. This Statement covers From: 4/28/2020 to 7/19/2020 4. Candidate Last Name BABINSKI First Name Stanley M.I. - 4a. Office Sought Including District # or Community Served (If applicable) Clerk Washington Township 4b. County of Residence Macomb 6. Treasurer's Name & Residential Address Stanley Babinski 11156 Millpond Lane Washington Twp, MI 48094 Area Code & Phone 586-362-3310 8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) Stanley Babinski 11156 Millpond Lane Washington Twp, MI 48094 Area Code and Phone 586-362-3310	
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 8/4/2020		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.)	
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 Stanley Babinski Type or Print Name Candidate Stanley Babinski Type or Print Name		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 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.	
		Signature Stanley Babinski Date 7/20/2020 Signature Stanley Babinski Date 7/20/2020	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

**SUMMARY PAGE
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139943
2. Committee Name Committee to Elect Stanley Babiniski

RECEIPTS

3. Contributions

- a. Itemized (Schedule 1A - Column 6)
b. Unitemized (less than \$20.01 each - no Schedule)
c. Subtotal of "Contributions"

Column I
This Period

(3a.) \$ 500.00/KX
(3b.) \$ NOT APPLICABLE
(3c.) \$ 500.00/KX
(4.) \$ 0
(5.) \$ 500.00

Column II
Cumulative this election cycle

(18.) \$ 500.00/KX
(19.) \$ 0
(20.) \$ 500.00/KX

4. Other Receipts (Schedule 1A -1, Column 6)

5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS
(Add Line 3c + Line 4)

IN-KIND CONTRIBUTIONS & EXPENDITURES

6. In-Kind Contributions (Schedule 1-IK, Column 7)
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)

(6.) \$ 4,778.64/KX
(7.) \$ 0

(21.) \$ 4778.64/KX
(22.) \$ 0

EXPENDITURES

8. Expenditures

- a. Itemized (Schedule 1B, Column 6)
b. Itemized Get-Out-the-Vote (Schedule 1B-G)
c. Unitemized (less than \$50.01 each - no Schedule)

(8a.) \$ 0
(8b.) \$ 0
(8c.) \$ 0
(9.) \$ 0

9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)

(23.) \$ 0

INCIDENTAL EXPENSE DISBURSEMENTS
(Officeholders Only)

10. Disbursements
a. Itemized (Schedule 1C, Column 6)
b. Unitemized (less than \$50.01 each - no Schedule)

(10a.) \$ 0
(10b.) \$ 0
(11.) \$ 0

11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS
(Add Line 10a + Line 10b)

(24.) \$ 0

DEBTS AND OBLIGATIONS

12. Debts and Obligations

- a. Owed by the Committee (Schedule 1E)
b. Owed to the Committee (Schedule 1E)

(12a.) \$ \$200.00/KX
(12b.) \$ ~~200.00/KX~~

BALANCE STATEMENT

13. Ending Balance of last report filed
(Enter zero if no previous reports have been filed.)
14. Amount received during reporting period
(Line 5, Total Contributions & Other Receipts)
15. SUBTOTAL Add lines 13 and 14
16. Amount expended during reporting period
(Add lines 9 and 11)
17. ENDING BALANCE
(Subtract line 16 from line 15)

(13.) \$ 0
(14.) + \$ 500
(15.) = \$ 500
(16.) - \$ 0
(17.) \$ 500



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number

13994

2. Committee Name

Committee to Elect Stanley Rabinski

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

\$500.00

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

3. Contribution # 1

PAC Receipt?

☐ YES

4. Date of Receipt

7/14/2020

Name & Address:

TOM HAWKINS
300 COLLINS AVE
UNIT 4D MIAMI BEACH FL 33139

\$500.00

\$

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 #2

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

3. Contribution # 3

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

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

500.00

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

500.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 139943

2. Committee Name Committee to Elect Stanley Babinski

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: <u>Stanley Babinski</u> <u>1156 Mill Pond Lane</u> <u>Washington Twp MI 48094</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business 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 <u>Voter Data from Clerk</u> 5. Date Of Receipt: <u>6/5/2020</u> 6. Vendor Name & Address: <u>Washington Township</u> <u>57900 Van Dyke</u> <u>Washington Twp, MI 48094</u> Click Here for Memo Itemization	\$ <u>25</u>	\$ <u>25</u>
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: <u>Stanley Babinski</u> <u>1156 Mill Pond Lane</u> <u>Washington Twp, MI 48094</u> 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 <u>Open Bank Account</u> 5. Date Of Receipt: <u>6/10/2020</u> 6. Vendor Name & Address: <u>Credit Union</u> <u>55600 Van Dyke</u> <u>Shelby Twp, MI 48316</u> Click Here for Memo Itemization	\$ <u>200</u>	\$ <u>200</u>
Contribution #3 PAC Receipt? ☐ Yes Name & Address: <u>Stanley Babinski</u> <u>1156 Mill Pond Lane</u> <u>Washington Twp MI 48094</u> 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 <u>Stamps & Grams TS & Kit</u> 5. Date Of Receipt: <u>6/20/2020</u> 6. Vendor Name & Address: <u>Home Depot</u> <u>8760 26 Mile</u> <u>Shelby Twp MI 48316</u> Click Here for Memo Itemization	\$ <u>9.44</u>	\$ <u>9.44</u>

Page Subtotal

234.44 234.44

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

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 139943
2. Committee Name Committee to Elect Stanley Babinski

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)
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Contribution # 1 Name & Address: <u>Stanley Babinski</u> <u>1156 Mill Pond Lane</u> <u>Washington Twp MI 48094</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address:	PAC Receipt? ☐ Yes 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 <u>Posters & Graphics</u> 5. Date Of Receipt: <u>6/20/2020</u> 6. Vendor Name & Address: <u>Home Depot</u> <u>8760 26 Mile</u> <u>Stelby Twp MI 48316</u>	\$ <u>64.07</u> \$ <u>64.07</u>	
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Click Here for Memo Itemization

☐ Fund Raiser Contribution

Contribution # 2 Name & Address: <u>Stanley Babinski</u> <u>1156 Mill Pond Lane</u> <u>Washington Twp MI 48094</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	PAC Receipt? ☐ Yes 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 <u>Robo Calls/texting</u> 5. Date Of Receipt: <u>6/20/2020</u> 6. Vendor Name & Address: <u>E2text.com</u>	\$ <u>40.00</u> \$ <u>40</u>	
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Click Here for Memo Itemization

☐ Fund Raiser Contribution

Contribution #3 Name & Address: <u>Stanley Babinski</u> <u>1156 Mill Pond Lane</u> <u>Washington Twp MI 48094</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	PAC Receipt? ☐ Yes 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 <u>SIGNS</u> 5. Date Of Receipt: <u>6/10/2020</u> 6. Vendor Name & Address: <u>Jordan Graphics</u> <u>71300 Van Dyke</u> <u>Bruce Twp MI 48065</u>	\$ <u>1,134.00</u> \$ <u>1,134.00</u>	
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Click Here for Memo Itemization

☐ Fund Raiser Contribution

Page Subtotal 1,238.07 1,238.07

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

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number 139943

2. Committee Name Committee to Elect Stanley Babinski

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: <u>Stanley Babinski</u> <u>1152 Mill Pond</u> <u>Washington Twp MI 48094</u> If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business 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 <u>Post Card & Mailing</u> 5. Date Of Receipt: <u>6/26/2020</u> 6. Vendor Name & Address: <u>Graphic East Inc</u> <u>16005 Sturgeon St</u> <u>Roseville MI 48066</u> Click Here for Memo Itemization	\$ <u>3,278.⁴⁶</u>	\$ <u>3,278.⁹⁰</u>
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: <u>Carol Marshall</u> <u>6917 Boulder Pointe Dr</u> <u>Washington Twp, MI 48094</u> 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 <u>250 Flyer</u> 5. Date Of Receipt: <u>7/19/2020</u> 6. Vendor Name & Address: <u>Self Employed</u> Click Here for Memo Itemization	\$ <u>27.6⁴</u>	\$ <u>27.61</u>
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	\$ <u>0</u>	\$ <u>0</u>

Page Subtotal

3306.13 3306.13

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

64778.64

Enter this total
on line 6 of Summary
Page



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

1. Committee I.D. Number 139947
2. Committee Name Committee to Elect Stanley Babinsh

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 Owed to or by: Corp? ☐ Yes <u>Stanley Babinsh</u> <u>11156 Millpond Lane</u> <u>Washington Twp MI 48094</u>	4. Type: <u>Open Bank Account</u> 5. <u>Date Debt Was Incurred:</u> <u>6/10/2020</u> 6. <u>Original Amount of Debt:</u> <u>\$ 200.00</u>	<u>0</u> \$ <u>0</u> \$ <u>0</u> \$ <u>0</u> \$ <u>0</u> \$	<u>0</u>	<u>\$ 200.00</u> ☐ FORGIVEN

If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Debt #2 Owed to or by: Corp? ☐ Yes	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> _____ \$ _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ _____ ☐ FORGIVEN
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If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Debt #3 Owed to or by: Corp? ☐ Yes	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> _____ \$ _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ _____ ☐ FORGIVEN
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If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Page Subtotal (Outstanding debt) 200

Grand Total of all Schedules 1E 200
(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.