



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

**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 140035		3. This Statement covers From: 10/19/2020 to 11/23/2020	
2. Committee Name CTE Steve Meyer		4. Candidate Last Name Meyer First Name Steven M.I. R 4a. Office Sought Including District # or Community Served (If applicable) Board Member - Local 4b. County of Residence MACOMB	
5. Committee's Mailing Address 7755 22 Mile Rd. #183037 Shelby Twp, MI 48316 Area Code and Phone (248)343-5141 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 Susan Meyer 14969 Clemson Sterling Heights, MI 48313 Area Code & Phone (586)255-5773	
7. Treasurer's Business Address N/A Area Code and Phone N/A		8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) N/A Area Code and Phone N/A	
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 11/03/2020		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.)	
		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.	
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 Susan Meyer Type or Print Name		Signature Date 12/3/2020	
Candidate Steve Meyer Type or Print Name		Signature Date 12/3/2020	

FILED
 20 DEC - 3 PM 4:41
 MI. CLERK. MIHGAN



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

1. Committee I.D. Number 140035

2. Committee Name CTE Steve Meyer

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>2,530</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>2,530</u>	(18.) \$ <u>12,485</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>0</u>	(19.) \$ <u>12,485</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>2,530</u>	(20.) \$ <u>12,485</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>1,691.77</u>	(21.) \$ <u>19,398.81</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>0</u>	(22.) \$ <u>19,398.81</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>6,742.49</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>0</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>0</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>6,742.49</u>	(23.) \$ <u>11,709.92</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>0</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>0</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>0</u>	(24.) \$ <u>0</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>1,170</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>0</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>4,987.57</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>2,530.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>7,517.57</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>6,742.49</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>775.08</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 140035
2. Committee Name CTE Steve Meyer

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>10/22/2020 - 11/2/2020</u>	
Name & Address: <u>See Attached</u>		<u>1,360</u>	<u>1,360</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>10/30/2020</u>	
Name & Address: <u>Steven Meyer</u> <u>4251 Country Club Dr.</u> <u>Shelby Twp, MI 48316</u>		<u>1170.00</u>	<u>1680</u>
		\$	\$
5. If over \$100.00 cumulative, please provide: Occupation <u>Administrator</u> Employer <u>Oakland University</u> Business Address <u>586 Pioneer Drive Rochester, MI 48309-4482</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 _____	
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	
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 **\$2,530**

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

\$2,530

Enter this total on
line 3a of Summary
Page.

Committee name: CLE Steve Meyer

Date of Receipt	Amount	Cumulative Amt	First Name	Last Name	Street	City	State	Zip	Type	Loan From a Person	
10/22/2020	\$100.00	\$100.00	Brian	Hlaedud	55422 Apple Ln.	Shelby Twp	MI	48316	Direct		
X			Occupation: Dentist Employee: Self Address: 43421 Garfield Rd #5, Clinton Twp, MI 48038							X	
10/27/2020	\$50.00	\$50.00	Devon	McCaroll	7605 Flickinger	Shelby Twp	MI	48317	Direct		
10/27/2020	\$50.00	\$50.00	Sean	McCaroll	7605 Flickinger	Shelby Twp	MI	48317	Direct		
10/27/2020	\$100.00	\$100.00	David	Allen	44228 Felstone	Sterling Heights	MI	48313	Direct		
X			Occupation: Police Officer Employee: Centerline Address: 47070 E Ten Mile Road, Centerline MI, 48015							X	
10/27/2020	\$50.00	\$50.00	Mary	DeMetsenare	2545 Grandview Blvd	Waterford	MI	48329	Direct		
10/27/2020	\$100.00	\$100.00	Hlaesh	Moradia	53646 Buckingham Lane	Shelby Twp	MI	48316	Direct		
X			Occupation: Engineer Employee: FANUC Address: 3900 W Hamlin Rd, Rochester Hills, MI 48309								
10/27/2020	\$50.00	\$50.00	Heather	Yancy	54393 Amber Dr	Macomb	MI	48042	Direct		
10/28/2020	\$50.00	\$50.00	Christopher	Hicks	2849 E Street Unit 15	San Diego	CA	92102	Direct		
10/28/2020	\$50.00	\$50.00	Sarah	Nunimaker	48728 Lorenzo Dr	Macomb	MI	48044	Direct		
10/28/2020	\$100.00	\$100.00	Linda	Giese	3529 Marc Drive	Sterling Heights	MI	48310	Direct		
X			Occupation: Retired							X	
10/28/2020	\$25.00	\$25.00	Leigh	Dzwik	572 Bollinger	Rochester Hills	MI	48307	Direct		
10/28/2020	\$100.00	\$100.00	Karen	Michalski	6935 Serenity Lane	St. Clair	MI	48079	Direct		
X			Occupation: Veterinarian Employee: Self Address: 13800 15 Mile Rd, Sterling Heights, MI 48312							X	
10/28/2020	\$50.00	\$50.00	Mario	Macandong	2122 Pear Tree Ln.	Oakland	MI	48363	Direct		
10/29/2020	\$100.00	\$100.00	Geoffrey	Kowalczyk	12835 Kinlock Dr	Sterling Heights	MI	48312	Direct		
X			Occupation: Mechanic Employee: General Motors Address: 300 Renaissance Center, Detroit, MI 48243							X	
10/30/2020	\$20.00	\$20.00	Kara	Kopy	17908 Winsome	Fraser	MI	48026	Direct		
10/30/2020	\$20.00	\$20.00	Kelly	Dowell	28938 Oakmont	Chesterfield	MI	48051	Direct		
10/31/2020	\$125.00	\$125.00	Joyce	Sadowski	53303 Hayes Rd	Shelby Twp	MI	48315	Direct		
X			Occupation: Retired							X	
11/1/2020	\$20.00	\$20.00	Paula	McConnel	4656 Gardner	Shelby Twp	MI	48318	Direct		
11/1/2020	\$20.00	\$20.00	Steve	Shania	8300 Clinton River Rd	Sterling Heights	MI	48314	Direct		
11/1/2020	\$20.00	\$20.00	Dana	Dornfield	6768 Chico	Shelby Twp	MI	48316	Direct		
11/1/2020	\$20.00	\$70.00	Chris	Brown	38386 Covington	Sterling Heights	MI	48312	Direct		
11/1/2020	\$20.00	\$20.00	Kristie	Marks	53542 Poinsettia Dr.	Macomb	MI	48042	Direct		
11/1/2020	\$20.00	\$40.00	Anjie	Wunningham	36198 Madison st	New Baltimore	MI	48047	Direct		
11/2/2020	\$100.00	\$100.00	Julie	Sherman	911 Ten Point Drive	Rochester	MI	48309	Direct		
X			Occupation: Veterinarian Employee: Serenity Animal Hospital Address: 13800 15 Mile Rd, Sterling Heights, MI 48312							X	



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 140035

CANDIDATE COMMITTEE

2. Committee Name CTE Steve Meyer

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 <u>all</u> 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: Utica Pac 13969 Plumbrook Rd Sterling Heights, MI 48312 If over \$100.00 cumulative, please provide: Occupation: PAC Employer Name & Business Address: Utica Pac 13969 Plumbrook Rd Sterling Heights, MI 48312 ☐ 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>Literature</u> 5. Date Of Receipt: <u>10/20/2020</u> 6. Vendor Name & Address: American Graphics 34895 Groesbeck Clinton Twp, MI 48035 Click Here for Memo Itemization	\$ <u>572.40</u>	\$ <u>18,279.44</u>
Contribution # 2 PAC Receipt? ☒ Yes Name & Address: Utica Pac 13969 Plumbrook Rd Sterling Heights, MI 48312 If over \$100.00 cumulative, please provide: Occupation: PAC Employer Name & Address: Utica Pac 13969 Plumbrook Rd Sterling Heights, MI 48312 ☐ 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>Literature</u> 5. Date Of Receipt: <u>10/30/2020</u> 6. Vendor Name & Address: American Graphics 34895 Groesbeck Hwy Clinton Twp, MI 48035 Click for Memo Itemization	\$ <u>500</u>	\$ <u>18,779.44</u>
Contribution #3 PAC Receipt? ☒ Yes Name & Address: Utica Pac 13969 Plumbrook Rd Sterling Heights, MI 48312 If over \$100.00 cumulative, please provide: Occupation: PAC Employer Name & Address: Utica Pac 13969 Plumbrook Rd Sterling Heights, MI 48312 ☐ 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>T-Shirts</u> 5. Date Of Receipt: <u>10/30/2020</u> 6. Vendor Name & Address: E.A. Graphics 42111 Van Dyke Ave. Sterling Heights, MI 48313 Click Here for Memo Itemization	\$ <u>619.37</u>	\$ <u>19,398.81</u>
Page Subtotal		\$ <u>1,691.77</u>	\$ <u>19,398.81</u>
Grand Total of all Schedules 1-IK (Complete on last page of Schedule)		\$ <u>1,691.77</u>	

Enter this total
on line 6 of Summary
Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 140035
2. Committee Name CTE Steve Meyer

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Mass Mailing</u> Address <u>35468 Mound Rd.</u> <u>Sterling Heights, MI 48310</u> ☐ Fund Raiser	Purpose: <u>Mail Service</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/23/2020</u> Date	\$ <u>3,355.20</u>
Expenditure #2 Name <u>Mass Mailing</u> Address <u>35468 Mound Rd.</u> <u>Sterling Heights, MI 48310</u> ☐ Fund Raiser	Purpose: <u>Mail Service</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/23/2020</u> Date	\$ <u>580.76</u>
Expenditure #3 Name <u>Citizens Bank</u> Address <u>One Citizens Plaza</u> <u>Providence, Rhode Island 02903</u> ☐ Fund Raiser	Purpose: <u>Certified Check Fee</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/23/2020</u> Date	\$ <u>10.00</u>
Expenditure #4 Name <u>American Graphics</u> Address <u>34895 Groesbeck</u> <u>Clinton Twp, MI 48035</u> ☐ Fund Raiser	Purpose: <u>Literature</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/30/2020</u> Date	\$ <u>1,792.25</u>
Expenditure #5 Name <u>Citizens Bank</u> Address <u>One Citizens Plaza</u> <u>Providence, Rhode Island 02903</u> ☐ Fund Raiser	Purpose: <u>Certified Check Fee</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/30/2020</u> Date	\$ <u>10.00</u>
Subtotal this page			\$5,748.21
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 140035
2. Committee Name CTE Steve Meyer

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Hudson Collective</u> Address <u>220 S. Main Street</u> <u>Royal Oak, MI</u> ☐ Fund Raiser	Purpose: <u>Digital Advertising</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/26/2020 - 10/30/202</u> Date Click Here for Memo Itemization Type	\$ <u>930.00</u>
Expenditure #2 Name <u>Stripe</u> Address <u>510 Townsend Street</u> <u>San Francisco, CA 94103, USA</u> ☐ Fund Raiser	Purpose: <u>Credit Card Processing Fees</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/19/2020 - 11/4/2020</u> Date Click Here for Memo Itemization Type	\$ <u>29.28</u>
Expenditure #3 Name <u>PoliEngine</u> Address <u>621 NW 12th Ave</u> <u>Gainesville, Florida 32601</u> ☐ Fund Raiser	Purpose: <u>Website</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/20/202</u> Date Click Here for Memo Itemization Type	\$ <u>35.00</u>
Expenditure #4 Name Address ☐ Fund Raiser	Purpose: _____ ☐ 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 ☐ Fund Raiser	Purpose: _____ ☐ 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			\$994.28
Grand Total of all Schedules 1B (Complete on last page of Schedule)			\$6,742.49

Enter this total
on line 8a of
Summary Page



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 140035
2. Committee Name CTE Steve Meyer

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? ☐ Yes Owed to or by: Steven Meyer 4251 Country Club Dr Shelby Twp, MI 48316	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>10/30/2020</u> 6. <u>Original Amount of Debt:</u> \$ <u>1,170.00</u>	\$ \$ \$ \$ \$	\$	\$ <u>1,170</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #2 Corp? ☐ Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ \$ \$ \$ \$	\$	\$ _____ ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #3 Corp? ☐ Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ \$ \$ \$ \$	\$	\$ _____ ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt) **\$1,170.00**

Grand Total of all Schedules 1E **\$1,170.00**
(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.