



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.

3. This Statement covers From: 10/21/17 to 07/19/20

1. Committee I.D. Number

138224

4. Candidate Last Name

Joseph

First Name

David

M.I.

M.

2. Committee Name

CTE David Joseph

4a. Office Sought Including District # or Community Served (If applicable)

Chesterfield Township Trustee

4b. County of Residence **MACOMB**

5. Committee's Mailing Address

**28637 Buckinghamshire Dr.
Chesterfield, MI 48047**

6. Treasurer's Name & Residential Address

**Christine Joseph
28637 Buckinghamshire Dr.
Chesterfield, MI 48047**

Area Code and Phone (586) 212-3148

If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

Area Code & Phone (586) 980-0694

7. Treasurer's Business Address

**28637 Buckinghamshire Dr.
Chesterfield, MI 48047**

8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)

Area Code and Phone (586) 980-0694

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

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.)

Date of Election, Convention or Caucus

08/04/20

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 Christine Joseph

Type or Print Name

Signature Christine Joseph

Date

7/24/20

Candidate David Joseph

Type or Print Name

Signature David Joseph

Date

7/24/20



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 138224

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name CTE David Joseph

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>12,030.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$12,030.00</u>	(18.) \$ _____
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>\$0.00</u>	(19.) \$ _____
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>\$12,030.00</u>	(20.) \$ _____
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$0.00</u>	(21.) \$ _____
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>\$0.00</u>	(22.) \$ _____
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$5,059.80</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>\$5,059.80</u>	(23.) \$ _____
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.) \$ _____
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$0.00</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>\$13.92</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$12,030.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$12,043.92</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$5,059.80</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$6,984.12</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138224

2. Committee Name CTE David Joseph

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>05/01/20</u> Name & Address: <u>David Joseph</u> <u>28637 Buckinghamshire Dr.</u> <u>Chesterfield, MI 48047</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Juvenile Director</u> Employer <u>16th Circuit Court</u> Business Address <u>10 North Main Street, Mount Clemens, MI 48043</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>500.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/18/20</u> Name & Address: <u>James Thomas</u> <u>49544 Compass Pointe</u> <u>Chesterfield, MI 48047</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Self-Employed</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>200.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/18/20</u> Name & Address: <u>Mark Abraham</u> <u>1910 Illinois Ave</u> <u>Englewood, FL 34224</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Developer</u> Employer <u>Self-Employed</u> Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>500.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/17/20</u> Name & Address: <u>Khoder Abdallah</u> <u>38229 Pinebrook Dr.</u> <u>Sterling Heights, MI 48310</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Juan Miguels</u> Business Address <u>21342 Hall Rd., Clinton Township, MI 48038</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>500.00</u>	\$ _____
		Click Here for Memo Itemization	

Page Subtotal \$1,700.00

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 138224

2. Committee Name CTE David Joseph

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>05/26/20</u> Name & Address: Javier Lebron 48075 Meadow Lane Chesterfield, MI 48051 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/28/20</u> Name & Address: Shelly Whitehead 27203 Superior Chesterfield, MI 48051 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/29/20</u> Name & Address: Kaitlyn Sanitate 52567 Mary Martin Chesterfield, MI 48051 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/30/20</u> Name & Address: Linda Stenson 23568 Suttons Bay Clinton Twp., MI 48036 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	\$ _____
		Click Here for Memo Itemization	

Page Subtotal \$40.00

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

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Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138224

2. Committee Name CTE David Joseph

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>06/08/20</u> Name & Address: Paul Mitchell, III P.O. Box 326 Dryden, MI 48428 5. If over \$100.00 cumulative, please provide: Occupation <u>U.S. Congressman</u> Employer _____ Business Address <u>P.O. Box 326 Dryden, MI 48428</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>500.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☒ YES 4. Date of Receipt <u>06/09/20</u> Name & Address: Lucido For A Brighter Tomorrow PAC 6303 26 Mile Rd., Suite 203 Washington, MI 48094 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>500.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/29/20</u> Name & Address: Randall Tyrer 1409 E. Wattles Road Troy, MI 48085 5. If over \$100.00 cumulative, please provide: Occupation <u>Contractor</u> Employer <u>Self-Employed</u> Business Address <u>1409 E. Wattles Road, Troy, MI 48085</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>300.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/29/20</u> Name & Address: Roanne Swaneck 923 N. Brys Drive Grosse Pointe Woods, MI 48236 5. If over \$100.00 cumulative, please provide: Occupation <u>Homemaker</u> Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>300.00</u>	\$ _____
		Click Here for Memo Itemization	

Page Subtotal **\$1,600.00**

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I D. Number 138224

2. Committee Name CTE David Joseph

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>05/24/20</u> Name & Address: Leticia Dusing 8486 Anchor Bay Drive Clay, MI 48001 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/24/20</u> Name & Address: Larry Dusing 18600 Florence Street, Suite T5 Roseville, MI 48066 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/17/20</u> Name & Address: Mona Rutkowski 1454 Nautical Lane Cottrellville, MI 48039 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/20/20</u> Name & Address: Danielle Haase 54934 Danielle Street New Baltimore, 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>10.00</u>	\$ _____
		Click Here for Memo Itemization	

Page Subtotal \$40.00

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 138224

2. Committee Name CTE David Joseph

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>06/16/20</u> Name & Address: <u>William Jarvis</u> <u>41800 Executive Dr.</u> <u>Harrison Township, MI 48045</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>07/07/20</u> Name & Address: <u>Dorothy Burns</u> <u>55899 Serene Dr.</u> <u>Macomb, MI 48042</u>		\$ <u>1,000.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Office Manager</u> Employer <u>Bart Now, PLLC</u> Business Address <u>32411 Mound Road, Warren, MI 48092</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>06/23/20</u> Name & Address: <u>Realtors Political Action Committee of Michigan</u> <u>720 N. Washington Ave.</u> <u>Lansing, MI 48906</u>		\$ <u>1,000.00</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>05/22/20</u> Name & Address: <u>Tony Gallo</u> <u>6303 26 Mile Road., Suite 200</u> <u>Washington, MI 48094</u>		\$ <u>1,000.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>Gallo Companies</u> Business Address <u>6303 26 Mile Rd #200, Washington, MI 48094</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$3,100.00

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138224

2. Committee Name CTE David Joseph

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/26/20</u> Name & Address: Jennifer Dixon 36210 Monroe St. New Baltimore, 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>10.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/26/20</u> Name & Address: Victoria Hanna 46585 Heathermore Chesterfield, MI 48051 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/26/20</u> Name & Address: Steve Hanna 46585 Heathermore Chesterfield, MI 48051 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/24/20</u> Name & Address: Laura Yousaf 46040 Crown Ct. Chesterfield, MI 48051 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	\$ _____
		Click Here for Memo Itemization	

Page Subtotal \$40.00

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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 138224

2. Committee Name CTE David Joseph

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>06/03/20</u> Name & Address: Gary Patchak 32393 Lakepoint New Baltimore, MI 48047 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>P.G.A. Marine</u> Business Address <u>32393 Lakepoint, New Baltimore, MI 48047</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>300.00</u>	
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/04/20</u> Name & Address: Glenn McCandliss 28475 Tiffin Drive New Baltimore, MI 48047 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Self-employed</u> Business Address <u>28475 Tiffin Drive, New Baltimore, MI 48047</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>150.00</u>	
		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/30/20</u> Name & Address: Don Brown 6515 Old Coach Trail Washington, MI 48094 5. If over \$100.00 cumulative, please provide: Occupation <u>Commissioner</u> Employer <u>Macomb County Commission</u> Business Address <u>1 S. Main Street, Mount Clemens, MI 48043</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>250.00</u>	
		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/22/20</u> Name & Address: Mary Vaillancourt 50252 Maurice Road 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>	
		Click Here for Memo Itemization	

Page Subtotal \$ 800

Grand Total of All Schedules 1A
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MICHIGAN DEPARTMENT OF STATE
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138224

2. Committee Name CTE David Joseph

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/16/20</u> Name & Address: Jaclyn Trendle 26858 Gena Chesterfield, MI 48051 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/16/20</u> Name & Address: Tammy Lahlum 27089 Carrington Place Harrison Township, MI 48045 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/17/20</u> Name & Address: Trisha Roberts 1238 Braeburn Drive St. Clair, MI 48079 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/17/20</u> Name & Address: Mark Buffa 46927 Shiloh Way Utica, MI 48317 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	\$ _____
		Click Here for Memo Itemization	

Page Subtotal \$40.00

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ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE

1. Committee I.D. Number 138224

2. Committee Name CTE David Joseph

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>06/08/20</u> Name & Address: Cristina Niccolini 6 Blythewood Road Baltimore, MD 21210 5. If over \$100.00 cumulative, please provide: Occupation <u>Homemaker</u> Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>300.00</u>	\$ _____ Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/04/20</u> Name & Address: Susan Luch 347 Pine Ridge Dr. Bloomfield Hills, MI 48304 5. If over \$100.00 cumulative, please provide: Occupation <u>Office Manager</u> Employer <u>Center Management</u> Business Address <u>34120 Woodward Ave., Birmingham, MI 48009</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>800.00</u>	\$ _____ Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/03/20</u> Name & Address: John Amore 27191 Eagle Ct. Chesterfield, MI 48051 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>	\$ _____ Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/31/20</u> Name & Address: Sharna DeLuca 56743 Leeds Lane Macomb, MI 48042 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>	\$ _____ Click Here for Memo Itemization

Page Subtotal \$1,250.00

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 138224

2. Committee Name CTE David Joseph

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>06/18/20</u> Name & Address: Aaron Rasty 12201 Salida Del Sol Pass Austin, TX 78732 5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>SOZO Health</u> Business Address <u>23751 Hoover Road, Warren, MI 48089</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>500.00</u>	\$ _____
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/18/20</u> Name & Address: Stavros Toma 47677 Milonas Drive Shelby Township, MI 48315 5. If over \$100.00 cumulative, please provide: Occupation <u>Developer</u> Employer <u>Self-Employed</u> Business Address <u>47677 Milonas Drive, Shelby Township, MI 48315</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>250.00</u>	\$ _____
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/16/20</u> Name & Address: Marvin Karana 29500 Telegraph Rd., Ste. 250 Southfield, MI 48034 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Self-Employed</u> Business Address <u>29500 Telegraph Rd., Ste. 250, Southfield, MI 48034</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>500.00</u>	\$ _____
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/16/20</u> Name & Address: Holly Haarz 48201 Virginia Dr. Macomb, MI 48044 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>	\$ _____

Page Subtotal **\$1,275.00**

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 138224

2. Committee Name CTE David Joseph

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 05/24/20

Name & Address:

Stephanie Lindstrom
33693 Embassy St.
Chesterfield, MI 48047

\$ 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 05/24/20

Name & Address:

Kassia Budzanowski
46277 Duchess
Chesterfield, MI 48051

\$ 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 # 3 PAC Receipt? ☐ YES 4. Date of Receipt 05/24/20

Name & Address:

Robert VanMaele
53123 Pimpemil Lane
Chesterfield, MI 48051

\$ 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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt 05/22/20

Name & Address:

Jorge Lebron
48075 Meadow Lane
Chesterfield, MI 48051

\$ 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

Page Subtotal **\$40.00**

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 138224
2. Committee Name CTE David Joseph

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>05/22/20</u> Name & Address: Vito Delia 54680 Fairchild Macomb, MI 48042 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>	\$ _____
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/28/20</u> Name & Address: Ronald Estes 3232 E. Breckenridge Bloomfield Twp., MI 48301 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Center Management</u> Business Address <u>34120 Woodward Avenue, Birmingham, MI 48009</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>300.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/22/20</u> Name & Address: Mark Forbert 50616 Martinique Street New Baltimore, 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>50.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/22/20</u> Name & Address: Karen Perreman 28966 Oakmont Drive Chesterfield, MI 48051 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>	\$ _____
		Click Here for Memo Itemization	

Page Subtotal \$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 138224
2. Committee Name CTE David Joseph

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>05/20/20</u> Name & Address: Lisa Fisette 53557 Bradford New Baltimore, 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>10.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/20/20</u> Name & Address: Matt Pellerito 48085 Meadow Lane Chesterfield, MI 48051 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/27/20</u> Name & Address: Joseph Bryzelak 48217 Meadow Lane Chesterfield, MI 48051 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/27/20</u> Name & Address: Karen Merriam 46713 Scotch Pine Macomb, MI 48042 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	\$ _____
		Click Here for Memo Itemization	

Page Subtotal **\$40.00**

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 138224

2. Committee Name CTE David Joseph

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>05/22/20</u> Name & Address: John Watson 25861 Rose St. New Baltimore, MI 48051 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>	\$ _____
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/28/20</u> Name & Address: Thomas Guastello 34120 Woodward Ave. Birmingham, MI 48009 5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>Center Management</u> Business Address <u>34120 Woodward Avenue, Birmingham, MI 48009</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>700.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/23/20</u> Name & Address: Lawrence Joseph 30167 Highgate Dr. Chesterfield, MI 48051 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>	\$ _____
		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 **\$800.00**

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 138224
2. Committee Name CTE David Joseph

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>05/30/20</u> Name & Address: Mary Allar 49635 Keycove 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>10.00</u>	Click Here for Memo Itemization
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/29/20</u> Name & Address: Andy Urkshus 50457 Edith 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>10.00</u>	Click Here for Memo Itemization
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/27/20</u> Name & Address: Tim Brown 53247 Jessica Lane Chesterfield, MI 48051 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>10.00</u>	Click Here for Memo Itemization
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/30/20</u> Name & Address: Brian McNair 52502 Ford Lane 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>	Click Here for Memo Itemization

Page Subtotal **\$130.00**

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

Enter this total on
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Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138224
2. Committee Name CTE David Joseph

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>05/31/20</u> Name & Address: Mario Yono 51715 Baker Rd. Chesterfield, MI 48047 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Capital Building Co.</u> Business Address <u>49926 Gratiot, Chesterfield, MI 48051</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>200.00</u>	\$ _____
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/03/20</u> Name & Address: Bob Amore 27249 Jo Ellen Court New Baltimore, MI 48051 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>	\$ _____
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/31/20</u> Name & Address: Sam Blackman 7824 Alexandria Drive Ira, MI 48023 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>200.00</u>	\$ _____
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/29/20</u> Name & Address: Lawrence Joseph 41973 Saltz Road Canton, MI 48187 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>	\$ _____

Page Subtotal \$550.00

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 138224
2. Committee Name CTE David Joseph

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 Name & Address: Paul Miglio 53316 Pimpemil Lane New Baltimore, MI 48051	PAC Receipt? ☐ YES 4. Date of Receipt <u>05/22/20</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 #2 Name & Address: Dennis Susko 31127 Jaguar Drive Chesterfield, MI 48047	PAC Receipt? ☐ YES 4. Date of Receipt <u>05/22/20</u>	\$ <u>10.00</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 Name & Address: Ralph Dixon 52360 Walnut Chesterfield, MI 48047	PAC Receipt? ☐ YES 4. Date of Receipt <u>05/22/20</u>	\$ <u>10.00</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 Name & Address: Lindsay Aho 34263 Aspen Park Drive Chesterfield, MI 48047	PAC Receipt? ☐ YES 4. Date of Receipt <u>05/24/20</u>	\$ <u>10.00</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 \$55.00

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 138224

2. Committee Name CTE David Joseph

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>05/30/20</u> Name & Address: Tom Terzo 51921 North Adele Circle 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>10.00</u>	\$ _____
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/31/20</u> Name & Address: Abbey Hoffman 31218 Lions Pointe 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>10.00</u>	\$ _____
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>05/31/20</u> Name & Address: Patricia Wawszkiewicz 29470 Wand Drive 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>10.00</u>	\$ _____
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		\$ _____	\$ _____

Page Subtotal **\$30.00**

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

\$12,030.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 138224
2. Committee Name CTE David Joseph

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>All Pro Color</u> Address <u>20750 Chesley Dr.</u> <u>Farmington, MI 48336</u> ☐ Fund Raiser	Purpose: <u>Road signs - 1/3 cost</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/08/20</u> Date	<u>\$ 318.00</u>
Expenditure #2 Name <u>American Graphics</u> Address <u>34895 Groesbeck</u> <u>Clinton Twp., MI 48035</u> ☐ Fund Raiser	Purpose: <u>Postcards - 1/3 cost</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/24/20</u> Date	<u>\$ 296.09</u>
Expenditure #3 Name <u>USPS</u> Address <u>35339 23 Mile Road</u> <u>New Baltimore, MI 48047</u> ☐ Fund Raiser	Purpose: <u>Postage - 1/3 cost</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/30/20</u> Date	<u>\$ 419.49</u>
Expenditure #4 Name <u>Mass Mailing LLC</u> Address <u>35468 Mound Road</u> <u>Sterling Heights, MI 48310</u> ☐ Fund Raiser	Purpose: <u>Mail House Fee - 1/3 cost</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/23/20</u> Date	<u>\$ 88.01</u>
Expenditure #5 Name <u>Memory Time LLC</u> Address <u>2280 Cumberland</u> <u>Rochester Hills, MI 48307</u> ☐ Fund Raiser	Purpose: <u>Consulting Fee</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/17/20</u> Date	<u>\$ 258.33</u>

Subtotal this page

\$1,379.92

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 138224
2. Committee Name CTE David Joseph

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Hortos Advertising Address 6715 River Road Cottrellville, MI 48039 ☐ Fund Raiser	Purpose: <u>Design fee - 1/3 cost</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/14/20</u> Date	<u>\$ 137.33</u>
Expenditure #2 Name American Graphics Address 34895 Groesbeck Clinton Township, MI 48035 ☐ Fund Raiser	Purpose: <u>Postcards - 1/3 cost</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/17/20</u> Date	<u>\$ 422.00</u>
Expenditure #3 Name Mass Mailing, LLC Address 35468 Mound Road Sterling Heights, MI 48310 ☐ Fund Raiser	Purpose: <u>Mailing fee/postage - 1/3 cost</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/13/20</u> Date	<u>\$ 781.00</u>
Expenditure #4 Name All Pro Color Address 20750 Chesley Dr. Farmington, MI 48336 ☐ Fund Raiser	Purpose: <u>Postcards - 1/3 cost</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/29/20</u> Date	<u>\$ 126.29</u>
Expenditure #5 Name USPS Address 35339 23 Mile Road New Baltimore, MI 48047 ☐ Fund Raiser	Purpose: <u>Postage - 1/3 cost</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/06/20</u> Date	<u>\$ 165.00</u>

Subtotal this page **\$1,631.62**

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 138224
2. Committee Name CTE David Joseph

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>All Pro Color</u> Address <u>20750 Chesley Dr.</u> <u>Farmington, MI 48336</u> ☐ Fund Raiser	Purpose: <u>Bumper stickers - 1/3 cost</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/13/20</u> Date	<u>\$ 84.87</u>
Expenditure #2 Name <u>Anchor Bay Chamber of Commerce</u> Address <u>51180 Bedford</u> <u>New Baltimore, MI 48047</u> ☐ Fund Raiser	Purpose: <u>Meet The Candidate</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/17/20</u> Date	<u>\$ 50.00</u>
Expenditure #3 Name <u>Hortos Advertising</u> Address <u>6715 River Road</u> <u>Cottrellville, MI 48039</u> ☐ Fund Raiser	Purpose: <u>Campaign design</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/01/20</u> Date	<u>\$ 76.00</u>
Expenditure #4 Name <u>Lowe's</u> Address <u>27990 23 Mile Road</u> <u>Chesterfield, MI 48051</u> ☐ Fund Raiser	Purpose: <u>Sign posts</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/13/20</u> Date	<u>\$ 106.93</u>
Expenditure #5 Name <u>All Pro Color, LLC</u> Address <u>20750 Chesley Dr.</u> <u>Farmington, MI 48336</u> ☐ Fund Raiser	Purpose: <u>Printing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/29/20</u> Date	<u>\$ 190.76</u>

Subtotal this page	\$508.56
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 138224
2. Committee Name CTE David Joseph

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>All Pro Color, LLC</u> Address <u>20750 Chesley Dr.</u> <u>Farmington, MI 48336</u> ☐ Fund Raiser	Purpose: <u>Bumper stickers</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/29/20</u> Date	<u>\$ 254.62</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>Memory Time, LLC</u> Address <u>2280 Cumberland</u> <u>Rochester Hills, MI 48307</u> ☐ Fund Raiser	Purpose: <u>Web design</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/25/20</u> Date	<u>\$ 425.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>GoDaddy.com</u> Address <u>14455 N. Hayden Rd., Ste. 226</u> <u>Scottsdale, AZ 85260</u> ☐ Fund Raiser	Purpose: <u>Website</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/15/20</u> Date	<u>\$ 180.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>Zora Oil</u> Address <u>47191 Jefferson</u> <u>New Baltimore, MI 48047</u> ☐ Fund Raiser	Purpose: <u>Gas</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/15/20</u> Date	<u>\$ 50.35</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>Lowe's</u> Address <u>27990 23 Mile Road</u> <u>Chesterfield, MI 48051</u> ☐ Fund Raiser	Purpose: <u>Hardware</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/15/20</u> Date	<u>\$ 35.44</u> Click Here for Memo Itemization Type

Subtotal this page	\$945.41
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 138224
2. Committee Name CTE David Joseph

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Lowe's</u> Address <u>27990 23 Mile</u> <u>Chesterfield, MI 48051</u> ☐ Fund Raiser	Purpose: <u>Sign posts</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/12/20</u> Date	\$ <u>148.69</u>
Expenditure #2 Name <u>Home Depot</u> Address <u>51315 Gratiot</u> <u>Chesterfield, MI 48051</u> ☐ Fund Raiser	Purpose: <u>Sign post pounder</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/08/20</u> Date	\$ <u>38.93</u>
Expenditure #3 Name <u>USPS</u> Address <u>35339 23 Mile Road</u> <u>New Baltimore, MI 48047</u> ☐ Fund Raiser	Purpose: <u>Postage</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/01/20</u> Date	\$ <u>110.00</u>
Expenditure #4 Name <u>Lowe's</u> Address <u>27990 23 Mile</u> <u>Chesterfield, MI 48051</u> ☐ Fund Raiser	Purpose: <u>Sign posts</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/01/20</u> Date	\$ <u>93.17</u>
Expenditure #5 Name <u>Anedot</u> Address <u>1340 Poydras Street</u> <u>New Orleans, LA 70112</u> ☐ Fund Raiser	Purpose: <u>Bank fees</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/04/20</u> Date	\$ <u>203.50</u>
Subtotal this page			\$594.29
Grand Total of all Schedules 1B (Complete on last page of Schedule)			\$5,059.80

Enter this total
on line 8a of
Summary Page