



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: <u>08/25/20</u> to <u>10/18/20</u>	
1. Committee I.D. Number 139361	4. Candidate Last Name Romano First Name Joseph M.I. V 4a. Office Sought Including District # or Community Served (If applicable) County Commissioner - District 4 4b. County of Residence MACOMB
2. Committee Name CTE Joe Romano	6. Treasurer's Name & Residential Address Joseph V. Romano 12236 Grindley Sterling Heights, MI 48312 Area Code & Phone <u>(586) 268-0967</u>
5. Committee's Mailing Address 12236 Grindley Sterling Heights, MI 48312 Area Code and Phone <u>(586) 268-0967</u> 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.	8. Designated Record Keeper's Name and Address (If the committee Designated Record Keeper) Area Code and Phone _____
7. Treasurer's Business Address 12236 Grindley Sterling Heights, MI 48312 Area Code and Phone <u>(586) 268-0967</u>	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.
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 <u>11/03/20</u>	
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 <u>Joseph V. Romano</u> Signature <u>Joseph V. Romano</u> Date <u>10/22/20</u> Candidate <u>Joseph V. Romano</u> Signature <u>Joseph V. Romano</u> Date <u>10/22/20</u>	

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STATE OF MICHIGAN
H. GLENN S. NICHOLS



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 139361

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name CTE Joe Romano

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>1,475.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>1,475.00</u>	(18.) \$ <u>\$9,925.00</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>\$1,475.00</u>	(20.) \$ <u>\$9,925.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$0.00</u>	(21.) \$ <u>\$400.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>\$0.00</u>	(22.) \$ <u>\$0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$7,759.00</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>\$68.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>\$7,827.00</u>	(23.) \$ <u>\$12,058.00</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>\$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>\$8,172.00</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$1,475.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$9,647.00</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$7,827.00</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$1,820.00</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 139361

2. Committee Name CTE Joe Romano

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>08/26/20</u>	
Name & Address: Brian Kern 54432 Ridgeview Shelby Twp., MI		\$ <u>200.00</u>	\$ <u>450.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Self Employed</u> Employer <u>Kern Industries</u> Business Address <u>44404 Merrill Dr.; Sterling Heights, MI</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>08/26/20</u>	
Name & Address: Larry Scott 12900 Hall Rd. Sterling Heights		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>O'Reilly Rancilio PC</u> Business Address <u>12900 Hall Rd.; Sterling Heights, MI</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>08/27/20</u>	
Name & Address: Asad Sobh 26640 Van Dyke Centerline, MI		\$ <u>125.00</u>	\$ <u>225.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate</u> Employer <u>Self</u> Business Address <u>26640 Van Dyke; Centerline, MI</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>08/28/20</u>	
Name & Address: Ralph Macarone 1239 Basilico Dr. Shelby Twp., MI		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Self</u> Business Address <u>1239 Basilico Dr.; Shelby Twp</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$525.00

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 139361
2. Committee Name CTE Joe Romano

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>09/01/20</u> Name & Address: <u>Renee Chelian</u> <u>5719 Bloomfield Glens</u> <u>Bloomfield Hills, MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Self Employed</u> Employer <u>Self</u> Business Address <u>5719 Bloomfield Glens; Bloomfield Hills, MI</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>300.00</u>	\$ <u>300.00</u>
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/01/20</u> Name & Address: <u>Larry Calcaterra</u> <u>4119 Audubon</u> <u>Grosse Pointe, MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Funeral Director</u> Employer <u>Wujek-Calcaterra Funeral Home</u> Business Address <u>36900 Schoenherr; Sterling Heights, MI</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>75.00</u>	\$ <u>275.00</u>
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/01/20</u> Name & Address: <u>Joe Vicari</u> <u>32573 Hidden Valley</u> <u>Clinton Twp.,</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Restaurateur</u> Employer <u>Andiamo's</u> Business Address <u>7096 E. 14 Mile Rd.; Warren, MI</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>200.00</u>	\$ <u>300.00</u>
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/12/20</u> Name & Address: <u>Carl Dallo</u> <u>10469 Excalibur Dr.</u> <u>Shelby Twp., MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Builder</u> Employer <u>Self</u> Business Address <u>10469 Excaliber; Shelby Twp, MI</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>200.00</u>	\$ <u>200.00</u>

Page Subtotal \$775.00

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 139361
2. Committee Name CTE Joe Romano

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>09/16/20</u>	
Name & Address: Harry Warholak 2035 River Fall Dr. Roswell GA		\$ <u>75.00</u>	\$ <u>175.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>N/A</u>		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>09/17/20</u>	
Name & Address: Lorenzo Cavaliere 30078 Schoenherr Warren, MI		\$ <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 _____	
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 **\$175.00**
Grand Total of All Schedules 1A
(Complete on last page of Schedule) **\$1,475.00**

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 139361
2. Committee Name CTE Joe Romano

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Triangle Printing</u> Address <u>30520 Gratiot Ave.</u> <u>Roseville, MI</u> ☐ Fund Raiser	Purpose: <u>Campaign Lit & Mailing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/03/20</u> Date	<u>\$ 5794.00</u>
Expenditure #2 Name <u>Joseph V. Romano</u> Address <u>12236 Grindley</u> <u>Sterling Heights, MI</u> ☐ Fund Raiser	Purpose: <u>Plastic Bags for Lit Dist.</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/08/20</u> Date	<u>\$ 155.00</u>
Expenditure #3 Name <u>Triangle Printing</u> Address <u>30520 Gratiot Ave.</u> <u>Roseville, MI</u> ☐ Fund Raiser	Purpose: <u>Campaign Lit & Mailing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/21/20</u> Date	<u>\$ 1810.00</u>
Expenditure #4 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page **\$7,759.00**

Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$7,759.00**

Enter this total
on line 8a of
Summary Page