

CANDIDATE COMMITTEE

FOR OFFICIAL USE ONLY

COVERPAGE							
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by andidate.	3. This Statement covers From	E 08/25/20 to	10/18/20			
1. Committee I.D. Number		4. Candidate Last Name	First Name	M.I.			
139892		Forlini	Anthony	G			
2. Committee Name		4a. Office Sought Including Dis	trict # or Community Serve	d (If applicable)			
OTE A-II OF II-		Clerk					
CTE Anthony G Forlini		4b. County of Residence MA	COMB	18°			
5. Committee's Mailing Address		6. Treasurer's Name & Reside	ntial Address	- 23 NO			
39285 N. Blom		Kenneth Verkest					
Harrison Twp., MI 48045		39285 N. Blom	39285 N. Blom				
		Harrison Twp., MI 4	8045	FILED 20 OCT 23 P			
		, ,		χ., ω <u>π</u>			
Area Code and Phone (586) 275-7703				2 B			
If the address in this box is different from the commit mailing address on the Statement of Organization, n				PN 3: 1			
be sent to this address by the filing official.		Area Code & Phone (586) 91	4-9944	6			
7. Treasurer's Business Address		Designated Record keeper's Designated Record keeper)	s Name and Mailing Addres	ss (If the sommittee has a			
39285 N. Blom		Kenneth Verkest					
Harrison Twp., MI 48045		39285 N. Blom					
		Harrison Twp., MI 4	8045				
Area Code and Phone (586) 914-9944		Area Code and Phone (586	914-9944				
9. TYPE OF STATEMENT			9e. Dissolution of Cand	idate Committee			
9a. X Pre-Election OR 9b. Post-Election	Required ON is not on the	ILY if candidate	By chacking this item	I/We certify any outstanding debt			
ESTITUTE CONTROL OF SULL PROPERTY.	current year.		by the committee to the ca	indidate of his of her spouse is here			
Pre-Election or Post-Election Statement relates to:		_	by discharged and forgive the committee. The comm	n, and no longer collectible from nittee has no oustanding assets,			
Primary	July Quart	eny	owes no lates fees or has				
⊠General	October Q	• • •	Further, if the dissolution o	annot be granted, that this be			
Convention			considered a request for the	ne Reporting Waiver.			
Special	9c. Annua	il Statement ()					
School	Land Villa	Coverage Year	Effective date of	fdissolution			
Caucus		dment to Campaign Statement		·			
		plete Item 9a, 9b, 9c or 9e to te which Statement is being	Note: The disposition of re	esidual funds must be reported on			
	amend		Schedule 1B and the Surr	mary Page.			
Date of Election, Convention or Caucus							
11/03/20							
10. Verification: IWVe certify that all reasonable dilige	nce was used	in the preparation of this statem	i. ent and attached schedules	(if any) and to the best of			
mylour knowledge and belief the contents are true, a	occurate and co	omplete.		## min an and many #1			
Current Treasurer or Kenneth Verke	est			40/00/00			
Designated Record keeper	VOI.	1	Date	10/23/20			
Type or Print Name		Signature					
Candidate Anthony G. Forlini		, Max.	Date	10/23/20			
Type or Print Name		Signature					

1. Committee I.D. Number 139892

SUMMARY PAGE **CANDIDATE COMMITTEE**

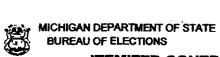
CANDIDATE COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		The same distriction of the
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 34,365.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$_\$34,365.00	(18.) \$ \$92,004.52
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$0.00	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$34,365.00	(20.) \$ \$92,004.52
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$0.00	(21.) \$ \$750.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$0.00	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$39,766.18	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	
c. Uniternized (less than \$50.01 each - no Schedule)	(8c.) \$ \$0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$39,766.18	(23.) \$ \$59,276.96
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ \$0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.)\$ \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)		\$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$ \$0.00	(24.) \$ \$0.00
a. Owed by the Committee (Schedule 1E)	(12a.) \$ \$250.00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ \$0.00	
	BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$ \$38,128.74	_
(Enter zero if no previous reports have been filed.) 14. Amount received during reporting period	(14.)+ \$ \$34,365.00	_
(Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14	(15.) = \$ \$72,493.74	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.)- \$ \$39,766.18	
17. ENDING BALANCE	(17.) \$ \$32,727.56	
(Subtract line 16 from line 15)	(17.) \$ \$02,121.00	₩ Milan



CANDIDATE COMMITTEE

1. Committee LD. Number ____139892

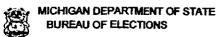
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 08/25/20 Name & Address:		
Willard McMachen		
22251 Beech Knoll Dr.	150.00	150.00
Macomb, MI 48044	_s 150.00	_{\$} 150.00
5. If over \$100.00 cumulative, please provide:	Obal-11 *	
Occupation Real Estate Agent Employer Self	Click Here to	or Memo Itemization
Business Address 22251 Beech Knoll Dr. Macomb, MI 48044		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 08/25/20 Name & Address		
Macomb County Republican Committee	0000 ==	
P.O. Box 380962	_{\$} 2000.00	_s 2000.00
Clinton Twp., MI 48038		· · · · · · · · · · · · · · · · · · ·
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 08/31/20		
Dr. Ronald Martella	500.00	
23703 Old Orchard Trail	ş 500.00	_{\$} 500.00
Bingham Farms, MI 48025	OR-1-11 7	
5. If over \$108.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Dentist Employer Self		
Business Address 2241 Hilton Rd. #1, Ferndale, MI 48220		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 08/31/20 Name & Address		
Ralph Maccarone III		
13921 Basilisco Chase	_s 100.00	_ε 450.00
Shelby Twp., MI 48315	1.,	V
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Attorney Employer Self		
Business Address 13921 Basilisco Chase Shelby Twp., MI 48315		
Type of Contribution:		
Page Subtotal	\$2,750.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	J
_{Bross} 1 , 19	line 3a of Summary	



CANDIDATE COMMITTEE

1. Committee I.D. Number _____139892

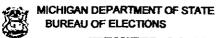
Enter contributor's name and address. If conmiddle initial. Check box to indicate if contrib Committee (PAC) Report all contributions report all contributions reports.	ution is from a Political Comm	enter last name, first name, nittee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? Name & Address:	YES 4. Date of Reco	opt 09/08/20		
Roger Lonsway 41800 Prunum Sterling Hgts., MI 48314			_s 200.00	_{\$} 200.00
5. If over \$100.00 cumulative, please provi	de:			
Occupation Retired	Employer		Click Here fo	r Memo Itemization
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? Name & Address	YES 4. Date of Rece	ipt 09/22/20		
Christopher Butts 48073 Fuller Rd. Chesterfield, MI 48051			ş 50.00	_{\$} 75.00
5. If over \$100.00 cumulative, please provide	ie:		Click Here for	Memo Itemization
OccupationE	imployer	····		
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #3 PAC Receipt? Name & Address:	YES 4. Date of Reco	eipt 09/23/20		
Gary Roncelli 69900 Hicks Rd. Armada, MI 48005			\$ 5000.00	ş 5000.00
5. If over \$100.00 cumulative, please provide			Click nere for	Memo Itemization
	Employer Roncelli, Inc.			
Business Address 6471 Metro Pkwy., Sterf	7			
Type of Contribution: ✓ Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 PAC Receipt? Name & Address	YES 4. Date of Rec	eipt 10/05/20		
CTE Anthony G. Forlini for State 39285 N. Blom Harrison Twp., Mł 48045	e Rep		\$ 15,000.00	_{\$} 45,173.52
5. If over \$100.00 cumulative, please provide	le:		Click Here for	Memo Itemization
Occupation	Employer		Olion Field 101	Memo Remizadon
Business Address				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
0 40		Page Subtotal rand Total of All Schedules 1A plete on last page of Schedule)	\$20,250.00 Enter this total on	
Page 2 of 19			line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number 139892

Enter contributor's name and address. If middle initial. Check box to indicate if concommittee (PAC) Report all contributions	stribution is from a Politica regardless of amount.	dividual, (al Commi	enter last name, first name, ttee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt?	YES 4. Date	of Recai	pt 09/21/20		
Name & Address: Lori Neff					
20860 McKishnie					
Clinton Twp., MI 48035				_s 100.00	ຸ 100.00
5. If over \$100.00 cumulative, please pr	unido.			*	4
				Click Here for	or Memo Itemization
Occupation	Employer				
Business Address					
Type of Contribution: Direct	Loan from a person	✓	Fund Raiser		
Contribution #2 PAC Receipt? Name & Address	YES 4. Date	of Receip	ot 09/21/20		
Steven Schuster					
38401 Townhall				_s 100.00	_s 100.00
Harrison Twp., MI 48045				·	*
5. If over \$100.00 cumulative, please pr	ovide:			Click Here fo	r Memo Itemization
Occupation	Employer				
Business Address					!
Type of Contribution: Direct	Loan from a person	1	Fund Raiser		
3. Contribution #3 PAC Receipt? Name & Address:	✓ YES 4. Date	of Receip	^{pt} 09/21/20		
Join Jacobsen				400.00	
401 N. Hayford Ave.				_{\$} 100.00	_s 100.00
Lansing, MI 48912					_
5. If over \$100.00 cumulative, please pro	ovide:			Click Here for	Memo Itemization
Occupation	Employer	·····			
Business Address					
Type of Contribution: Direct	Loan from a person	✓	Fund Raiser		
3. Contribution # 4 PAC Receipt? Name & Address	YES 4. Date	of Recei	ipt 09/21/20		
William Yerabek					
3302 Marc Dr.				_s 100.00	. 100.00
Sterling Hgts., MI 48310					\$
5. If over \$100.00 cumulative, please pro	ovide:			Click Here for	Memo Itemization
Occupation	Employer	<u> </u>		Onon rivin io	Mono Remization
Business Address					
Type of Contribution: Direct	Loan from a person	V	Fund Raiser		
			Page Subtotal	\$400.00	
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			ete on last page of Schedule)		j
3 10				Enter this total on line 3a of Summary	
Page 3 of 19				Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number ____139892

Enter contributor's name a middle initial. Check box Committee (PAC) Report	to indicate if contr all contributions r	ibution is from a Politic egardless of amount.	cal Committ	se or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address:	PAC Receipt?	YES 4. Date	e of Receip	09/21/20		
Jonathan Vandent 39400 W. Archer Harrison Twp., MI					_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumula	tive, please prov	vide:				
Occupation		Employer			Click Here for	or Memo Itemization
Business Address						
Type of Contribution:	Direct	Loan from a perso	n 🗸	Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	YES 4. Date	of Receipt	09/21/20		
Keith Rengert 34080 Armada Ric Richmond, MI 480	~				ş 20.00	_{\$} 20.00
5. If over \$100.00 cumula	tive, please prov	ride:			Click Here fo	r Memo Itemization
Occupation		Employer				
Business Address						
Type of Contribution:	Direct	Loan from a person	· 🗸	Fund Raiser		
3. Contribution #3 Name & Address:	PAC Receipt?	YES 4. Date	e of Receip	^t 09/30/20		
Dr. Stephen Swete 43868 Scoter Ln. Clinton Twp., MI 4					<u>\$ 50.00</u>	_{\$} 150.00
5. If over \$100,00 cumula	tive, please prov	ride:			Click Here for	Memo Itemization
Occupation Physician		Employer_Self				
Business Address 43600	Garfield Rd., Cli	inton Twp., MI 4803	8			
Type of Contribution:	Direct	Loan from a perso	n 🗸	Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?	YES 4. Da	te of Receip	× <u>09/30/20</u>		
Jennifer Walker 37680 Mound Rd. Sterling Hgts., MI 5. If over \$100.00 cumular		richo.			_{\$} 100.00	s_100.00
Occupation	, picase p.o.	. Employer			Click Here for	Memo Itemization
Business Address						
Type of Contribution:	Direct	Loan from a perso	n 🗸	Fund Raiser		:
				Page Subtotal nd Total of All Schedules 1A te on last page of Schedule)	\$270.00	
Page 4 19			• • • • • • • • • • • • • • • • • • • •	, , , , , , , , , , , , , , , , , , , ,	Enter this total on line 3a of Summary	



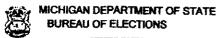
1. Committee I.D. Number 139892

CANDIDATE COMMITTEE 2. Committee Name 011	L Allulotty & FI	Juli
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 09/30/20 Name & Address:		data of Ideopty
Gaetano Rizzo		
65 Macomb Place	¸ 100.00	, 100.00
Mt. Clemens, MI 48043	\$	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r 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 09/30/20		
Guy Rizzo Jr. 37516 Hidden Valley Ct. Clinton Twp., MI 48036	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide;	Click Here for	r Memo Itemization
Occupation Employer	Onor Here to	Weino Renization
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/30/20		
Nick Rizzo 37516 Hidden Valley Ct. Clinton Twp., Ml 48036	ş 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
. Contribution #4 PAC Receipt? YES 4. Date of Receipt 09/30/20 lame & Address		
Wessam Akrawi 35214 Dodge Park Sterling Hgts., MI 48312	_{\$} 100.00	_{\$_} 100.00
i. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution:		
Page Subtotal	\$400.00	
Grand Total of All Schedules 1A		

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(Complete on last page of Schedule)

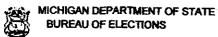
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CANDIDATE COMMITTEE

1. Committee I.D. Number 139892

Enter contributor's name and address. If contribution is from an individual, enter last name, first nam middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	e, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/30/20		
Michelle Leake 48586 Sandifer Shelby Twp., MI 48317	 _{\$} 50.00	_{\$} 50.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here 1	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 09/30/20 Name & Address		
Sandra Haroutunian 35139 Bobcean Rd. Clinton Twp., MI 48035	ş 50.00	ş 50.00
5. If over \$100.00 cumulative, please provide:	Click Here for	or 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 09/30/20 Name & Address:		
Susan Coraci 6359 Ridge Hollow Ln. Davisburg, MI 48350	<u>\$ 100.00</u>	ş 100.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r 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 09/30/20 Name & Address		
Lisa Dubay 32440 Woody Fraser, MI 48026	_s 200.00	_s 200.00
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Retired Employer	—	Wello Renazation
Business Address		
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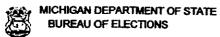


CANDIDATE COMMITTEE

1. Committee I.D. Number __139892

2. Committee Name CTE Anthony G Forlini

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 09/30/20		
Rob Montilla		
21754 Keroyl Ct.	400.00	400.00
Macomb, MI 48044	_{\$} 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide;		
Occupation Employer	Click Here fo	or Memo Itemization
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/30/20		
Name & Address		
Anna Mekowski		
16381 Vandelay	_s 100.00	_s 100.00
Macomb, MI 48044	·	9
5. If over \$100.00 cumulative, please provide:	Click Here fo	r 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 09/30/20 Name & Address:		
Sam Kassab	200.00	
3910 Coachwood Ln.	\$ 300.00	_{\$} 300.00
Rochester Hills, MI 48309		
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Operator Employer Self		
Business Address 3910 Coachwood Ln., Rochester Hills, Mt 48309		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 09/30/20 Name & Address		
Micheline Trosper		
45410 Nottingham Dr.	, 100.00	. 100.00
Macomb, MI 48044	1	\$
5. If over \$100.00 cumulative, please provide:	Click Ham for	Memo Itemization
Occupation Emptoyer	CHON FIELE TOP	weilio neinzation
Business Address		
Type of Contribution:		
Page Subtotal	\$600.00	
Grand Total of All Schedules 1A		-
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CANDIDATE COMMITTEE

1. Committee I.D. Number 139892

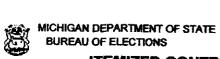
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3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 09/30/20		
Michael Levell		
22137 Trombly St.	400.00	400.00
St. Clair Shores, MI 48080	_s 100.00	_{\$} 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here f	or Memo Itemization
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/30/20		
Marylou Levell		
22137 Trombly St.	_{\$} 100.00	_s 100.00
St. Clair Shores, MI 48080		· · · · · · · · · · · · · · · · · · ·
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/30/20		
Daniel Acciavatti		
49839 Miller Ct.	_{\$} 500.00	, 500.00
Chesterfield Twp., MI 48047		•
i. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Docupation Supervisor Employer Chesterfield Township		
Business Address 47275 Sugarbush, Chesterfield Twp., MI 48047		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		:
Contribution #4 PAC Receipt? YES 4. Date of Receipt 09/30/20 lame & Address		
Steve Eskelinen		
4000 Simone	_s 500.00	500.00
Shelby Twp., MI 48315	•	\$
. if over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Roofer Employer Esko Roofing		WONO REMIZERON
Business Address 14000 Simone, Shelby Twp., MI 48315		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$1,200.00	
Grand Total of All Schedules 1A		-
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Page 8 of 19	Enter this total on line 3a of Summary	



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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 10/05/20		
Polly Helzer 93 Canfield Mt. Clemens, MI 48043	, 200.00	_s 200.00
5. If over \$100.00 cumulative, please provide:	<u> </u>	<u> </u>
Occupation Owner Employer Polyanna's	Click Here for	or Memo Itemization
Business Address 287 North Ave., Mt. Clemens, MI 48043		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/15/20 Name & Address		
Antonio Cavaliere 47508 Angeline Ct. Shelby Twp., MI 48315	\$ 250.00	ş 250.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Attorney Employer Self		
Business Address 47508 Angeline Ct., Shelby Twp., MI 48315		
Type of Contribution: Direct Loan from a person Fund Raiser	_	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 10/15/20 Name & Address:		
Linda Burns-Torp 38870 Ryan Ct. Harrison Twp., MI 48045	\$ 150.00	s 350.00
5. If over \$100.00 cumulative, please provide:		Wellio Relinzagon
Occupation Retired Employer		
Business Address		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 10/15/20		-
Daniel Russell 17680 Maisons Dr. Clinton Twp., MI 48038 5. If over \$100.00 cumulative, please provide:	_{\$} 300.00	_{\$} _300.00
Occupation CEO Employer International Marketing Consultants	Click Here for	Memo Itemization
Business Address 17680 Maisons Dr., Clinton Twp., MI 48038		
Type of Contribution:		
Page Subtotal	\$900.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	J
9 , 19	line 3a of Summary	



CANDIDATE COMMITTEE

1. Committee I.D. Number __139892

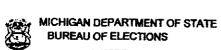
CANDIDATE COMMITTEE 2. Committee Name CT	E Anthony G F	orlini
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions 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 10/15/20		Cate of receipt)
Fara Cavaliere 30078 Schoenherr Ste. 300 Warren, MI 48088	_s 150.00	<u>,</u> 150.00
5. If over \$100.00 cumulative, please provide:	4	3
Occupation Owner Employer Legacy Management Services	Click Here fo	r Memo Itemization
Business Address 30078 Schoenherr, Ste. 300, Warren, MI 48088		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/15/20 Name & Address		
Alexander Aprile 14107 Silent Woods Dr. Shelby Twp., MI 48315	<u>\$</u> 20.00	ş_20.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		WOND ROTHERD
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #3 PAC Receipt? ✓ YES 4. Date of Receipt 10/15/20		
Sheri Ciraulo 53425 Pondview Dr. Shelby Twp., MI 48315	ş 500.00	ş 500.00
5. if over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Teacher Employer Utica Community Schools		
Business Address 11303 Greendale, Sterling Hgts., MI 48312		
Type of Contribution:		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/15/20 Name & Address		
George Vidu 2651 Hiller Rd. West Bloomfield, MI 48324 5. If over \$100.00 cumulative, please provide:	_{\$} 200.00	_{\$} 200.00
Occupation Owner Employer Mark Precision Tool	Click Here for	Memo Itemization
Business Address 4360 Haggerty Rd., Walled Lake, MI 48390		
Type of Contribution: Loan from a person Fund Raiser		
Page Subtotal	\$870.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	Enter this total on	
Page 10 of 19	line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number ____139892

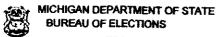
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 10/15/20		
Michael Graham 38288 Sheffield St. Clinton Twp., Mi 48036 5. If over \$100.00 cumulative, please provide:	_s 100.00	_{\$} 100.00
	Click Here f	or Memo Itemization
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/15/20 Name & Address		
Lisa Valerio-Nowc 20761 Marvindale St. Clinton Twp., MI 48035	ş 50.00	ş 50.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r 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 10/15/20		
Vinay Shenoy 28278 Wolcott Dr. Novi, MI 48377	\$ 500.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Project Mgr. Employer Winstar Contracting, LLC		
Business Address 400 Renaissance Ctr., Detroit, MI 48243		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
. Contribution #4 PAC Receipt? YES 4. Date of Receipt 10/15/20		
Thomas Jacob 20880 Fleetwood Dr. Clinton Twp., MI 48035 5. If over \$100.00 cumulative, please provide:	_{\$} 250.00	_{\$} _250.00
Occupation Support Services Employer Archdiocese of Detroit	Click Here for	Memo Itemization
Business Address 12 State St., Detroit, MI 48226		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	\$900.00 Enter this total on line 3a of Surnmary	
Page II 19	Paga	



CANDIDATE COMMITTEE

1. Committee I.D. Number 139892

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 10/15/20		T Valo of rocept)
Dr. Stephen Swetech	•	
43868 Scoter Ln.	400.00	050.00
Clinton Twp., MI 48038	_s 100.00	_s 250.00
5. If over \$100.00 cumulative, please provide:	Olista I I a	
Occupation Physician Employer Self	Click Here t	or Memo Itemization
Business Address 43600 Garfield Rd., Clinton Twp., MI 48038		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/15/20 Name & Address		
Cathi Humphreys		
21921 Lakeshore	_{\$} 100.00	_s 100.00
St. Clair Shores, MI 48081		
5. If over \$100.00 cumulative, please provide:	Click Here fo	r 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 10/17/20 Name & Address:		
James Lane	400.00	
16558 Woodlane	<u>, 100.00</u>	_{\$} 100.00
Fraser, MI 48026	Official III	
5. If over \$100.00 cumulative, please provide:	Click Here to	Memo Itemization
Occupation Employer		
Business Address Type of Contribution: Direct		
Turid Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 10/17/20 Name & Address		
Pamela David		
16558 Woodlane	, 25.00	, 25.00
Fraser, MI 48026	3	\$ 20.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer	OICK HEIE IOI	Metho Remization
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
Page Subtotal	\$325.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)]
Page 12 of 19	Enter this total on line 3a of Summary Page.	



Committee I.D. Number 139892

SCHEDULE 1A	1. Committee I.D. Numb	er	
CANDIDATE COMMITTEE	COCINITIACE (1881)	TE Anthony G Fo	orlini
Enter contributor's name and address. If contribution is from an individual, emiddle initial. Check box to indicate if contribution is from a Political Committee (PAC) Report all contributions regardless of amount.	enter last name, first name, tise or an independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt Name & Address:	ot 10/17/20		240 VI 1608DI)
Gary D'Alessandro			
28117 Groesbeck Hwy.		4000.00	4000.00
Roseville, MI 48066		_s 1000.00	_s 1000.00
5. If over \$100.00 cumulative, please provide:			
Occupation President Employer Lanzo Constru	ction	Click Here for	r Memo Itemization
Business Address 28135 Groesbeck Hwy. Roseville, MI 48066			•
Type of Contribution: Direct Loan from a person	Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt Name & Address	t 10/17/20		
Massimo Mancini			
		, 100.00	100.00
41744 Stonehenge		\$ 100.00	_s 100.00
Clinton Twp., MI 48038			
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 Name & Address:	10/17/20		
John Becker		100.00	400.00
20129 Windham		<u>\$ 100.00</u>	_s 100.00
Macomb, MI 48044		~ "	
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Employer			
Business Address			
Type of Contribution:	Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt Name & Address	pt 10/17/20		
Gloria DeLano			
32775 N. River Rd.		, 100.00	100.00
Harrison Twp., MI 48045		\$ 100.00	\$ 100.00
5. If over \$100.00 cumulative, please provide:			
Occupation Employer		Click Here for	Memo Itemization
Business Address			
	Fund Raiser		
	Fund Raiser	81 \$1,300.00	

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

Enter this total on line 3a of Summary Page.

Page 13 of 19



CANDIDATE COMMITTEE

1. Committee I.D. Number 139892

2. Committee Name CTE Anthony G Forlini

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 10/17/20		
Michael DeLano	-	
32775 N. River Rd.		4.0.0.0.0
Harrison Twp., MI 48045	_{\$} 100.00	_s 100.00
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	Click Here f	or Memo Itemization
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/10/20 Name & Address		
Nancy Tiseo		
16155 Vista Woods Ct.	_{\$} 100.00	_s 100.00
Clinton Twp., MI 48038	7	
5. If over \$100.00 cumulative, please provide:	Click Here fo	r 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 09/10/20 Name & Address:		
David Hoin	50.00	
52806 Muirfield	_{\$} 50.00	_s 300.00
Chesterfield, MI 48051		
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Property Manager Employer Self		
Business Address 52806 Muirfield, Chesterfield, MI 48051		
Type of Contribution:		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/11/20 Name & Address		
Ken Nelson		
40862 Firesteel Dr.	_s 100.00	100.00
Sterling Hgts., MI 48313	<u> </u>	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Employer		THORIE REFINE EUCH
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$350.00	
Grand Total of All Schedules 1A		-
(Complete on last page of Schedule)]
Pageof	Enter this total on line 3a of Summary Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number _____139892

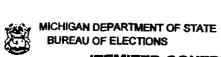
Enter contributor's name and address. If contribution is from an individual, enter last name, first name,		
middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/12/20		1 Date (1 (600)))
Deanna Forlini		
25 Belleview St.	, 100.00	<u>.</u> 100.00
Mt. Clemens, MI 48043	\$ 100.00	§ 100.00
5. If over \$100.00 cumulative, please provide:	Click Here f	or Memo Itemization
Occupation Employer	Once Hele I	or metho remization
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/14/20 Name & Address		
Francesco Fregoli		
49191 Dunhill Dr.	_s 50.00	_s 50.00
Macomb, MI 48044		₹
5. If over \$100.00 cumulative, please provide:	Click Here fo	r 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 09/14/20 Name & Address:		
Linda Burns-Torp		
38870 Ryan Ct.	_{\$} 100.00	، 450.00
Harrison Twp., Mt 48045		Ψ
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Retired Employer		
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/14/20 Name & Address	-	
Robert Little		
14625 Shirley Ave.	_s 150.00	ູ 150.00
Warren, MI 48089		¥
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Retired Employer		
Business Address		
Type of Contribution:		
Page Subtots	\$400.00	
Grand Total of All Schedules 1A		1
(Complete on last page of Schedule	ı) L	J
Page 15 of 19	Enter this total on line 3a of Summary	
· "5"	Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number 139892

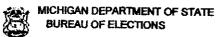
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 09/15/20		
Roger Lonsway	•	
41800 Prunum		
Sterling Hgts., MI 48314	_s 50.00	_s 250.00
5. If over \$100.00 cumulative, please provide:	-	
Occupation Retired Employer	Click Here fo	or Memo Itemization
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 09/15/20 Name & Address		
Marian Devereux		
56328 St. Andrews Macomb, MI 48044	<u>\$ 250.00</u>	_{\$} 250.00
5. If over \$100.90 cumulative, please provide:		
Occupation Sales Executive Employer Priority Health	Click Here fo	r Memo Itemization
Business Address 56328 St. Andrews, Macomb, MI 48044		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 09/16/20		
Joe Haveman		
151 Sorrento Dr.	_s 100.00	, 100.00
Holland, MI 49423		4
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Retired Employer		İ
Business Address		
Type of Contribution:		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 10/05/20 Name & Address		
John Ezzo		
1405 Combermere Dr.	,200.00	. 1200.00
Troy, MI 48083	2	\$
5. If over \$100.00 cumulative, please provide:	Click Hoss for	Adama (4m-141
Occupation CEO Employer New Image Bldg. Services	Click nere for	Memo Itemization
Business Address 1405 Combermere Dr., Troy, MI 48083		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
Page Subtotal	\$600.00	
Grand Total of All Schedules 1A		
(Complete on last page of Schedule)	Enter this total on	l
Page 16 of 19	line 3a of Summary	
Page of	Pane	



CANDIDATE COMMITTEE

1. Committee I.D. Number 139892

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 10/05/20		Late of recepty
Joseph DeSchryver		
35310 Eden Park Dr.	_s 50.00	50.00
Sterling Hgts., MI 48312	<u>\$_00.00</u>	_ş 50.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Retired Employer		o wello kellization
Business Address		
Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 10/08/20 Name & Address		
James Burton 13368 Banbury Ct. Shelby Twp., MI 48315	_{\$} 150.00	_{\$} 150.00
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer HRC	0.000 1010 10	· Wellio Resilization
Business Address 555 Hulet Dr., Bloomfield Hills, MI 48302		
Type of Contribution:		
3. Contribution #3 PAC Receipt? ✓ YES 4. Date of Receipt 10/11/20 Name & Address:		
Robert Little 14625 Shirley Ave. Warren, MI 48089	<u>\$ 150.00</u>	_{\$} 300.00
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Retired Employer		
Business Address Type of Contribution: ✓ Direct Loan from a person ✓ Fund Raiser		
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 10/12/20		-
Daniel Russell 17680 Maisons Dr. Clinton Twp., MI 48038	_{\$} 200.00	_{\$} 500.00
5. If over \$100.00 cumulative, please provide:	Clink Hors for	Adams the start of
Occupation CEO Employer International Marketing Consultants	Click Here for	Memo Itemization
Business Address 17680 Maisons Dr., Clinton Twp., MI 48038		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$550.00	
Grand Total of Alt Schedules 1A (Complete on last page of Schedule)		
Page	Enter this total on line 3a of Summary Page.	•



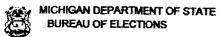
Name & Address:

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS			
ITEMIZED CONTRIBUTIONS SCHEDULE 1A	1. Committee I.D. Number _	139892	
CANDIDATE COMMITTEE		Anthony G Fo	orlini
Enter contributor's name and address. If contribution is from an individual, en middle initial. Check box to indicate if contribution is from a Political Committe Committee (PAC) Report <u>all</u> contributions regardless of amount.	nter last name, first name, ee or an independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? YES 4. Date of Receipt larne & Address:	10/12/20		
Michael Pittiglio 61522 Wagonwheel Washington, MI 48094		_{\$} 500.00	_s 500.00
. If over \$100.00 cumulative, please provide: Construction	nt Co.	Click Here for	r Memo Itemization
usiness Address 51515 Corridor, Utica, MI 48315			
	Fund Raiser		
Contribution #2 PAC Receipt? YES 4. Date of Receipt ame & Address	10/12/20		
Salvatore Cavaliere 15673 Heather Ridge Dr. Nacomb, MI 48044		<u>\$ 1000.00</u>	_{\$} 1250.00
If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
occupation Owner Employer Signature Building			
usiness Address 48620 Lorenzo Dr., Macomb, MI 48044			
ype of Contribution: ✓ Direct Loan from a person ✓	Fund Raiser		
Contribution #3 PAC Receipt? YES 4. Date of Receipt	10/12/20		

Michael Pittiglio 61522 Wagonwheel Washington, MI 48094 5. If over \$100.00 cumulative, please provide: Occupation Construction Employer Florence Cen Business Address 51515 Corridor, Utica, MI 48315 Type of Contribution: Direct Loan from a person 3. Contribution #2 PAC Receipt? 4. Date of Rece Name & Address Salvatore Cavaliere 45673 Heather Ridge Dr. Macomb, MI 48044 5. If over \$100.00 cumulative, please provide: Employer_Signature Buildi Occupation Owner Business Address 48620 Lorenzo Dr., Macomb, MI 48044 Type of Contribution: Direct Loan from a person 3. Contribution #3 PAC Receipt? YES 4. Date of Rece Name & Address: Nancy Tiseo **.** 150.00 **250.00** 16155 Vista Woods Ct. Clinton Twp., MI 48038 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation Retired **Employer Business Address** Type of Contribution: 🗸 Loan from a person **Fund Raiser** 3. Contribution # 4 PAC Receipt? 4. Date of Receipt 10/12/20 Name & Address Sandra Haroutunian 35139 Bobcean Rd. 100.00 Clinton Twp., MI 48035 5. If over \$100.00 cumulative, please provide: Click Here for Memo Itemization Occupation. Employer **Business Address** Type of Contribution: | I Direct Loan from a person Fund Raiser Page Subtotal \$1,700.00 Grand Total of All Schedules 1A (Complete on last page of Schedule) Enter this total on Page 18 of 19 line 3a of Summary Page.



CANDIDATE COMMITTEE

1. Committee I.D. Number _____139892

2. Committee Name CTE Anthony G Forlini

Page.

Committee (PAC) Rep	box to indicate if cor port <u>all</u> contributions	ntribution is from a Politica regardless of amount.	il Committ	nter last name, first name, se or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	PAC Receipt?	YES 4. Date	of Receipt	10/13/20		date of fecepty
Frank Lovasco					•	
5541 Meadow L	_ane				000.00	050.00
Shelby Twp., M	1 48316				_s 200.00	_s 350.00
5. If over \$100.00 cur		ovide:				
Occupation Apprais	er	Employer Self			Click Here fo	or Memo Itemization
Business Address 55	41 Meadow Lar	ne, Shelby Twp., MI	48316			
Type of Contribution:	√ Direct	Loan from a person	✓	Fund Raiser		
Contribution #2 Name & Address	PAC Receipt?	YES 4. Date of	of Receipt			
					\$	\$
5. If over \$100.00 cum	wistim plane new	m dala .				
					Click Here fo	r Memo Itemization
Occupation		_ Employer				
Business Address						
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
3. Contribution #3 Name & Address:	PAC Receipt?	YES 4. Date of	of Receipt		ė	
					4	\$
5. If over \$100.00 cum	ulative, please pro	vide:			Click Here for	Memo Itemization
_	,, ,	Employer				
Business Address						
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date	of Receipt			
					_	
P. 15					\$	\$
5. If over \$100.00 cum	ulative, please pro	vide:			Click Here for	Memo Itemization
Occupation		_ Employer				
Business Address						!
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
				Page Subtotal	\$200.00	
			Grand	I Total of All Schedules 1A	\$34,365.00	
			(Complete	on last page of Schedule)	Enter this total on	j
Page 19 of 19					line 3a of Summary Page.	



2. Committee Name CTE Anthony G Forlini

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Karma Jack		08/26/20	• F00 00
Address	Purpose: Social Medie Marketing (all done in-house)	Date	\$ 500.00
2915 John R St. #51/507			
Detroit, MI 48201	Click	tere for Memo	Iternization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name Constant Contact		08/31/20	\$ 95.00
Address	Purpose: Marketing Services (all done in-house)	Date	<u> </u>
1601 Trapelo Rd.	Clint II	laus # 9 6	h =
Waltham, MA 02451		ICIR FOLIMENTO	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
Expenditure #3	statement		
Name Karma Jack			
Ranna Jack	·	09/08/20	\$ 699.00
Address	Purpose: Social Media Marketing (all done in-house)	Date	* 033.00
2915 John R St. #51/507			
Detroit, MI 48201	1 F 1	ere for Memo	Itemization Type
Fund Raiser	LICheck box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4	OCC SC F POSTS		
Name Facebook			
· woodoon		09/15/20	\$ 510.42
Address	Purpose: Online Marketing	Date	¥ 010.42
1 Hacker Way			
Menlo Park, ČA 94025	Click He	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
^{Name} Sign-A-Rama		09/16/20	
Address	Purpose: Signs	Date	\$ <u>391.14</u>
36886 Harper	· wepress.	nor talk hand	, , , ,
Clinton Twp., MI 48035		e for Memo	Iternization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
\	Subtota	al this page	\$2,195.56
	Grand Total of all So (Complete on last page of		
	familian an mar bridge		Enter this total

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Page ____ of ___



1. Committee I. D. Number 139892

2. Committee Name CTE Anthony G Forlini

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	T = 5 : -	
	ruipose (resquied information)	5. Date	6. Amount
Expenditure #1			
Name Italian American Cultural Center		09/16/20	\$ 600.00
Address	Purpose: Food & Beverages	Date	
43843 Romeo Plank Rd.			
Clinton Twp., MI 48038]	tere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name America's Finest Printing		09/21/20	\$ 624.34
Address	Purpose: Printing	Date	
17060 Masonic #401	Click H	lere for Memo	Itemization Type
Fraser, MI 48026	,	0.0 10, 110,120	normadion type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name Facebook		09/22/20	\$ 600.00
Address	Purpose: Online Marketing	Date	* <u>000.00</u>
1 Hacker Way	Click H.	are for Mamo	Itemization Type
Menio Park, CA 94025		PLO SOL MICHELLY	manization rype
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4		 	
Name Google	(09/23 /20	¢ 250.00
Address	Purpose: Online Marketing	Date	\$ 350.00
1600 Amphitheatre Parkway	Official and		
Mountain View, CA 94043		se ioriviento i	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name C & G Newspapers	1	09/24 /20	
Address	Purpose: Print Advertising	Date	\$ <u>10,795.10</u>
13650 11 Mile Rd.			
Warren, MI 48089	Click Ho Check box if this expenditure is payment of	are for Memo	Itemization Type
Fund Raiser	debt or obligation reported on previous statement		
	Subtot	al this page	\$12,969.44
	Grand Total of all S (Complete on last page		
•		٠.	Enter this total

Enter this total on line 8a of Summary Page

2 7 Page ____ of ____



1. Committee I. D. Number

139892

2. Committee Name CTE Anthony G Forlini

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name WXYZ / WMYD		09/25/20	\$ 3000.00
Address	Purpose: Television Advertising	Date	\$ 3000.00
20777 W. 10 Mile Rd.			
Southfield, MI 48075	Click	Here for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name Constant Contact		09/28/20	\$ 95.00
Address	Purpose: Marketing Services	Date	\$ <u>95.00</u>
1601 Trapelo Rd.	Click	lere for Memo	Itemization Type
Waltham, MA 02451		TOTO TO TRICKING	MOTHER BOTT 1 YEAR
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name City of Sterling Heights		09/28/20	\$ 33.00
Address	Purpose: FOIA Request	Date	
40555 Utica Road			
Sterling Hgts., MI 48313	1 — 1	lere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4		"	
Name Sign-A-Rama		00/20/20	
		09/28/20	\$ 174.90
Address	Purpose: Signs	Date	
36886 Harper	O'E-1-11		–
Clinton Twp., MI 48035	l 	lere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name Karma Jack		09/28/20	
Address	Purpose: Social Media Marketing (all done in-house)	Date	\$ 250.00
2915 John R St. #51/507			
Detroit, MI 48201		lere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
hand			
		al this page	\$3,552.90
	Grand Total of all S (Complete on last page		
		,	

Enter this total on line 8a of Summary Page

Page _____ 7



Committee I D Number 139892

1. Committee I. D. No	mber 103032
2. Committee Name	CTE Anthony G Forlini

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		<u> </u>	O. Falloune
•			
Name Google		09/29/20	\$ 500.00
Address	Purpose: Online Marketing	Date	
1600 Amphitheatre Parkway			
Mountain View, CA 94043	Click H	lere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2	Scausingrit		
Name Facebook			
Facebook		09/30/20	\$ 600.00
Address	Purpose: Online Marketing	Date	
	Fulpose.		
1 Hacker Way	Click H	ere for Memo	Itemization Type
Menio Park, CA 94025			•
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
	statement		
Expenditure #3			
Name America's Finest Printing	1	40400400	
·		10/02/20	\$ 132.29
Address	Purpose: Printing Services	Date	
17060 Masonic #401			
Fraser, MI 48026	1 - 1	ere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
^{Name} Karma Jack			
Nama odek		10/05/20	\$ 699.00
Address	Social Media Marketing (all done in-house)	Date	* 099.00
2915 John R St. #51/507	ruipose.		
Detroit, MI 48201	l Click He	ere for Memo	Itemization Type
Delitor, IVII 40201			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
	statement		
Expenditure #5			
Name C & G Newspapers		10/05/00	
Address	Drint Advertising -	10/05/20	\$ 8613.83
	Purpose: Fifth Advertishing	Date	
13650 11 Mile Rd.	Click He	re for Memo	Itemization Type
Warren, Mi 48089	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous		
	statement		
	Subtota	al this page	\$10,545.12
	Grand Total of all So	ahadales 415	, - 1 - 1 - 1
	(Complete on last page of		
	,	/	Fato-Strates

Enter this total on line 8a of Summary Page

Page 4 0f 7



1. Committee I. D. Number

139892

2. Committee Name CTE Anthony G Forlini

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		J. Daile	O. Allount
Name Constant Contact		10/06/20	
			\$ 27.09
Address	Purpose: Marketing Services	Date	
1601 Trapelo Rd. Waltham, MA 02451	Click H	lere for Menno	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name Google		10/06/20	\$ 500,00
Address	Purpose: Online Marketing	Date	\$ 200.00
1600 Amphitheatre Parkway	t dipose.		
Mountain View, CA 94043	Click H	ere for Memo	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name Triangle Printing		10/07/20	
Address	Purpose: Printing Services	Date	\$ 79.50
30520 Gratiot Ave.			
Roseville, MI 48066	i r - 1	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
Expenditure #4	statement		
, N			:
Name Facebook	_	10/13/20	* 000 00
Address	Purpose: Online Marketing	Date	\$ 900.00
1 Hacker Way			
Menlo Park, ČA 94025	p	ere for Memo	Itemization Type
Π	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name Sign-A-Rama		10/13/20	
Address	Purpose: Signs	Date	\$ <u>271.15</u>
36886 Harper	Click Us	vo for Mama	Itemization Type
Clinton Twp., MI 48035	Check box if this expenditure is payment of	AC 101 MICHIO	remzadon Type
Fund Raiser	debt or obligation reported on previous statement		
	Subtots	il this page	¢4 777 74
			\$1,777.74
	Grand Total of all So (Complete on last page of		

Enter this total on line 8a of Summary Page



1. Committee J. D. Number 139892

2. Committee Name CTE Anthony G Forlini

3. Name and address of person or vendor to whom paid		· · · · · · · · · · · · · · · · · · ·	
	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Sajo's		10/14/20	• E00 07
Address	Purpose: Food & Beverages	Date	\$ <u>599.97</u>
36470 Moravian Dr.	Pulpase:		
Clinton Twp., MI 48035	Click	lere for Memo	Iternization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2	SASSIVEN		
Name Google		40/4400	
Coogic		10/14/20	\$ 500.00
Address	Purpose: Online Marketing	Date	
1600 Amphitheatre Parkway			
Mountain View, CA 94043	Click H	lere for Merno	Itemization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name USPS			
	_	10/15/20	\$ 220.00
Address	Purpose: Postage	Date	***************************************
155 S. Main St.	Citate 11	f h4	
Mt. Clemens, MI 48043	l)	ere for Memo	Itemization Type
Fund Raiser	LICheck box if this expenditure is payment of debt or obligation reported on previous		
	statement		
Expenditure #4			
Name Facebook		10/15/20	
Address		Date	\$ <u>342.51</u>
	Purpose: Online Marketing		
1 Hacker Way Menlo Park, CA 94025	l Cäck He	are for Memo	temization Type
ivienio Park, CA 94025	Check box if this expenditure is payment of		winizagon Typo
Fund Raiser	debt or obligation reported on previous		
	statement	<u> </u>	
Expenditure #5			
Name Google		10/16/20	
Address	Purpose: Online Marketing	Date	\$ <u>35.98</u>
1600 Amphitheatre Parkway	-		:
Mountain View, CA 94043		ere for Memo	temization Type
Total Date:	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
	Subtota	al this page	\$1,688.46
		1	¥1,000.40
	Grand Total of all So (Complete on last page		
	• • • • • • • • • • • • • • • • • • •	, [Enter this total

Enter this tota on line 8a of Summary Page

Page __6 __ of ____



1. Committee I. D. Number

139892

2. Committee Name CTE Anthony G Forlini

Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name WinRed		10/17/20	\$ 150.70
Address	Purpose: Fundraising Fees	Date	100.70
1776 Wilson Blvd., Suite 530	Click L	dorn for Manne	Manual 1971
Arlington, VA 22219]	HERE HUT MINERLED	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name Triangle Printing		10/16/20	s 148.40
Address	Purpose: Printing Services	Date	
30520 Gratiot Ave.	Clint 1	lana fumble	E4 5 45 1991
Roseville, MI 48066	CHCK FI	ere for memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3	J. B. C.		
Name WXYZ / WMYD		10/01/20	. 0000 00
Address	Purpose: Television Advertising	Date	\$ 6000.00
20777 W. 10 Mile Rd.	05.131		
Southfield, MI 48075		ere for Memo	Itemization Type
Fund Raiser	LICheck box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			5
Name MediaNews Group		10/05 /20	
Address	Purpose: Newspaper Advertising	Date	\$ <u>737.86</u>
101 W. Colfax Ave.			
Denver, CO 80202	l , ,	ere for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name			
Address	Purpose:	Date	\$
	Click He	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	inorracia de la constanta de l
	Subtot	al this page	\$7,036.96
	Grand Total of all S (Complete on last page		\$39,766.18
	, , ,	,	

Enter this total on line 8a of Summary Page

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DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number 139892

CANDIDATE COMMITTEE	2. Committee Name	CTE Anthony G. Forlini
his Schedule itemizes		

This Schedule itemizes:	_			
a ✓ Debts and obligations owed by or forgiven the com (Che	mittee OR b. Debt ck either a or b. Use only for the pu	s and obligations owed <u>to</u> o	r forgiven <u>by</u> the co	mmittee.
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 endorsers or guarantors, if any.	Type of Obligation (Description) Indicate date debt was incurred 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: Anthony G. Forlini	4. Type: Loan	S		
41270 Conger Bay Drive	5. Date Debt Was Incurred:			
Harrison Twp., MI 48045	07/20/20	<u> </u>		s 250.00
	6. Original Amount of Debt:	s	\$	\$_200.00
	\$ <u>250.00</u>			FORGIVEN
If bank loan, name of endorser or guarantor:		\$		·
		Amo	unt Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by:	4. Туре:	<u> </u>		
	5. Date Debt Was Incurred:			
	6. Original Amount of Debt	<u> </u>	s	\$
	\$	\$	·	
		\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$	
Debt #3 Corp? Yes	4.75			
Owed to or by:	4. Type:	\$		
	5. Date Debt Was Incurred:	\$		
				
	6. Original Amount of Debt:	•	\$	\$
	\$	<u> </u>		FORGIVEN
if bank loan, name of endorser or guarantor.		Arr	ount Endorsed: \$_	
				<u> </u>
		Page Subtotal (Outstanding debt)	\$250.00
(Co	mplete on last page of Schedule si	Grand Total of howing amounts owed by or	f all Schedules 1E to the committee)	\$250.00
A debt or obligation must be shown on this Schedul this Campaign Statement or it was forgiven during t	ie if there was an outstanding an he period covered by this Campa	nount owed on it at the clo aign Statement.	sing date of	Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page
Page 1 of 1				



FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number

Committee I.D. Number

2. Committee Name CTE Anthony G. Forlini - USE A SEPARATE SHEET FOR EACH EVENT -3. Date Event Was Held 4. Number of Individuals Attending 5. Type of Fund Raising Activity 6. Address and Name (If any) of the or Participating (whichever is place where the activity was held. greater) Italian American Cultural Center 09/15/20 43843 Romeo Plank Rd. 47 **Bocce & Meatballs** Clinton Twp., MI 48038 Private Residence \$5,270.00 7. Total Contributions \$0.00 8. Other Receipts \$5,270.00 9. Gross Receipts (Add lines 7 and 8) \$600.00 10. Total Cost of Event (Total Cost includes In-Kind Contributions and All Expenditures Made For the Event) 11. Check if event was a joint fund raiser and complete the following: Co-Sponsor(s) Contribution Split **Expenditure Split** (%) (%)

 The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.

 Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.

Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

Page 1 of	1
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Page _1 ___ of _1 ___

FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

1. Committee I.D. Number

Date Event Was Held		r of Individuals Attending	EET FOR EACH EVENT	
	or Particip greater)	ating (whichever is	5. Type of Fund Raising Activity	Address and Name (If any) of it place where the activity was held
/12/20		52	Columbus Day Dinner	Sajo's 36470 Moravian Dr. Clainton Twp., MI 48035 Private Residence
otal Contributions		\$7,045.00		
ther Receipts		\$0.00		
ross Receipts (Add lines 7 a	and 8)	\$7,045.00		
Total Cost of Event al Cost includes In-Kind Con	ntributions	\$599.97	Mode For the French	
Check if event was a join				
Co-Sponsor(s)		Contribution S	rslit	Francis O P
		(%)	P nt	Expenditure Split (%)
			р и	
			PIL	
			PH.	
			PH.	
			PHL	

Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.