



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: 10/19/20 to 11/23/20

1. Committee I.D. Number

138663

2. Committee Name

CTE Anthony Wickersham

4. Candidate Last Name First Name M.I.

Wickersham Anthony M.

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

Sheriff

4b. County of Residence **MACOMB**

5. Committee's Mailing Address

P.O. Box 752
Mt. Clemens, MI 48046

Area Code and Phone

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

6. Treasurer's Name & Residential Address

Lauren Wickersham
72726 Sorrel
Bruce Twp., MI 48056

Area Code & Phone

7. Treasurer's Business Address

72426 Sorrel
Bruce Township, MI 48056

Area Code and Phone (586) 713-8883

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

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

Date of Election, Convention or Caucus

11/03/20

Required ONLY if candidate is not on the ballot for the current year:

- ☐ July Quarterly
☐ October Quarterly

9c. ☐ Annual Statement () Coverage Year

9d. ☐ Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)

9e. Dissolution of Candidate Committee

☐ By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt.

Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Effective date of dissolution

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Record keeper Lauren Wickersham

Type or Print Name

Signature

Date

12/1/2020

Candidate

Anthony Wickersham

Type or Print Name

Signature

Date

12/2/2020



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 138663

2. Committee Name CTE Anthony Wickersham

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>35,250.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>35,250.00</u>	(18.) \$ <u>35,250.00</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>35,250.00</u>	(20.) \$ <u>101,835.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>3,100.00</u>	(21.) \$ <u>9,732.19</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>56,997.62</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>48.92</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>57,046.54</u>	(23.) \$ <u>94,078.88</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>5,233.52</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>5,233.52</u>	(24.) \$ <u>64,977.11</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>33,632.45</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>35,250.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>68,882.45</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>62,280.06</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>6,602.39</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663
2. Committee Name CTE Anthony Wickersham

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.			6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/20/20</u>		
Name & Address: Michael Balian 863 Pinery Blvd. Lake Orion, MI 48362			\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Balian Legal PLC</u> Business Address <u>40950 Woodward, Ste. 350 Bloomfield Hills, MI 48304</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>10/20/20</u>		
Name & Address: Vito Pianello 14286 Bournemuth Dr. Shelby Twp., MI 48315			\$ <u>100.00</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 # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/20/20</u>		
Name & Address: John Norian 1545 Kingsway Ct, Ste 200 Trenton, MI 48183			\$ <u>100.00</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 # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/20/20</u>		
Name & Address: Louis Ciotti 1315 S. Main St. Royal Oak, MI 48067			\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate Agent</u> Employer <u>Self Employed</u> Business Address <u>30500 Northwestern Hwy, Ste 200 Farmington Hills, MI 48334</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			Click Here for Memo Itemization	

Page Subtotal \$700.00

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

Enter this total on
line 3a of Summary
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1. Committee I.D. Number 138663
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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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Samira Choulagh</u> <u>43798 Holmes Dr.</u> <u>Sterling Heights, MI 48314</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>SH Fashions</u> Business Address <u>32766 Ryan, Warren MI 48092</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>250.00</u>	\$ <u>250.00</u>
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Hany Choulagh</u> <u>48568 Amber</u> <u>Shelby Twp., MI 48315</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Self Employed</u> Business Address <u>48568 Amber Shelby Twp., MI 48315</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>250.00</u>	\$ <u>250.00</u>
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Avis Choulagh</u> <u>48528 Isola Dr.</u> <u>Shelby Twp., MI 48315</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Law Offices of Avis Choulagh</u> Business Address <u>32059 Utica Fraser, MI 48315</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>250.00</u>	\$ <u>250.00</u>
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Steve Nalu</u> <u>5343 Carlisle Ct.</u> <u>Rocester, MI 48306</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Towns Mart Marathon</u> Business Address <u>13200 32 Mile Washington, MI 48095</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>200.00</u>	\$ <u>200.00</u>

Page Subtotal \$950.00

Grand Total of All Schedules 1A
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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 <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Robert Davis</u> <u>45905 Beaufort Dr.</u> <u>Macomb, MI 48044</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Robert Davis PLC</u> Business Address <u>10 S. Main St. Mt. Clemens, MI 48043</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>250.00</u>	\$ <u>250.00</u>
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Fischer Garon & Hoyumpa PLLC</u> <u>48 Market St. Ste 2B</u> <u>Mt. Clemens, MI 48043</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>200.00</u>	\$ <u>200.00</u>
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Jeffrey Davis</u> <u>20852 Marlinga Dr.</u> <u>Clinton Twp., MI 48038</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Jeffrey R. Davis PC</u> Business Address <u>48 Market St. Mt. Clemens, MI 48043</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>200.00</u>	\$ <u>200.00</u>
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Karen Degreger</u> <u>17925 Autumn Ln.</u> <u>Macomb, MI 48044</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>Housewife</u> Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>200.00</u>	\$ <u>200.00</u>

Page Subtotal \$850.00

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3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Ryan Ruttan</u> <u>21158 Van K. Dr</u> <u>Grosse Pointe Woods, MI 48236</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Lieutenant</u> Employer <u>Macomb County Sheriff's Office</u> Business Address <u>43565 Elizabeth, Mt. Clemens, MI 48043</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>250.00</u>	\$ <u>450.00</u>
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/09/20</u> Name & Address: <u>County of Macomb</u> <u>Finance Department</u> <u>120 N. Main St.</u> <u>Mt. Clemens, MI 48043</u> 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>	\$ <u>100.00</u>
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Stavros Toma</u> <u>47677 Milonas Rd.</u> <u>Shelby, MI 48315</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>T16 Holdings</u> Business Address <u>19500 Hall Rd. CLinton Twp., MI 48038</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>2500.00</u>	\$ <u>3600.00</u>
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Michael Torres</u> <u>5865 Jackelyn Ct.</u> <u>Washington, MI 48094</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Builder</u> Employer <u>Torres Building</u> Business Address <u>5865 Jackelyn Ct. Washington, MI 48094</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>

Page Subtotal \$3,350.00

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: Operating Engineers Local 324, State of Michigan Political Action Committee 500 Hulet Drive Bloomfield Twp., MI 48302		\$ <u>500.00</u>	\$ <u>500.00</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>10/20/20</u> Name & Address: Haytham Elias 63454 Turnberry Way Washington, MI 48095		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Converge IT</u> Business Address <u>13854 Lakeside Cir, Sterling Heights, MI 48313</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>10/20/20</u> Name & Address: Stephen Rabaut 16931 19 Mile Rd. Clinton Twp., MI 48038		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Stephen Rabaut Attorney and Counselor at Law</u> Business Address <u>16931 19 Mile Rd., Clinton Twp., MI 48038</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>10/20/20</u> Name & Address: Larry Campbell 1186 E 12 Mile Rd. Madison Heights, MI 48071		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Associate Broker</u> Employer <u>Century 21 Campbell Realty, Inc.</u> Business Address <u>1186 E 12 Mile Rd., Madison Heights, MI 48071</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$2,000.00

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Robert Didia</u> <u>49698 Keycove Ct.</u> <u>Chesterfield, MI 48047</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Electrician</u> Employer <u>Spectron Electric</u> Business Address <u>31400 Kendall #A, Fraser, MI 48026</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Techquine Investments, LLC</u> <u>16105 Clinton Ave.</u> <u>Macomb, MI 48042</u> 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>	\$ <u>500.00</u>
		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Timothy Bugay</u> <u>23224 Recreation St.</u> <u>Saint Clair Shores, MI 48082</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Heavy Truck Mechanic</u> Employer <u>Knights Transport</u> Business Address <u>414 E. Hudson, Royal Oak, MI 48267</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>1000.00</u>
		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Jean Ann Bugajewski</u> <u>16982 Stewart Ct.</u> <u>Clinton Twp., MI 48038</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Leonards Syrups</u> Business Address <u>4601 Nancy, Detroit, MI 48212</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>700.00</u>
		Click Here for Memo Itemization	

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Diana Magnoli</u> <u>6402 Baypoint Dr.</u> <u>Washington, MI 48094</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>Housewife</u> Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>1000.00</u>	\$ <u>1000.00</u>
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Laith Hanna</u> <u>180 Pierce St. Unit 3</u> <u>Birmingham, MI 48009</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Motor City Petroleum</u> Business Address <u>15275 Hall Rd. Macomb, MI 48044</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>1550.00</u>
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Julius Dallo</u> <u>10469 Excalibur Dr.</u> <u>Shelby Twp., MI 48315</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</u> Employer <u>All in One Insurance Agency</u> Business Address <u>49136 Van Dyke, Shelby Twp., MI 48317</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Athir Ammori</u> <u>248 East Gunn Rd.</u> <u>Oakland Twp., MI 48306</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate Agent</u> Employer <u>Self Employed</u> Business Address <u>248 East Gunn Rd., Oakland Twp., MI 48306</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Anthony Penna</u> <u>37351 Willow Ln</u> <u>Clinton Twp., MI 48036</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Moor, Penna & Associates</u> Business Address <u>13597 Plumbrooke, Sterling Heights, MI 48312</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Dyrid Hana</u> <u>1948 Hutchins Dr.</u> <u>Rochester Hills, MI 48309</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u> Employer <u>Adar Market</u> Business Address <u>3505 Palms Rd. Casco Twp., MI 48064</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Cy Abdo</u> <u>42550 Garfield Rd. Ste 104A</u> <u>Clinton Twp., MI 48038</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Abdo Law Firm</u> Business Address <u>42550 Garfield Rd. Ste. 104A, Clinton Twp., MI 48038</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Melad J Joseph Jr. TTEE</u> <u>22556 Gratiot Ave</u> <u>Eastpointe, MI 48021</u> 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>	\$ <u>500.00</u>
		Click Here for Memo Itemization	

Page Subtotal **\$2,000.00**

Grand Total of All Schedules 1A
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line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663

2. Committee Name CTE Anthony Wickersham

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Oras Zuhair</u> <u>4131 April Ln.</u> <u>Sterling Heights, MI 48310</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Dream Market</u> Business Address <u>3843 15 Mile Rd. Sterling Heights, MI 48310</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>1000.00</u>	\$ <u>1000.00</u>
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Eileen Proudlock</u> <u>826 University Pl.</u> <u>Grosse Pointe, MI 48230</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Consulting</u> Employer <u>Self Employed</u> Business Address <u>826 University Pl. Grosse Pointe, MI 48230</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>1000.00</u>	\$ <u>1000.00</u>
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Daniel Salmo</u> <u>4201 Reflections Dr.</u> <u>Sterling Heights, MI 48314</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate</u> Employer <u>Remax Real Estate</u> Business Address <u>50 West Big Beaver #120, Troy, MI 4804</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Deno Bistolarides</u> <u>1221 Lycns Ave</u> <u>Royal Oak, MI 48073</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Partner</u> Employer <u>Encore Real Estate Investment</u> Business Address <u>30500 Northwest Highway, Farmington Hills, MI 48334</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>

Page Subtotal \$3,000.00

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



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663
2. Committee Name CTE Anthony Wickersham

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: Jeremy Stradley 331 N. Nine Mile Rd. Hazel Park, MI 48030 5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</u> Employer <u>EMS Tether</u> Business Address <u>331 N. Nine Mile Rd., Hazel Park, MI 48030</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: M.T.P.I. PLLC 32059 Utica Rd. Fraser, MI 48026 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>1000.00</u>	\$ <u>1000.00</u>
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: Mansour Oram 3294 Wards Point Dr. Orchard Lake, MI 48324 5. If over \$100.00 cumulative, please provide: Occupation <u>Director of Business Development</u> Employer <u>International Outdoor LLC</u> Business Address <u>28423 Orchard Lake Rd. Ste 200, Farmington Hills, MI 48336</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: Ray Confer 2200 E. Ten Mile Rd. Warren, MI 48091 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>C&J Parking Lot Sweeping, Inc</u> Business Address <u>2200 E. Ten Mile Rd. Warren, MI 48091</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>

Page Subtotal \$2,500.00

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

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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663

2. Committee Name CTE Anthony Wickersham

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Marvin Kiezi</u> <u>888 W. Big Beaver</u> <u>Troy, MI 48084</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Entrepreneur</u> Employer <u>Kiez Group LLC</u> <u>888 W. Big Beaver, Troy, MI 48084</u> Business Address Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>1000.00</u>	\$ <u>1000.00</u>
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>John Johnson</u> <u>58337 Thomas Street</u> <u>New Haven, MI 48048</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>Gratiot Avenue Business Association</u> <u>3956 Mt. Elliott, Detroit, MI 48207</u> Business Address Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>1000.00</u>	\$ <u>1000.00</u>
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>UAW Michigan V-PAC</u> <u>8000 E. Jefferson</u> <u>Detroit, MI 48214</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>5000.00</u>	\$ <u>5000.00</u>
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Jodine Switalski</u> <u>27717 Cameron Ct.</u> <u>Harrison Twp., MI 48045</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>40 Macomb Place St. 201</u> <u>Mt. Clemens, MI 48043</u> Business Address Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>

Page Subtotal \$7,500.00

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

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663
2. Committee Name CTE Anthony Wickersham

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>David Griem</u> <u>14 First Street</u> <u>Mt. Clemens, MI 48043</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Self-Employed</u> Click Here for Memo Itemization Business Address <u>14 First Street Mt. Clemens MI 48043</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>2000.00</u>	\$ <u>2000.00</u>
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>Canue Torrice Law, PLLC</u> <u>32059 Utica Rd</u> <u>Fraser, MI 48026</u> 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>	\$ <u>500.00</u>
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>HGS Walled Lake LLC</u> <u>690 N Pontiac Trail</u> <u>Walled Lake, MI 48390</u> 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>	\$ <u>500.00</u>
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: <u>S M A C PAC</u> <u>3221 W. Big Beaver Ste. 305</u> <u>Troy, MI 48084</u> 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>	\$ <u>500.00</u>

Page Subtotal \$3,500.00

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663

2. Committee Name CTE Anthony Wickersham

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: Mark Switalski 40 N. Main Mt. Clemens, MI 48043 5. If over \$100.00 cumulative, please provide: Occupation <u>Judge</u> Employer <u>Macomb County Government</u> Business Address <u>40 N. Main, Mt. Clemens, MI 48043</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: Wayne Webber 44710 Morley Drive Clinton Twp, MI 48036 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Webber Group</u> Business Address <u>44710 Morley Drive, Clinton Twp, MI 48036</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>1000.00</u>	\$ <u>1000.00</u>
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: Tom Lauzon 28740 Jefferson Ave St. Clair Shores, MI 48081 5. If over \$100.00 cumulative, please provide: Occupation <u>Executive Director</u> Employer <u>LivWell Enlightened Health</u> Business Address <u>28740 Jefferson Ave, St. Clair Shores, MI 48081</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/20/20</u> Name & Address: Joseph Burke 61267 Crown Pointe MI Washington, MI 48094 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Burke Mechanical</u> Business Address <u>12310 24 Mile Rd., Shelby Twp., MI 48315</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>800.00</u>

Page Subtotal \$2,500.00

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



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663

2. Committee Name CTE Anthony Wickersham

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/23/20</u>	
Name & Address: <u>Raymond DeBuck</u> <u>67587 Hidden Oak Lane</u> <u>Washington, MI 48095</u>		\$ <u>200.00</u>	\$ <u>475.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Cement Construction</u> Employer <u>DeBuck Construction</u> Business Address <u>6226 Auburn Rd. Utica, MI 48317</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>10/29/20</u>	
Name & Address: <u>Gregory Buss</u> <u>12900 Hall Rd. Ste 322</u> <u>Sterling Heights, MI 48313</u>		\$ <u>100.00</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 # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/20/20</u>	
Name & Address: <u>James Galloway</u> <u>61624 Bunker Hill</u> <u>Washington, MI 48094</u>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Jets Pizza</u> Business Address <u>37501 mound Sterling Heights mi 48310</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>10/21/20</u>	
Name & Address: <u>Quirino D'Alessandro</u> <u>28117 Groesbeck Hwy</u> <u>Roseville, MI 48066</u>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Lanzo Construction</u> Business Address <u>28135 Groesbeck Hwy, Roseville, MI 48066</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$1,300.00

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663
2. Committee Name CTE Anthony Wickersham

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>10/16/20</u>	
Name & Address: <u>Richard Sable</u> <u>3515 Vineyard Hill</u> <u>Rochester, MI 48306</u>		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Sable Law Firm</u> Business Address <u>48723 Hayes Rd. Shelby Twp., MI 48315</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>10/24/20</u>	
Name & Address: <u>Francis Marella</u> <u>35979 Carlisle St.</u> <u>Clinton Twp., MI 48035</u>		\$ <u>100.00</u>	\$ <u>200.00</u>
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		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt _____	
Name & Address: _____ _____ _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt _____	
Name & Address: _____ _____ _____		\$ _____	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$600.00

Grand Total of All Schedules 1A
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\$35,250.00

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line 3a of Summary
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ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number **138663**

CANDIDATE COMMITTEE

2. Committee Name **CTE Anthony Wickersham**

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report all in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: Gus Ghanim 31068 Margaret Ct. Warren, MI 48093 If over \$100.00 cumulative, please provide: Occupation: Public Service Director Employer Name & Business Address: City of Warren 1 City Square Warren, MI 48093 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☒ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description Food, drinks and cigars 5. Date Of Receipt: 10/20/20 6. Vendor Name & Address: Jenuiwine Cigar Lounge 44791 Schoenherr Rd. Sterling Heights, MI 48313 Click Here for Memo Itemization	\$ 1300.00	\$ 1600.00
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: Stavros Toma 47677 Milonas Rd. Shelby, MI 48315 If over \$100.00 cumulative, please provide: Occupation: Owner Employer Name & Address: T16 Holdings 19500 Hall Rd. Clinton Twp., MI 48038 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☒ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description Food, drinks and cigars 5. Date Of Receipt: 10/20/20 6. Vendor Name & Address: Jenuiwine Cigar Lounge 44791 Schoenherr Rd. Sterling Heights, MI 48313 Click Here for Memo Itemization	\$ 900.00	\$ 3600.00
Contribution #3 PAC Receipt? ☐ Yes Name & Address: Laith Hanna 180 Pierce St. Unit 3 Birmingham, MI 48009 If over \$100.00 cumulative, please provide: Occupation: Owner Employer Name & Address: Motor City Petroleum 15275 Hall Rd. Macomb, MI 48044 ☐ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☒ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description Food, drinks and cigars 5. Date Of Receipt: 10/20/20 6. Vendor Name & Address: Jenuiwine Cigar Lounge 44791 Schoenherr Rd. Sterling Heights, MI 48313 Click Here for Memo Itemization	\$ 900.00	\$ 1550.00

Page Subtotal **\$3,100.00** **\$6,750.00**

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) **\$3,100.00**

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**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 138663
2. Committee Name CTE Anthony Wickersham

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Postmaster Address 711 N. Glenwood Ave Pontiac, mi 48340 ☐ Fund Raiser	Purpose: <u>Postage of prints</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/20/20</u> Date	\$ <u>13224.28</u>
Expenditure #2 Name ABC Mailing Services Address 1725 E 14 Mile Rd, Ste. 120 Troy, MI 48083 ☐ Fund Raiser	Purpose: <u>Mailing of prints</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/20/20</u> Date	\$ <u>2160.00</u>
Expenditure #3 Name American Graphics Address 34895 Groesbeck Hwy Clinton Twp, MI 48035 ☐ Fund Raiser	Purpose: <u>Printing of Mailier</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/21/20</u> Date	\$ <u>6473.16</u>
Expenditure #4 Name Postmaster Address 711 N. Glenwood Ave. Pontiac, mi 48340 ☐ Fund Raiser	Purpose: <u>Postage of Prints</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/22/20</u> Date	\$ <u>23290.50</u>
Expenditure #5 Name ABC Mailing Services Address 1725 E 14 Mile Rd. , Ste 120 Troy, MI 48083 ☐ Fund Raiser	Purpose: <u>Mailing of print</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/22/20</u> Date	\$ <u>2881.00</u>

Subtotal this page **\$48,028.94**

Grand Total of all Schedules 1B
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**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 138663
2. Committee Name CTE Anthony Wickersham

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name American Graphics Address 34895 Groesbeck Hwy Clinton Twp., MI 48035 ☐ Fund Raiser	Purpose: <u>Printing of mailer</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/23/20</u> Date	\$ <u>7767.68</u>
Expenditure #2 Name Bumpers Landing Address 31970 N. River Rd. Harrison Twp., MI 48045 ☐ Fund Raiser	Purpose: <u>Victory Party</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/03/20</u> Date	\$ <u>1201.00</u>
Expenditure #3 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
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 **\$8,968.68**

Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$56,997.62**

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Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**INCIDENTAL OFFICE EXPENSE
DISBURSEMENTS
SCHEDULE 1C
CANDIDATE COMMITTEE**
(For use by officeholders only)

1. Committee I. D. Number 138663
2. Committee Name CTE Anthony Wickersham

3. Name and address of person to whom disbursement was made	4. Description of Disbursement (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address: Central Macomb Optimist Club 16515 Festian Clinton Twp., MI 48035	Purpose <u>Yearly Dues</u>	<u>10/20/20</u> Date	<u>\$ 108.00</u>
☐ Check box if this disbursement is payment of debt or obligation reported on previous statement			
Disbursement Code <u>BO</u> ☐ Fund Raiser			
Disbursement # 2 Name & Address: Leukemia & Lymphoma Society 1471 E 12 Mile Rd. Madison Heights, MI 48071	Purpose <u>Donation</u>	<u>10/20/20</u> Date	<u>\$ 200.00</u>
☐ Check box if this disbursement is payment of debt or obligation reported on previous statement			
Disbursement Code <u>GO</u> ☒ Fund Raiser			
Disbursement # 3 Name & Address: C & G Newspapers 13650 11 Mile Rd Warren, MI 48089	Purpose <u>Ad</u>	<u>10/20/20</u> Date	<u>\$ 3,033.01</u>
☐ Check box if this disbursement is payment of debt or obligation reported on previous statement			
Disbursement Code <u>KO</u> ☐ Fund Raiser			
Disbursement # 4 Name & Address: City of Mt. Clemens One Crocker Blvd. Mt. Clemens, MI 48043	Purpose <u>Tinsel Tour</u>	<u>10/28/20</u> Date	<u>\$ 75.00</u>
☐ Check box if this disbursement is payment of debt or obligation reported on previous statement			
Disbursement Code <u>GO/KO</u> ☒ Fund Raiser			
Subtotal this page			\$3,416.01
Grand Total of all Schedules 1C (Complete on last page of Schedule)			

Enter this total
on line 10a of
Summary Page

*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**INCIDENTAL OFFICE EXPENSE
DISBURSEMENTS
SCHEDULE 1C
CANDIDATE COMMITTEE**
(For use by officeholders only)

1. Committee I. D. Number 138663
2. Committee Name CTE Anthony Wickersham

3. Name and address of person to whom disbursement was made	4. Description of Disbursement (Be specific & you may assign a disbursement code*)	5. Date	6. Amount of Disbursement
Disbursement # 1 Name & Address: C & G Newspapers 13650 11 Mile Rd Warren, MI 48089	Purpose <u>Ad</u>	<u>10/29/20</u> Date	<u>\$ 1,817.51</u>
Click for Memo Itemization Type			
☐ Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code <u>KO</u>	☐ Fund Raiser	
Disbursement # 2 Name & Address:	Purpose _____	_____ \$ _____ Date	
Click for Memo Itemization Type			
☐ Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code _____	☐ Fund Raiser	
Disbursement # 3 Name & Address:	Purpose _____	_____ \$ _____ Date	
Click for Memo Itemization Type			
☐ Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code _____	☐ Fund Raiser	
Disbursement # 4 Name & Address:	Purpose _____	_____ \$ _____ Date	
Click for Memo Itemization Type			
☐ Check box if this disbursement is payment of debt or obligation reported on previous statement	Disbursement Code _____	☐ Fund Raiser	
Subtotal this page			\$1,817.51
Grand Total of all Schedules 1C (Complete on last page of Schedule)			\$5,233.52

Enter this total
on line 10a of
Summary Page

*PLEASE REFER TO INSTRUCTIONS FOR LIST OF DISBURSEMENT CODES

Note: No campaign expenditures are to be reported on this schedule; Incidental Office Expense Disbursements ONLY



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138663
2. Committee Name CTE Anthony Wickersham

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>10/20/20</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>45</u>	5. Type of Fund Raising Activity <u>Cigar Fundraiser</u>	6. Address and Name (If any) of the place where the activity was held. ☐ Private Residence
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7. Total Contributions \$33,350.00
8. Other Receipts \$0.00
9. Gross Receipts (Add lines 7 and 8) \$33,350.00
10. Total Cost of Event \$3,100.00
(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.