

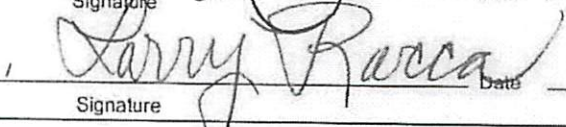


MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**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.

1. Committee I.D. Number 139353		3. This Statement covers From: <u>08/25/20</u> to <u>10/18/20</u>	
2. Committee Name CTE Larry Rocca		4. Candidate Last Name Rocca First Name Larry M.I. 4a. Office Sought Including District # or Community Served (If applicable) Treasurer - Macomb County 4b. County of Residence MACOMB	
5. Committee's Mailing Address 38299 Moravian Clinton Township, MI 48036 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 Kurt Broadbridge 45619 Thorn Tree Lane Macomb, MI 48044 Area Code & Phone (248) 854-1019	
7. Treasurer's Business Address 45619 Thorn Tree Lane Macomb, MI 48044 Area Code and Phone (586) 330-9829		8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) n/a 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 <u>11/03/20</u>		Required ONLY if candidate is not on the ballot for the current year: ☐ July Quarterly ☐ October Quarterly 9c. ☐ Annual Statement () Coverage Year 9d. ☐ Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.) 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 Kurt Broadbridge Type or Print Name		Signature  Date 10/21/2020	
Candidate Larry Rocca Type or Print Name		Signature  Date 10/21/2020	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 139353

2. Committee Name CTE Larry Rocca

**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>21,950.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>21,950.00</u>	(18.) \$ <u>\$142,885.00</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>21,950.00</u>	(20.) \$ <u>\$142,885.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$2,260.00</u>	(21.) \$ <u>\$6,519.06</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>\$99,341.66</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>\$0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>\$0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>\$99,341.66</u>	(23.) \$ <u>\$133,565.24</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>\$0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>\$0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>\$0.00</u>	(24.) \$ <u>\$0.00</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$36,000.00</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>\$86,784.84</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>21,950.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$108,734.84</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$99,341.66</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$9,393.18</u>	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139353

2. Committee Name CTE Larry Rocca

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/25/20</u> Name & Address: Nicholas Bachand 1565 Fairholme Road Grosse Pointe Woods, MI 48326		\$ <u>250.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Nicholas Bachand</u> Business Address <u>2411 Vinewood, Detroit, MI 48216</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/25/20</u> Name & Address: Rick Warren 2872 Sunset Circle Metamora, MI 48455		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Insurance Sales</u> Employer <u>Rick Warren</u> Business Address <u>2872 Sunset Circle, Metamora, MI 48455</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/26/20</u> Name & Address: Michael Smith 15 Woodland Shores Grosse Pointe Shores, MI 48236		\$ <u>250.00</u>	\$ <u>750.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate</u> Employer <u>5 Star Investment & Realty LLC</u> Business Address <u>100 Maple Park Blvd., Suite 124, St. Clair Shores, MI 48080</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/27/20</u> Name & Address: Floyd Wickman 1301 West Long Lake Road, Suite 200 Troy, MI 48098		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Founder</u> Employer <u>FWS Company</u> Business Address <u>1301 West Long Lake Road, Troy, MI 48098</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$1,000.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 139353

2. Committee Name CTE Larry Rocca

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/27/20</u>	
Name & Address: Rick Tabbi 3780 Heavenly Lane Warren, MI 48092		\$ <u>250.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Associate</u> Employer <u>Friedman Integrated Real Estate Solution</u> Business Address <u>34975 West 12 Mile Road, Farmington Hills, MI 48331</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/27/20</u>	
Name & Address: John Axe 481 Kercheval Avenue Grosse Pointe Farms, MI 48236		\$ <u>500.00</u>	\$ <u>1,150</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Partner</u> Employer <u>Clark Hill</u> Business Address <u>500 Woodward Avenue, Suite 3500, Detroit, MI 48226</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/27/20</u>	
Name & Address: Stephen Saph, Jr. 68 Clinton Street Mt. Clemens, MI 48043		\$ <u>500.00</u>	\$ <u>600.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Insurance Agent</u> Employer <u>Nicekl & Saph, Inc.</u> Business Address <u>44 Macomb Place, Mt. Clemens, MI 48046</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/27/20</u>	
Name & Address: Paul Chirco 3045 Harrow Way Shelby Township, MI 48316		\$ <u>500.00</u>	\$ <u>1200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Title Insurance</u> Employer <u>Chirco Title</u> Business Address <u>26800 Harper Avenue, St. Clair Shores, MI 48081</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$1,750.00

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

1. Committee I.D. Number 139353

2. Committee Name CTE Larry Rocca

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/28/20</u> Name & Address: Brooke Fisher 2932 Crooks Road Royal Oak, MI 48073		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Regional Account Manager</u> Employer <u>Toshiba Business Solutions</u> Business Address <u>29100 Northwestern Hwy, Suite 300, Southfield, MI 48034</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/28/20</u> Name & Address: Tom Wiesz 511 Henley Street Birmingham, MI 48009		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>Tom Wiesz</u> Business Address <u>511 Henley Street, Birmingham, MI 48009</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/29/20</u> Name & Address: Frank Coppola 54620 Carnation Drive Macomb, MI 48042		\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CPA</u> Employer <u>Frank Coppola, CPA PC</u> Business Address <u>15985 Canal Road, Clinton Township, 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>08/30/20</u> Name & Address: Vincent Sorrentino 14113 Hibiscus Shelby Township, MI 48315		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate Developer</u> Employer <u>ICON Development</u> Business Address <u>16301 19 Mile Road, Clinton Township, MI 48038</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$1,150.00

Grand Total of All Schedules 1A
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 139353

2. Committee Name CTE Larry Rocca

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3. Contribution #1	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/31/20</u>	
Name & Address: Roy Rose 55620 Woodridge Drive Shelby Township, MI 48316		\$ <u>150.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/25/20</u>	
Name & Address: Paul Cassidy 4685 Green Drive Harsens Island, MI 48028		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Paul Cassidy Attorney at Law</u> Business Address <u>51150 Washington, New Baltimore, MI 48047</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? ☐ YES	4. Date of Receipt <u>08/25/20</u>	
Name & Address: CTE Jack Brandenburg for St Senate 26 Eldredge Street Mt. Clemens, MI 48043		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer <u>n/a</u> Business Address <u>n/a</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>09/01/20</u>	
Name & Address: Patrick Simasko 319 Northbound Gratiot Avenue Mt. Clemens, MI 48043		\$ <u>500.00</u>	\$ <u>650.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Simasko Law</u> Business Address <u>319 Northbound Gratiot Avenue, Mt. Clemens, MI 48043</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

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Grand Total of All Schedules 1A
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3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/25/20</u> Name & Address: John Brandenburg 37596 Huron Pointe Drive Harrison Township, MI 48045		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/24/20</u> Name & Address: Sheila Raybin 16207 Monticello Drive Clinton Township, MI 48038		\$ <u>250.00</u>	\$ <u>850.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Software Tester</u> Employer <u>General Motors</u> Business Address <u>30001 Van Dyke Avenue, Warren, MI 48091</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/31/20</u> Name & Address: Roger Lonsway 41800 Prunum Drive Sterling Heights, MI 48314		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</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>09/04/20</u> Name & Address: Tom Sokol 20331 Vine Drive Macomb, MI 48044		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Agency Owner</u> Employer <u>Tom Sokol Agency</u> Business Address <u>20371 Hall Road, Macomb, MI 48044</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$650.00**

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
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2. Committee Name CTE Larry Rocca

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/04/20</u> Name & Address: Dolores Fratarcangeli 20524 Villa Grande Circle Clinton Township, MI 48038		\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</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>09/07/20</u> Name & Address: Albert Hakim 20400 South Nunneley Road Clinton Township, MI 48035		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Caterer</u> Employer <u>Premier Events Center</u> Business Address <u>20400 South Nunneley, Clinton Township, MI 48035</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>09/08/20</u> Name & Address: Ron Polak 37599 Casa Bella Court Clinton Township, MI 48036		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Vice President</u> Employer <u>Toshiba Business Solutions</u> Business Address <u>29100 Northwestern Hwy, Suite 300, Southfield, MI 48034</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>09/09/20</u> Name & Address: Aldo Grossi 13011 Towering Oaks Drive Shelby Township, MI 48315		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$850.00**

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/09/20</u> Name & Address: John Paniccia 3264 Island Cover Drive Waterford Twp, MI 48328		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</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>09/10/20</u> Name & Address: John Russi 41696 Alden Drive Clinton Township, MI 48038		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Moore, Penna & Associates</u> Business Address <u>38600 Van Dyke, Suite 300, Sterling Heights, MI 48312</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>09/10/20</u> Name & Address: David VanAssche 155 Potomac Passage OxonHill, MD 20745		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Developer</u> Employer <u>David VanAssche</u> Business Address <u>45711 Pentwater Drive, Macomb, MI 48044</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>09/10/20</u> Name & Address: Robert Little 14625 Shirley Avenue Warren, MI 48089		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$800.00**

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/10/20</u> Name & Address: George Adams 3360 26 Mile Road Shelby Township, MI 48316		\$ <u>100.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</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>09/10/20</u> Name & Address: Dale McDonald 50884 Redwood Chesterfield, MI 48047		\$ <u>100.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>South River Investments, LLC</u> Business Address <u>155 Shoreview Drive, Chelsea, MI 48118</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>09/10/20</u> Name & Address: Wayne Babbish 121 Belleview Mt. Clemens, MI 48043		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</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>09/10/20</u> Name & Address: Charles Ferguson 50147 Foxcrest Street Chesterfield, MI 48047		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$550.00

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

1. Committee I.D. Number 139353
2. Committee Name CTE Larry Rocca

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/10/20</u> Name & Address: Louis Desanctis 8323 Oak Tree Lane Warren, MI 48093		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</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>09/10/20</u> Name & Address: Sheila Raybin 16207 Monticello Drive Clinton Township, MI 48038		\$ <u>200.00</u>	\$ <u>1100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Software Tester</u> Employer <u>General Motors</u> Business Address <u>30001 Van Dyke Avenue, Warren, MI 48091</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>09/10/20</u> Name & Address: Daniel Coakley 49660 Ellis Court Shelby Township, MI 48315		\$ <u>100.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</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>09/10/20</u> Name & Address: Thomas Bommarito 48049 James Drive Shelby Twp, MI 48317		\$ <u>200.00</u>	\$ <u>450.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Economic Director</u> Employer <u>City of Warren</u> Business Address <u>1 City Square, Suite 215, Warren, MI 48093</u> 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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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 139353

2. Committee Name CTE Larry Rocca

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/10/20</u>	
Name & Address: Larry Campbell 6690 Vemmoor Drive Troy, MI 48098		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Associate Broker</u> Employer <u>Century 21 - Campbell Realty</u> Business Address <u>1186 East 12 Mile Road, Madison Heights, MI 48071</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>09/10/20</u>	
Name & Address: Marilyn McCormack 1180 Bear Creek Court Rochester, MI 48305		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Hair Dresser</u> Employer <u>Susan's of Rochester</u> Business Address <u>4483 Collins Road, Rochester, MI 48306</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>09/10/20</u>	
Name & Address: Anthony Joseph 45574 Private Shores Drive Chesterfield, MI 48047		\$ <u>1000.00</u>	\$ <u>1000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>President & CEO</u> Employer <u>GLR Solutions</u> Business Address <u>31475 Utica Road, Fraser, MI 48026</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>09/10/20</u>	
Name & Address: Larry Garrisi 52103 Pawnee Drive Macomb, MI 48042		\$ <u>300.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$1,750.00

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

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 139353

2. Committee Name CTE Larry Rocca

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/10/20</u>	
Name & Address: Vito Pianello 14286 Boumemuth Drive Shelby Township, MI 48315		\$ <u>100.00</u>	\$ <u>350.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Vice President</u> Employer <u>First State Bank</u> Business Address <u>PO Box 305, Eastpointe, MI 48021</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>09/10/20</u>	
Name & Address: Susan Kenney 50744 Ryan Road Shelby Township, MI 48315		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Susan's of Rochester</u> Business Address <u>4483 Collins Road, Rochester, MI 48306</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>09/10/20</u>	
Name & Address: Raymond Nadolski 3274 Alderdaie Drive Sterling Heights, MI 48310		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate Agent</u> Employer <u>Re/Max</u> Business Address <u>43599 Schoenherr, Sterling Heights, MI 48313</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>09/10/20</u>	
Name & Address: Frank Brasza 565 Shortridge Avenue Rochester Hills, MI 48307		\$ <u>100.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$400.00

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

CANDIDATE COMMITTEE

1. Committee I.D. Number 139353

2. Committee Name CTE Larry Rocca

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/10/20</u> Name & Address: Joseph Mangano 45860 Private Shore Drive Chesterfield, MI 48047		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</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>09/10/20</u> Name & Address: Joseph Militello 20915 St. Gertrude Street St. Clair Shores, MI 48081		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</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>09/10/20</u> Name & Address: Anthony Miri 1421 Heights Road Lake Orion, MI 48362		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</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>09/10/20</u> Name & Address: Mark Forton 48143 Mallard Drive Chesterfield, MI 48047		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$400.00**

Grand Total of All Schedules 1A
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 139353

2. Committee Name CTE Larry Rocca

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/10/20</u> Name & Address: Augeen Kalasho 42697 Pond View Drive Sterling Heights, MI 48314		\$ <u>200.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</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>09/10/20</u> Name & Address: Laith Hanna 1161 Pembroke Drive Bloomfield Hills, MI 48304		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Consultant</u> Employer <u>Self Employed - Laith Hanna</u> Business Address <u>1161 Pembroke Drive, Bloomfield Hills, MI 48304</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>09/10/20</u> Name & Address: Michael Schodowski 29275 Stephenson Hwy Madison Heights, MI 48071		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Shelving.com</u> Business Address <u>29275 Stephenson Hwy, Madison Heights, MI 48071</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>09/10/20</u> Name & Address: Michael Carluccio 11434 Racine Road Warren, MI 48093		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Michael Carluccio Productions</u> Business Address <u>34841 Mound Road, Sterling Heights, MI 48310</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$1,200.00

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

1. Committee I.D. Number 139353

2. Committee Name CTE Larry Rocca

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/10/20</u> Name & Address: David Campoli 21048 Proust Court Macomb, MI 48044		\$ <u>200.00</u>	\$ <u>350.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</u> Employer <u>Chirco Title</u> Business Address <u>26800 Harper Avenue, St. Clair Shores, MI 48081</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>09/10/20</u> Name & Address: Mark Derkovitz 739 Central Drive Lake Orion, MI 48362		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Esquire Management</u> Business Address <u>739 Central Drive, Lake Orion, MI 48362</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>09/10/20</u> Name & Address: Christina Miller 52012 Copper Creek Court Chesterfield, MI 48312		\$ <u>100.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Investment Officer</u> Employer <u>Macomb County</u> Business Address <u>1 South Main Street, Mt. Clemens, MI 48043</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>09/10/20</u> Name & Address: Bob Kirk 37539 Hidden Valley Court Clinton Township, MI 48036		\$ <u>250.00</u>	\$ <u>2050.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Kirk, Huth, Lange & Badalamenti</u> Business Address <u>19500 Hall Road, Clinton Township, MI 48038</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$ 650.00

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

1. Committee I.D. Number 139353

2. Committee Name CTE Larry Rocca

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/10/20</u> Name & Address: Rob Huth 2486 Hawthorne Drive Shelby Township, MI 48316		\$ <u>250.00</u>	\$ <u>2050.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Kirk, Huth, Lange & Badalamenti</u> Business Address <u>19500 Hall Road, Clinton Township, MI 48038</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>09/10/20</u> Name & Address: Rachel Badalamenti 52792 Sable Court Shelby Township, MI 48315		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Kirk, Huth, Lange & Badalamenti</u> Business Address <u>19500 Hall Road, Clinton Township, MI 48038</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>09/10/20</u> Name & Address: Peter Fuciarelli 27801 Sylvan Warren, MI 48093		\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate Agent</u> Employer <u>Peter Fuciarelli Agency</u> Business Address <u>27801 Sylvan, Warren, MI 48093</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>09/09/20</u> Name & Address: Robert Boccomino 27882 Los Olas Warren, MI 48093		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$750.00**

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

1. Committee I.D. Number 139353

2. Committee Name CTE Larry Rocca

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3. Contribution # 1	PAC Receipt? ☒ YES	4. Date of Receipt <u>09/10/20</u>	
Name & Address: Stan Grot for Michigan Republicans 11927 Hiawatha Drive Shelby Township, MI 48315		\$ <u>200.00</u>	\$ <u>800.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer <u>n/a</u> Business Address <u>n/a</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>09/10/20</u>	
Name & Address: Giuseppe Biondo 16273 Kingsway Drive Macomb, MI 48044		\$ <u>500.00</u>	\$ <u>2533.88</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Chief Deputy Treasurer</u> Employer <u>Macomb County</u> Business Address <u>1 South Main Street, Mt. Clemens, MI 48043</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>09/11/20</u>	
Name & Address: Charles Shaw 16950 Ninteen Mile Road Clinton Township, MI 48038		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Charles Shaw Law Offices</u> Business Address <u>16950 Ninteen Mile Road, Clinton Township, 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>09/11/20</u>	
Name & Address: Richard Rocca 4389 West Cedar Lake Road Greenbush, MI 48738		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$1,200.00**

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

CANDIDATE COMMITTEE

1. Committee I.D. Number 139353

2. Committee Name CTE Larry Rocca

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3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/11/20</u> Name & Address: Maureen Alexandrowicz 43159 Hartwick Sterling Heights, MI 48313	\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Click Here for Memo Itemization Business Address <u>n/a</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/18/20</u> Name & Address: Mark Zuccaro 600 East Snell Road Rochester, MI 48306	\$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Caterer</u> Employer <u>Zuccaro's Banquets</u> Click Here for Memo Itemization Business Address <u>46601 Gratiot Avenue, Chesterfield, MI 48051</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/23/20</u> Name & Address: Macomb GOP PO Box 380962 Clinton Township, MI 48044	\$ <u>1000.00</u>	\$ <u>6000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/23/20</u> Name & Address: Cecil St. Pierre 32595 Sabrina Court Warren, MI 48093	\$ <u>250.00</u>	\$ <u>350.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Boyer, St. Pierre & Aull</u> Click Here for Memo Itemization Business Address <u>43805 Van Dyke Avenue, Sterling Heights, MI 48314</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		

Page Subtotal \$1,500.00

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

1. Committee I.D. Number 139353

2. Committee Name CTE Larry Rocca

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/30/20</u> Name & Address: Valerio Poliuto 40355 Emerald Lane East Clinton Township, MI 48038		\$ <u>100.00</u>	\$ <u>1050.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Agent</u> Employer <u>Financial Security Corporation</u> Business Address <u>39085 Moravian Drive, Clinton Township, MI 48036</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>09/30/20</u> Name & Address: Steve Remias 52503 Royal Forest Drive Shelby Township, MI 48315		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer <u>n/a</u> Business Address <u>n/a</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>10/03/20</u> Name & Address: Angelo Grillo 50775 Richard West Blvd Chesterfield, MI 48047		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Grillo Management Associates</u> Business Address <u>50775 Richard West Blvd, Chesterfield, MI 48047</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>10/06/20</u> Name & Address: Joseph Garofalo 16655 Millar Road Clinton Township, MI 48036		\$ <u>500.00</u>	\$ <u>700.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$1,200.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A**

CANDIDATE COMMITTEE

1. Committee I.D. Number 139353

2. Committee Name CTE Larry Rocca

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>10/06/20</u> Name & Address: Kimberly Broadbridge 45619 Thorn Tree Lane Macomb, MI 48044		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer <u>n/a</u> Business Address <u>n/a</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>10/06/20</u> Name & Address: Pashko Ujkic 38346 Phyllis Court Sterling Heights, MI 48212		\$ <u>300.00</u>	\$ <u>550.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Self Employed</u> Employer <u>Pashko Ujkic</u> Business Address <u>38346 Phyllis Court, Sterling Heights, MI 48212</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>10/06/20</u> Name & Address: John Axe 481 Kercheval Avenue Grosse Pointe Farms, MI 48236		\$ <u>350.00</u>	\$ <u>1150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Partner</u> Employer <u>Clark Hill</u> Business Address <u>500 Woodward Avenue, Suite 3500, Detroit, MI 48226</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>10/06/20</u> Name & Address: Clark Hill PAC 500 Woodward Avenue, Suite 3500 Detroit, MI 48226		\$ <u>250.00</u>	\$ <u>1300.0</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$1,000.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139353

2. Committee Name CTE Larry Rocca

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>10/06/20</u>	
Name & Address: Phil Rode 36097 Actor Clinton Township, MI 48035		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer <u>n/a</u> Business Address <u>n/a</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>10/06/20</u>	
Name & Address: Claudia Passalacqua 494 Coventry Lane Grosse Pointe Woods, MI 48236		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer <u>n/a</u> Business Address <u>n/a</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>10/06/20</u>	
Name & Address: Michael Garvonic 46830 Gadwall Macomb Township, MI 48044		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer <u>n/a</u> Business Address <u>n/a</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>10/06/20</u>	
Name & Address: Willard Hadley 22450 Alexander Street St. Clair Shores, MI 48081		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Realtor</u> Employer <u>Hadley Real Estate Agency</u> Business Address <u>22100 Harper Avenue, St. Clair Shores, MI 48080</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$750.00**

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

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 139353

2. Committee Name CTE Larry Rocca

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/08/20</u> Name & Address: <u>Andrzej Zaczek</u> <u>11148 Glennis Drive</u> <u>Sterling Heights, MI 48312</u>		\$ <u>100.00</u>	\$ <u>700.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</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>10/06/20</u> Name & Address: <u>Gregory Iacobelli</u> <u>53639 Christy Drive</u> <u>Chesterfield, MI 48047</u>		\$ <u>500.00</u>	\$ <u>1700.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Builder</u> Employer <u>Concorde Construction</u> Business Address <u>51435 Industrial Drive, Macomb MI 48044</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>10/02/20</u> Name & Address: <u>Sandra Dudis</u> <u>38299 Moravian Drive</u> <u>Clinton Township, MI 48036</u>		\$ <u>1000.00</u>	\$ <u>1000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>Retired</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>09/30/20</u> Name & Address: <u>Macomb County Republican Party</u> <u>PO Box 380962</u> <u>Clinton Township, MI 48038</u>		\$ <u>1000.00</u>	\$ <u>7000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>n/a</u> Employer <u>n/a</u> Business Address <u>n/a</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$2,600.00

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

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 139353

2. Committee Name CTE Larry Rocca

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>10/08/20</u>	
Name & Address: Chris Hurd 67895 Campground Road Washington, MI 48095		\$ <u>50.00</u>	\$ <u>50.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</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>10/11/20</u>	
Name & Address: Robert Little 14625 Shirley Avenue Warren, MI 48089		\$ <u>100.00</u>	\$ <u>200.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Retired</u> Business Address <u>n/a</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>10/16/20</u>	
Name & Address: Martin Berish 13145 Florentine Shelby Township, MI 48315		\$ <u>200.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Great American Haircuts</u> Business Address <u>15 Mile Road, Clinton Township, MI 48035</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 _____	
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 \$350.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule) \$21,950.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 139353

CANDIDATE COMMITTEE

2. Committee Name CTE Larry Rocca

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: Jim Sage 10 Cabri Lane Dearborn Heights, MI 48127 If over \$100.00 cumulative, please provide: Occupation: <u>CEO</u> Employer Name & Business Address: Sago's Resturant Group 36470 Moravian Drive Clinton Township, MI 48035 ☒ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☒ Goods Donated or Loaned ☐ Services Donated ☐ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description <u>Food for Fundraising Event</u> 5. Date Of Receipt: <u>10/06/20</u> 6. Vendor Name & Address: Click Here for Memo Itemization	\$ <u>1,260.00</u>	\$ <u>1,360.00</u>
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: Willard Hadley 22450 Alexander Street St. Clair Shores, MI 48081 If over \$100.00 cumulative, please provide: Occupation: <u>Realtor</u> Employer Name & Address: Hadley Real Estate Agency 22100 Harper Avenue St. Clair Shores, MI 48080 ☒ Fund Raiser Contribution	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated ☒ Goods or Services Purchased by Candidate or Others ☐ Goods or Services Purchased by Candidate or Others- LOAN Description <u>Beverage for Fundraising Event</u> 5. Date Of Receipt: <u>10/06/20</u> 6. Vendor Name & Address: Sajo's of Clinton Township 36470 Moravian Drive Clinton Township, MI 48035 Click Here for Memo Itemization	\$ <u>1,000.00</u>	\$ <u>1,500.00</u>
Contribution #3 PAC Receipt? ☐ Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: ☐ 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 _____ 5. Date Of Receipt: _____ 6. Vendor Name & Address: Click Here for Memo Itemization	\$ _____	

Page Subtotal **\$2,260.00**

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) **\$2,260.00**

Enter this total
on line 6 of Summary
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ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 139353
2. Committee Name CTE Larry Rocca

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Anedot Address 1340 Poydras Street, Suite 1770 New Orleans, LA 701 ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/25/20</u> Date	<u>\$ 10.05</u>
Expenditure #2 Name Anedot Address 1340 Poydras Street, Suite 1770 New Orleans, LA 701 ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/25/20</u> Date	<u>\$ 10.05</u>
Expenditure #3 Name Anedot Address 1340 Poydras Street, Suite 1770 New Orleans, LA 701 ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/26/20</u> Date	<u>\$ 10.05</u>
Expenditure #4 Name Anedot Address 1340 Poydras Street, Suite 1770 New Orleans, LA 701 ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/27/20</u> Date	<u>\$ 10.05</u>
Expenditure #5 Name Anedot Address 1340 Poydras Street, Suite 1770 New Orleans, LA 701 ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/27/20</u> Date	<u>\$ 10.05</u>

Subtotal this page

\$50.25

Grand Total of all Schedules 1B
(Complete on last page of Schedule)

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on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139353
2. Committee Name CTE Larry Rocca

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/27/20</u> Date	<u>\$ 19.80</u>
Expenditure #2 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/27/20</u> Date	<u>\$ 19.80</u>
Expenditure #3 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/27/20</u> Date	<u>\$ 19.80</u>
Expenditure #4 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/28/20</u> Date	<u>\$ 10.05</u>
Expenditure #5 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/28/20</u> Date	<u>\$ 10.05</u>

Subtotal this page **\$79.50**
Grand Total of all Schedules 1B
(Complete on last page of Schedule)

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Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139353
2. Committee Name CTE Larry Rocca

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Anedot Address 1340 Poydras Street, Suite 1770 New Orleans, LA 701 ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/29/20</u> Date	<u>\$ 6.15</u> Click Here for Memo Itemization Type
Expenditure #2 Name Anedot Address 1340 Poydras Street, Suite 1770 New Orleans, LA 701 ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/30/20</u> Date	<u>\$ 19.80</u> Click Here for Memo Itemization Type
Expenditure #3 Name Anedot Address 1340 Poydras Street, Suite 1770 New Orleans, LA 701 ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/31/20</u> Date	<u>\$ 6.15</u> Click Here for Memo Itemization Type
Expenditure #4 Name Anedot Address 1340 Poydras Street, Suite 1770 New Orleans, LA 701 ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/04/20</u> Date	<u>\$ 4.20</u> Click Here for Memo Itemization Type
Expenditure #5 Name Anedot Address 1340 Poydras Street, Suite 1770 New Orleans, LA 701 ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/04/20</u> Date	<u>\$ 6.15</u> Click Here for Memo Itemization Type

Subtotal this page

\$42.45

Grand Total of all Schedules 1B
(Complete on last page of Schedule)

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on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139353
2. Committee Name CTE Larry Rocca

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/07/20</u> Date	<u>\$ 10.05</u>
Expenditure #2 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/08/20</u> Date	<u>\$ 10.05</u>
Expenditure #3 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/09/20</u> Date	<u>\$ 8.10</u>
Expenditure #4 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/09/20</u> Date	<u>\$ 8.10</u>
Expenditure #5 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/10/20</u> Date	<u>\$ 10.05</u>
Subtotal this page			\$46.35
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139353
2. Committee Name CTE Larry Rocca

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Anedot Address 1340 Poydras Street, Suite 1770 New Orleans, LA 701 ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/10/20</u> Date	<u>\$ 10.05</u>
Expenditure #2 Name Anedot Address 1340 Poydras Street, Suite 1770 New Orleans, LA 701 ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/10/20</u> Date	<u>\$ 4.20</u>
Expenditure #3 Name Anedot Address 1340 Poydras Street, Suite 1770 New Orleans, LA 701 ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/10/20</u> Date	<u>\$ 4.20</u>
Expenditure #4 Name Anedot Address 1340 Poydras Street, Suite 1770 New Orleans, LA 701 ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/10/20</u> Date	<u>\$ 4.20</u>
Expenditure #5 Name Anedot Address 1340 Poydras Street, Suite 1770 New Orleans, LA 701 ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/10/20</u> Date	<u>\$ 10.05</u>

Subtotal this page	\$32.70
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

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on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139353
2. Committee Name CTE Larry Rocca

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/10/20</u> Date	<u>\$ 4.20</u>
Expenditure #2 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/10/20</u> Date	<u>\$ 4.20</u>
Expenditure #3 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/11/20</u> Date	<u>\$ 10.05</u>
Expenditure #4 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/11/20</u> Date	<u>\$ 10.05</u>
Expenditure #5 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/11/20</u> Date	<u>\$ 4.20</u>

Subtotal this page	\$32.70
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 139353
2. Committee Name CTE Larry Rocca

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/18/20</u> Date	<u>\$ 6.15</u>
Expenditure #2 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/30/20</u> Date	<u>\$ 4.20</u>
Expenditure #3 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/30/20</u> Date	<u>\$ 4.20</u>
Expenditure #4 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/03/20</u> Date	<u>\$ 19.80</u>
Expenditure #5 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/06/20</u> Date	<u>\$ 4.20</u>

Subtotal this page **\$38.55**
Grand Total of all Schedules 1B
(Complete on last page of Schedule)

Enter this total
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Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139353
2. Committee Name CTE Larry Rocca

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/06/20</u> Date	\$ <u>4.20</u>
Expenditure #2 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/06/20</u> Date	\$ <u>2.25</u>
Expenditure #3 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 701</u> ☒ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/06/20</u> Date	\$ <u>19.80</u>
Expenditure #4 Name <u>Printing by Johnson</u> Address <u>1430 Southbound Gratiot Avenue</u> <u>Mt. Clemens, MI 48043</u> ☐ Fund Raiser	Purpose: <u>Signs</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/04/20</u> Date	\$ <u>2872.60</u>
Expenditure #5 Name <u>Italian Tribune</u> Address <u>21852 23 Mile Road</u> <u>Macomb, MI 48042</u> ☐ Fund Raiser	Purpose: <u>Advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/08/20</u> Date	\$ <u>277.00</u>

Subtotal this page **\$3,175.85**
Grand Total of all Schedules 1B
(Complete on last page of Schedule)

Enter this total
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Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139353
2. Committee Name CTE Larry Rocca

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Italian Tribune Address 21852 23 Mile Road Macomb, MI 48042 ☐ Fund Raiser	Purpose: <u>Advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/08/20</u> Date	<u>\$ 277.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name Drive Digital Advertising Address 22524 Trombly Street St. Clair Shores, MI 48080 ☐ Fund Raiser	Purpose: <u>Digital Management (All In-House)</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/09/20</u> Date	<u>\$ 1350.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name Drive Digital Advertising Address 22524 Trombly Street St. Clair Shores, MI 48080 ☐ Fund Raiser	Purpose: <u>Social Media Advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/09/20</u> Date	<u>\$ 1500.00</u> Memo Itemization Below
Expenditure #4 Name Facebook Address 1 Hacker Way Palo Alto, CA (memo itemization from Drive Digital Advertising Expenditure #3) ☐ Fund Raiser	Purpose: <u>Social Media Advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/09/20</u> Date	<u>\$ (1500.00)</u> (Memo Itemization)
Expenditure #5 Name G-Tek Professional Services Inc Address 42888 Mound Road Sterling Heights, MI 48314 ☐ Fund Raiser	Purpose: <u>Printed Masks</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/14/20</u> Date	<u>\$ 1065.30</u> Click Here for Memo Itemization Type

Subtotal this page

\$4,192.30

Grand Total of all Schedules 1B
(Complete on last page of Schedule)

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Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 139353
2. Committee Name CTE Larry Rocca

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Head Full of Ideas Address 18641 Beatrice Clinton Township, MI 48036 ☐ Fund Raiser	Purpose: <u>Website Administration (All In-House)</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/14/20</u> Date	<u>\$ 300.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name PrintMasters Printing Company Address 26039 Dequindre Road Madison Heights, MI 48071 ☐ Fund Raiser	Purpose: <u>Printing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/14/20</u> Date	<u>\$ 9492.30</u> Click Here for Memo Itemization Type
Expenditure #3 Name Andiamos Address 7096 E. 14 Mile Road Warren, MI 48092 ☒ Fund Raiser	Purpose: <u>Catering</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/14/20</u> Date	<u>\$ 1991.02</u> Click Here for Memo Itemization Type
Expenditure #4 Name Frank Krause Address 19995 Riverwoods Ct Clinton Township, MI 48044 ☒ Fund Raiser	Purpose: <u>Entertainment (All In-House)</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/15/20</u> Date	<u>\$ 400.00</u> Click Here for Memo Itemization Type
Expenditure #5 Name Home Depot Address 20777 Hall Road Macomb, MI 48044 ☐ Fund Raiser	Purpose: <u>Sign Posts</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/15/20</u> Date	<u>\$ 282.89</u> Click Here for Memo Itemization Type

Subtotal this page

\$12,466.21

Grand Total of all Schedules 1B
(Complete on last page of Schedule)

Enter this total
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Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139353
2. Committee Name CTE Larry Rocca

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name PrintMasters Printing Company Address 26039 Dequindre Road Madison Heights, MI 48071 ☐ Fund Raiser	Purpose: <u>Printing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/16/20</u> Date	<u>\$ 950.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name Head Full of Ideas Address 18641 Beatrice Clinton Township, MI 48036 ☐ Fund Raiser	Purpose: <u>Website Development (All In-House)</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/22/20</u> Date	<u>\$ 5000.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name LaserCom Address 2230 Elliott Troy, MI 48083 ☐ Fund Raiser	Purpose: <u>Postage and Mailing House Services</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/23/20</u> Date	<u>\$ 19036.62</u> Click Here for Memo Itemization Type
Expenditure #4 Name 5 Star Outdoor LLC Address 2187 Orchard Lake Road, Suite 102 Keego Harbor, MI 48320 ☐ Fund Raiser	Purpose: <u>Billboard Advertising (All In-House)</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/23/20</u> Date	<u>\$ 10000.00</u> Click Here for Memo Itemization Type
Expenditure #5 Name C&G Newspapers Address 13650 East Eleven Road Warren, MI 48089 ☐ Fund Raiser	Purpose: <u>Advertisements</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/25/20</u> Date	<u>\$ 5196.75</u> Click Here for Memo Itemization Type

Subtotal this page **\$40,183.37**
Grand Total of all Schedules 1B
(Complete on last page of Schedule)

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139353
2. Committee Name CTE Larry Rocca

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name PrintMasters Printing Company Address 26039 Dequindre Road Madison Heights, MI 48071 ☐ Fund Raiser	Purpose: <u>Printing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/01/20</u> Date	<u>\$ 57.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name LaserCom Address 2230 Elliott Troy, MI 48063 ☐ Fund Raiser	Purpose: <u>Postage and Mailing House Services</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/29/20</u> Date	<u>\$ 3506.36</u> Click Here for Memo Itemization Type
Expenditure #3 Name City of Sterling Heights Address 40555 Utica Road Sterling Heights, MI 48313 ☐ Fund Raiser	Purpose: <u>Voter Data</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/07/20</u> Date	<u>\$ 33.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name Drive Digital Advertising Address 22524 Trombly Street St. Clair Shores, MI 48080 ☐ Fund Raiser	Purpose: <u>Social Media Advertisement / Digital Management</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/10/20</u> Date	<u>\$ 3050.00</u> Memo Itemization Below
Expenditure #5 Name Facebook Address 1 Hacker Way Palo Alto, CA (memo itemization from Drive Digital Advertising Expenditure #4) ☐ Fund Raiser	Purpose: <u>Social Media Advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/10/20</u> Date (Memo Itemization)	<u>\$ (1700.00)</u>

Subtotal this page **\$6,646.36**
Grand Total of all Schedules 1B
(Complete on last page of Schedule)

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 139353
2. Committee Name CTE Larry Rocca

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Anedot</u> Address <u>1340 Poydras Street, Suite 1770</u> <u>New Orleans, LA 70112</u> ☐ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/11/20</u> Date	<u>\$ 4.20</u>
Expenditure #2 Name <u>The Italian Tribune</u> Address <u>21852 23 Mile Road</u> <u>Macomb, MI 48042</u> ☐ Fund Raiser	Purpose: <u>Advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/10/20</u> Date	<u>\$ 432.00</u>
Expenditure #3 Name <u>Paw Graphics</u> Address <u>214 Crocker Blvd</u> <u>Mt. Clemens, MI 48043</u> ☐ Fund Raiser	Purpose: <u>Graphics Design - All In-House</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/10/20</u> Date	<u>\$ 1830.00</u>
Expenditure #4 Name <u>C&G Newspapers</u> Address <u>13650 East Eleven Road</u> <u>Warren, MI 48089</u> ☐ Fund Raiser	Purpose: <u>Advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/14/20</u> Date	<u>\$ 5196.75</u>
Expenditure #5 Name <u>The Italian Tribune</u> Address <u>21852 23 Mile Road</u> <u>Macomb, MI 48042</u> ☐ Fund Raiser	Purpose: <u>Advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/11/20</u> Date	<u>\$ 252.00</u>

Subtotal this page	\$7,714.95
Grand Total of all Schedules 1B (Complete on last page of Schedule)	

Enter this total
on line 8a of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 139353
2. Committee Name CTE Larry Rocca

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>PrintMasters Printing Company</u> Address <u>26039 Dequindre Road</u> <u>Madison Heights, MI 48071</u> ☐ Fund Raiser	Purpose: <u>Printing - All In-House</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/16/20</u> Date	\$ <u>5326.50</u>
Expenditure #2 Name <u>LaserCom</u> Address <u>2230 Elliott</u> <u>Troy, MI 48063</u> ☐ Fund Raiser	Purpose: <u>Postage and Mailing House Services</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/16/20</u> Date	\$ <u>19036.62</u>
Expenditure #3 Name <u>The Italian Tribune</u> Address <u>21852 23 Mile Road</u> <u>Macomb, MI 48042</u> ☐ Fund Raiser	Purpose: <u>Advertisement</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/05/20</u> Date	\$ <u>277.00</u>
Expenditure #4 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page **\$24,640.12**
Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$99,341.66**

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 139353
2. Committee Name CTE Larry Rocca

This Schedule itemizes:

a ☒ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? ☐ Yes Owed to or by: Owed To: Larry Rocca 38299 Moravian Clinton Township, MI 48036 Owed By: CTE Larry Rocca Committee ID: 139353	4. Type: <u>Loan from Candidate</u> 5. <u>Date Debt Was Incurred:</u> <u>12/23/19</u> 6. <u>Original Amount of Debt:</u> <u>\$ 36,000.00</u>	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$ 36,000.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: <u>n/a</u>		Amount Endorsed: \$ <u>0.00</u>		

Debt #2 Corp? ☐ Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> _____ \$ _____	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Debt #3 Corp? ☐ Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> _____ \$ _____	<u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u> <u>\$</u>	<u>\$</u>	<u>\$</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt) **\$36,000.00**

Grand Total of all Schedules 1E **\$36,000.00**
(Complete on last page of Schedule showing amounts owed by or to the committee)

Enter this total on line 12a "owed by" or line 12b "owed to" of the Summary Page

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139353

2. Committee Name CTE Larry Rocca

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>09/10/20</u>	4. Number of Individuals Attending or Participating (whichever is greater) ~ 65	5. Type of Fund Raising Activity Reception	6. Address and Name (If any) of the place where the activity was held. Andiamo Warren 7096 East 14 Mile Road Warren, MI 48092 ☐ Private Residence
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7. Total Contributions \$14,150.00

8. Other Receipts \$0.00

9. Gross Receipts (Add lines 7 and 8) \$14,150.00

10. Total Cost of Event \$2,650.67
(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.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139353

2. Committee Name CTE Larry Rocca

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>10/06/20</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>~ 20</u>	5. Type of Fund Raising Activity <u>Reception</u>	6. Address and Name (If any) of the place where the activity was held. Sajos of Clinton 36470 Moravian Drive Clinton Township, MI 48035 ☐ Private Residence
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7. Total Contributions \$5,450.00

8. Other Receipts \$0.00

9. Gross Receipts (Add lines 7 and 8) \$5,450.00

10. Total Cost of Event \$2,349.10
(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.