

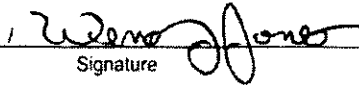


MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

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 139825		3. This Statement covers From: 08/25/20 to 10/18/20	
2. Committee Name CTE Wendy Jones		4. Candidate Last Name Jones First Name Wendy M.I. J 4a. Office Sought Including District # or Community Served (If applicable) Clerk Chesterfield Twp 4b. County of Residence MACOMB	
5. Committee's Mailing Address 50826 W Shamrock St Chesterfield MI 48047 Area Code and Phone (586) 405-2198 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 Wendy Jones 50826 W Shamrock St Chesterfield MI 48047 Area Code & Phone (586) 405-2198	
7. Treasurer's Business Address 50826 W Shamrock St Chesterfield MI 48047 Area Code and Phone (586) 405-2198		8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) Wendy Jones 50826 W Shamrock St Chesterfield MI 48047 Area Code and Phone (586) 405-2198	
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 hereby discharged and forgiven, and no longer collectible from the committee. The committee has no outstanding assets, owes no late fees or has any outstanding debt. Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver. Effective date of dissolution Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.	
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 Wendy Jones Type or Print Name		 Signature Date 10/23/2020	
Candidate Wendy Jones Type or Print Name		 Signature Date 10/23/2020	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 139825

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name CTE Wendy Jones

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>8,950.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>\$8,950.00</u>	(18.) \$ <u>\$12,050.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u></u>	(19.) \$ <u>\$0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>\$8,950.00</u>	(20.) \$ <u>\$12,050.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>\$0.00</u>	(21.) \$ <u>\$0.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u>\$0.00</u>	(22.) \$ <u>\$0.00</u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>\$9,051.83</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>\$9,051.83</u>	(23.) \$ <u>\$11,442.10</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>\$0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>\$0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	<u>\$0.00</u>	(24.) \$ <u>\$0.00</u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>\$0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u></u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>\$709.73</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>\$8,950.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>\$9,659.73</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>\$9,051.83</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>\$607.90</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139825

2. Committee Name CTE Wendy Jones

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>Lynn Nassar</u> <u>21220 Briar Rose Macomb MI 48044</u>			\$ <u>200.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Realtor</u> Employer <u>Real Estate One</u> Business Address <u>47800 Gratiot Ave Chesterfield MI 48051</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>09/08/20</u>		
Name & Address: <u>JerryFennel</u> <u>50135 Sass Rd Chesterfield MI 48047</u>			\$ <u>200.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Realtor</u> Employer <u>Real Estate One</u> Business Address <u>47800 Gratiot Ave Chesterfield 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>09/08/20</u>		
Name & Address: <u>Kathy Burbeula</u> <u>31055 Sikon Chesterfield MI 48047</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>09/08/20</u>		
Name & Address: <u>Susan Dutcher</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	

Page Subtotal \$600.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule) \$8,950.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139825

2. Committee Name CTE Wendy Jones

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/08/20</u> Name & Address <u>Paul Manley</u> <u>48112 Fuller Rd. Chesterfield MI 48051</u>		\$ <u>50.00</u>	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/08/20</u> Name & Address <u>Judy McMicking</u> <u>47611 Burlingame Dr Chesterfield MI 48047</u>		\$ <u>60.00</u>	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/08/20</u> Name & Address <u>Josephine Glass</u> <u>53159 Cripple Creek Dr. Chesterfield MI 48047</u>		\$ <u>10.00</u>	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/08/20</u> Name & Address <u>Linda Hartman</u> <u>48221 Forbes Chesterfield MI 48047</u>		\$ <u>1000.00</u>	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>Chesterfield Twp</u> Business Address <u>47275 Sugarbush Rd Chesterfield MI 48047</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser			

Page Subtotal \$1,120.00

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

\$8,950.00

Enter this total on
line 3a of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1 Committee ID Number 139825

2 Committee Name CTE Wendy Jones

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.

6 Amount

7 Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3 Contribution # 1 PAC Receipt? ☐ YES 4 Date of Receipt 09/08/20

Name & Address

Mark Palimino
27183 Clark Circle Chesterfield MI 48051

\$ 30.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Click Here for Memo Itemization

Business Address _____

Type of Contribution ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3 Contribution # 2 PAC Receipt? ☐ YES 4 Date of Receipt 09/08/20

Name & Address

Michelle Merriweather
52860 Muirfield Chesterfield MI 48051

\$ 40.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Click Here for Memo Itemization

Business Address _____

Type of Contribution ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3 Contribution # 3 PAC Receipt? ☐ YES 4 Date of Receipt 09/08/20

Name & Address

Jim Kardoosh

\$ 300.00

5. If over \$100.00 cumulative, please provide:

Occupation owner operator Employer Swirly Top

Click Here for Memo Itemization

Business Address 47009 Jefferson Ave Chesterfield MI 48047

Type of Contribution ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3 Contribution # 4 PAC Receipt? ☐ YES 4 Date of Receipt 09/08/20

Name & Address

Michele Ficht
49207 Brockton Ct Chesterfield MI 48047

\$ 100.000

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Click Here for Memo Itemization

Business Address _____

Type of Contribution ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal \$470.00

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

\$8,950.00

Enter this total on
line 3a of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 139825

2. Committee Name CTE Wendy Jones

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>09/08/25</u>	
Name & Address <u>Wendy Jones</u> <u>50826 W Shamrock</u> <u>Chesterfield MI 48047</u>		\$ <u>2200.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Realtor</u> Employer <u>Real Estate One</u> Business Address <u>47800 Gratiot Ave Chesterfield MI 48051</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization v	
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/08/20</u>	
Name & Address <u>Wendy Jones</u> <u>50826 W Shamrock</u> <u>Chesterfield MI 48047</u>		\$ <u>3000.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Realtor</u> Employer <u>Real Estate One</u> Business Address <u>47800 Gratiot Ave Chesterfield MI 48051</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization v	
3. Contribution #3	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/08/20</u>	
Name & Address <u>James Ellis</u> <u>45482 Private Shore</u> <u>Chesterfield MI 48047</u>		\$ <u>500.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u>UAW</u> Business Address <u>45482 Private Shore Dr Chesterfield MI 48047</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization v	
3. Contribution #4	PAC Receipt? ☐ YES	4. Date of Receipt <u>09/08/20</u>	
Name & Address <u>Barb Hoisington</u> <u>28188 Cotton Wood Ct Chesterfield MI 48047</u>		\$ <u>500.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Director of Growth Home Health Care</u> Employer <u>Guardian Angel</u> Business Address <u>1715 Northfield Dr, Rochester MI 48309</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization v	

Page Subtotal \$6,200.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule) \$8,950.00

Enter this total on
line 3a of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139825

2. Committee Name CTE Wendy Jones

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/10/20</u> Name & Address <u>Jennifer Miller</u> <u>162 Riverside Mt Clemens MI 48043</u>		\$ <u>50.00</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 v	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/10/20</u> Name & Address <u>Marie Porolniczak</u> <u>49316 Bayshore Chesterfield MI 48047</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 v	
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/10/20</u> Name & Address <u>John Spica</u> <u>25276 Noble Chesterfield MI 48051</u>		\$ <u>60.00</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 v	
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>09/16/20</u> Name & Address <u>Brian Thomas</u> <u>26578 Harvest Dr, Chesterfield, MI 48051</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 v	

Page Subtotal \$310.00

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

\$8,950.00

Enter this total on
line 3a of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee ID Number 139825

2. Committee Name CTE Wendy Jones

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☒ YES 4. Date of Receipt 10/05/20

Name & Address

Sheet Metal Workers Local 80
17100 W Twelve Mile Rd Southfield MI 48076

\$ 250.00

5. If over \$100.00 cumulative, please provide:

Occupation Political Action Committee Employer Sheet Metal Workers Local 80

Click Here for Memo Itemization

Business Address 17100 W Twelve Mile Rd Southfield MI 48076

Type of Contribution ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt

Name & Address

\$ \$

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Employer

Business Address

Type of Contribution ☐ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt

Name & Address

\$ \$

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Employer

Business Address

Type of Contribution ☐ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt

Name & Address

\$ \$

5. If over \$100.00 cumulative, please provide:

Click Here for Memo Itemization

Occupation Employer

Business Address

Type of Contribution ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal \$250.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule) \$8,950.00

Enter this total on
line 3a of Summary
Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139825
2. Committee Name CTE Wendy Jones

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>21 CM MI Newspaper</u> Address <u>Macomb Daily</u> <u>Clinton Twp</u> ☐ Fund Raiser	Purpose <u>Digital Add</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/10/20</u> Date	<u>\$ 832.00</u> Click Here for Memo Itemization Type v
Expenditure #2 Name <u>Meijers</u> Address <u>23 Mile/Gratiot Chesterfield MI 48051</u> ☒ Fund Raiser	Purpose <u>Fundraiser</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/10/20</u> Date	<u>\$ 182.19</u> Click Here for Memo Itemization Type v
Expenditure #3 Name <u>Gordon Food Service</u> Address <u>Gratiot Ave</u> ☒ Fund Raiser	Purpose <u>Fundraiser</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/10/20</u> Date	<u>\$ 32.97</u> Click Here for Memo Itemization Type v
Expenditure #4 Name <u>Marco Pizza</u> Address <u>Gratiot Ave Chestfield MI 48051</u> ☒ Fund Raiser	Purpose <u>Fundraiser</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/10/20</u> Date	<u>\$ 90.62</u> Click Here for Memo Itemization Type v
Expenditure #5 Name <u>American Graphic</u> Address <u>34895 Groesbeck Hwy Clinton Twp MI</u> ☐ Fund Raiser	Purpose <u>Post Cards</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/28/20</u> Date	<u>\$ 1286.84</u> Click Here for Memo Itemization Type v

Subtotal this page **\$2,424.62**

Grand Total of all Schedules 1B
(Complete on last page of Schedules) **\$9,051.83**

Enter this total
on line 5a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1 Committee I.D. Number **139825**
2 Committee Name **CTE Wendy Jones**

3 Name and address of person or vendor to whom paid	4 Purpose (Required Information)	5 Date	6 Amount
Expenditure #1 Name 455 Digital Address 200 S Washington Ave Suite 2 Royal Oak MI 48067 ☐ Fund Raiser	Purpose Media ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/21/20 Date	\$ 150.00 Click Here for Memo Itemization Type v
Expenditure #2 Name Post Master Address USPS 34895 Groesbeck Hwy Clinton Twp MI ☐ Fund Raiser	Purpose Post Card Mailer ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/22/20 Date	\$ 4661.76 Click Here for Memo Itemization Type v
Expenditure #3 Name Mass Mailing Address 35468 Mound Rd Sterling Hts MI ☐ Fund Raiser	Purpose Mail House Fee ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/22/20 Date	\$ 775.18 Click Here for Memo Itemization Type v
Expenditure #4 Name American Graphics Address 34895 Groesbeck Hwy Clinton Twp MI ☐ Fund Raiser	Purpose Post Card ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/22/20 Date	\$ 643.00 Click Here for Memo Itemization Type v
Expenditure #5 Name Poppy Design LLC Address 23225 Oakwood Eastpoint MI 48021 ☐ Fund Raiser	Purpose Post Card Design ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/22/20 Date	\$ 100.00 Click Here for Memo Itemization Type v

Subtotal this page **\$6,329.94**

Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$9,051.83**

Enter this total
on Line B of
Summary Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1 Committee ID Number 139825
2 Committee Name CTE Wendy Jones

3 Name and address of person or vendor to whom paid	4 Purpose (Required Information)	5 Date	6 Amount
Expenditure #1 Name Digital 445 Address 200 S Washington Ave Suite 2 Royal Oak MI 48067 ☐ Fund Raiser	Purpose Maintain Social Media ads ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/09/20 Date	\$ 228.05 Click Here for Memo Itemization Type ▾
Expenditure #2 Name English Gardens Address Groesbeck Hwy Clinton Twp MI ☐ Fund Raiser	Purpose Flags ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/24/20 Date	\$ 13.00 Click Here for Memo Itemization Type ▾
Expenditure #3 Name Tractor Supply Address 57155 Gratiot Ave New Haven MI 48048 ☐ Fund Raiser	Purpose T Post ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/23/20 Date	\$ 27.90 Click Here for Memo Itemization Type ▾
Expenditure #4 Name Tractor Supply Address 57155 Gratiot Ave New Haven MI 48048 ☐ Fund Raiser	Purpose T Post ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/28/20 Date	\$ 27.90 Click Here for Memo Itemization Type ▾
Expenditure #5 Name Address ☐ Fund Raiser	Purpose ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	Date	\$ Click Here for Memo Itemization Type ▾

Subtotal this page \$296.85

Grand Total of all Schedules 1B
(Complete on last page of Schedule) \$9,051.83

Enter this total
on line 5a of
Summary Page