



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FILED

20 OCT 29 AM 9:19

**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.

STATEMENT COVERS FROM: 7-21-2020 TO 10-26-2020

1. Committee I.D. Number 135880	4. Candidate Last Name PERNA First Name JAMES M.I. M
2. Committee Name CITIZENS TO ELECT JAMES M PERNA	4a. Office Sought Including District # or Community Served (If applicable) MACOMB COUNTY CLERK
5. Committee's Mailing Address 38180 SADDLE LA- CLINTON TWP MI 313.530.9407	4b. County of Residence MACOMB
Area Code and Phone 313.530.9407 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 JAMES M PERNA 38180 SADDLE LA- CLINTON TWP MI 48036 313.530.9407
7. Treasurer's Business Address 38180 SADDLE LA- CLINTON TWP MI 48036	8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)
Area Code and Phone	Area Code and Phone

9. TYPE OF STATEMENT	
9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election	9c. <input type="checkbox"/> Annual Statement (_____ Coverage Year)
Pre-Election or Post-Election Statement relates to:	9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)
<input type="checkbox"/> Primary <input type="checkbox"/> General	9e. <input type="checkbox"/> Dissolution of Candidate Committee
<input type="checkbox"/> Convention <input type="checkbox"/> School	Effective Date of Dissolution _____
<input type="checkbox"/> Special <input type="checkbox"/> Caucus	
Date of Election, Convention or Caucus _____	

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in Items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.

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	JAMES PERNA		Date 10-29/2020
Candidate	JAMES PERNA		Date 10.29.2020

Authority granted under P.A. 388 of 1976



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**SUMMARY PAGE
CANDIDATE COMMITTEE**

1. Committee I.D. Number

13588C

2. Committee Name

CITIZENS TO ELECT
JAMES PERNA

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$		
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$		(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$		(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$		(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$		(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$		(22.) \$
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$		
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$		
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$		
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$		(23.) \$
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$		
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$		
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$		(24.) \$
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$		
b. Owed to the Committee (Schedule 1E)	(12b.) \$	95748.90	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	381.38	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$		
15. SUBTOTAL Add lines 13 and 14	(15.) = \$		
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$		
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	381.38	

DEBTS AND OBLIGATIONS SCHEDULE 1E CANDIDATE COMMITTEE

1. Committee I.D. Number

135880

2. Committee Name

CTE JAMES PERNA

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.

4. Type of Obligation
(Indicate type and you may assign an expenditure code)

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)

Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantors, if any.

5. Indicate date debt was incurred
6. Indicate original amount of debtDebt #1
Owed to or by:Corp? ☐ Yes4. Type: LOAN

Code

1 1 \$

1 1 \$

5. Date Debt Was Incurred:

1-1-96 - 12-31-17

1 1 \$

6. Original Amount of Debt:

\$ 86706.27

1 1 \$

1 1 \$

\$

\$ 86706.27

☐ FORGIVEN

If bank loan, name of endorser or guarantor:

Amount Endorsed: \$

Debt #2
Owed to or by:Corp? ☐ Yes4. Type: LOAN

Code

1 1 \$

1 1 \$

5. Date Debt Was Incurred:

10-20-18

1 1 \$

6. Original Amount of Debt:

\$ 8431.63

1 1 \$

1 1 \$

\$

\$ 8431.63

☐ FORGIVEN

If bank loan, name of endorser or guarantor:

Amount Endorsed: \$

Debt #3
Owed to or by:Corp? ☐ Yes4. Type: LOAN

Code

1 1 \$

1 1 \$

5. Date Debt Was Incurred:

9-10-18

1 1 \$

6. Original Amount of Debt:

\$ 211.00

1 1 \$

1 1 \$

\$

\$ 211.00

☐ FORGIVEN

If bank loan, name of endorser or guarantor:

Amount Endorsed: \$

Page Subtotal (Outstanding debt)

(Complete on last page of Schedule showing amounts owed by or to the committee)

Grand Total of all Schedules 1E

95348.90

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

PLEASE REFER TO INSTRUCTIONS FOR LIST OF EXPENDITURE CODES

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.

Page 1 of 3 Authority granted under P.A. 385 of 1976

CFR REV 7/1999c-1a

DEBTS AND OBLIGATIONS SCHEDULE 1E CANDIDATE COMMITTEE

1. Committee I.D. Number

13588C

2. Committee Name

CTG JAMES PERNA

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 (Indicate type and you may assign an expenditure code)
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
Owed to or by:Corp? ☐ Yes

JAMES PERNA
38180 SADDLE LA -
CLINTON TWP MI 48036

4. Type: LOAN

Code

5. Date Debt Was Incurred:

9-24-18

6. Original Amount of Debt:

\$ 250.00

1 / 1 \$

1 / 1 \$

1 / 1 \$

1 / 1 \$

1 / 1 \$

\$

\$250.00

☐ FORGIVEN

If bank loan, name of endorser or guarantor:

Debt #2
Owed to or by:Corp? ☐ Yes

4. Type:

Code

5. Date Debt Was Incurred:

6. Original Amount of Debt:

\$

1 / 1 \$

1 / 1 \$

1 / 1 \$

1 / 1 \$

1 / 1 \$

Amount Endorsed: \$

\$

☐ FORGIVEN

If bank loan, name of endorser or guarantor:

Debt #3
Owed to or by:Corp? ☐ Yes

4. Type:

Code

5. Date Debt Was Incurred:

6. Original Amount of Debt:

\$

1 / 1 \$

1 / 1 \$

1 / 1 \$

1 / 1 \$

1 / 1 \$

Amount Endorsed: \$

\$

☐ FORGIVEN

If bank loan, name of endorser or guarantor:

Page Subtotal (Outstanding debt)

(Complete on last page of Schedule showing amounts owed by or to the committee)

Grand Total of all Schedules 1E

250.00

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

PLEASE REFER TO INSTRUCTIONS FOR LIST OF EXPENDITURE CODES

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.

Page 2 of 3 Authority granted under P.A. 388 of 1976



CANDIDATE COMMITTEE

135880

2. Committee Name

CTE JAMES M PERNA

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.)

9. Outstanding
Balance at close
of this period
(Item 6 minus
item 8)

date on debt

150 100

957 48-90

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