

**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 <u>138276</u>		3. This Statement covers From: <u>1-1-20 RT</u> <u>8-25-20</u> to <u>10-18-20</u>	
2. Committee Name <u>Friends of Ron Trombly</u>		4. Candidate Last Name <u>Trombly Jr</u> First Name <u>Ronald</u> M.I. <u>J</u> 4a. Office Sought Including District # or Community Served (If applicable) <u>Lenox Township Supervisor</u> 4b. County of Residence <u>Macomb</u>	
5. Committee's Mailing Address <u>5252 County Line</u> <u>Lenox MI 48048</u> Area Code and Phone <u>586-749-9460</u> 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 <u>Ronald J Trombly Jr</u> <u>5252 County Line</u> <u>Lenox MI 48048</u> Area Code & Phone <u>586-749-9460</u>	
7. Treasurer's Business Address <u>5252 Countyline</u> <u>Lenox MI 48048</u> Area Code and Phone <u>586-749-9460</u>		8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) <u>N/A</u> 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>11-3-20</u>		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 <u>Ronald J Trombly Jr</u> Type or Print Name		<u>Ronald J Trombly Jr</u> Date <u>10-22-20</u> Signature	
Candidate <u>Ron Trombly</u>		Date <u>10-22-20</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 138276
2. Committee Name Friends of Ren Trombly

**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>10,000⁰⁰</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>10,000⁰⁰</u>	(18.) \$ <u>10,000⁰⁰</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u>0</u>	(19.) \$ <u>0</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>10,000⁰⁰</u>	(20.) \$ <u>10,000⁰⁰</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>0</u>	(21.) \$ <u>0</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u>0</u>	(22.) \$ <u>0</u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>5,347.36</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>0</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>0</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>5,347.36</u>	(23.) \$ <u>5,347.36</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>0</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>0</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	<u>0</u>	(24.) \$ <u>0</u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>10,000⁰⁰</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>0</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>10,000⁰⁰</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>10,000⁰⁰</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>5,347.36</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>4,652.64 *</u>	

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 138276
2. Committee Name Friends of Ron Trombly

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 Name & Address: <u>Ron Trombly</u> <u>5252 County line</u> <u>Lenox MI 48048</u>		\$ <u>10,000⁰⁰</u>	
PAC Receipt? ☐ YES 4. Date of Receipt <u>9-1-20</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>Supervisor</u> Employer <u>Lenox Twp</u> Business Address <u>5252 County line MI 48048</u> Type of Contribution: ☐ Direct ☒ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 Name & Address:		\$ _____	\$ _____
PAC Receipt? ☐ YES 4. Date of Receipt _____			
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 Name & Address:		\$ _____	\$ _____
PAC Receipt? ☐ YES 4. Date of Receipt _____			
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 Name & Address:		\$ _____	\$ _____
PAC Receipt? ☐ YES 4. Date of Receipt _____			
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 10,000⁰⁰
Grand Total of All Schedules 1A
(Complete on last page of Schedule) 10,000⁰⁰
Enter this total on

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 138276
 2. Committee Name Friends of Ren Trombly

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>American Graphics Printing Co</u> Address <u>34895 Groesbeck Hwy</u> <u>Clinton Twp, MI 48035</u> ☐ Fund Raiser	Purpose: <u>Printing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9-18-20</u> Date	<u>\$ 1628.58</u>
Expenditure #2 Name <u>Mass Mailing</u> Address <u>35468 Mound Rd</u> <u>Steering Heights, MI 48310</u> ☐ Fund Raiser	Purpose: <u>Mailing Services</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9-26-20</u> Date	<u>\$ 527.65</u>
Expenditure #3 Name <u>Postmaster</u> Address <u>711 North Glenwood</u> <u>Rentice, MI 48232</u> ☐ Fund Raiser	Purpose: <u>Postage</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9-26-20</u> Date	<u>\$ 2017.30</u>
Expenditure #4 Name <u>4imprint</u> Address <u>101 Commerce St.</u> <u>Oshkosh, WI 54901</u> ☐ Fund Raiser	Purpose: <u>Magnet Clip</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10-8-20</u> Date	<u>\$ 1,173.83</u>
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 \$ 347.36

Grand Total of all Schedules 1B
 (Complete on last page of Schedule) \$ 347.36

Enter this total
 on line 8a of



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138276

2. Committee Name Friends of Ron Trombly

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 endorser 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: <u>Ronald J Trombly Jr</u> <u>5252 County line</u> <u>Lenox MI 48048</u>	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>9-1-20</u> 6. <u>Original Amount of Debt:</u> <u>\$ 10,000⁰⁰</u>	<u>N/A</u> \$ <u>0</u> \$ \$ \$ \$	\$ <u>0</u>	\$ <u>10,000⁰⁰</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #2 Corp? ☐ Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</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> _____ \$ _____	\$ \$ \$ \$ \$	\$ _____	\$ _____ ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt)

\$10,000⁰⁰

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

\$10,000⁰⁰

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.