

## MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

CANDIDATE COMMITTEE
COVER PAGE

FILED
21FEB-2 PH 3: 07

FOR OFFICIAL USE ONLY

COVERFACE	•	W DO CFELL			
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by andidate.	3. This Statement covers From	10/21/20	to 12/31/2	20
1. Committee I.D. Number	<del>:</del>	4. Candidate Last Name	First	Name:	M.I
138477		Taylor	Michael		C.
		4a. Office Sought Including Dis	trict # or Community	Served (If appl	licable)
2. Committee Name		Mayor of Sterling Heig	hts		
Committee to Elect Michael C.	Taylor	4b. County of Residence MA	COMB	· ·	
5. Committee's Mailing Address		6. Treasurer's Name & Reside	ntial Address		
14076 Red Pine Dr.		Michael C. Taylor			
Sterling Heights, MI 48313		14076 Red Pine Dr.		•	
	•	Sterling Heights, MI	48313		
4556) 666 6566			•	•	
Area Code and Phone (586) 822-3500 If the address in this box is different from the committee of the committ	ittee	· ·			•
mailing address on the Statement of Organization, r be sent to this address by the filing official.	mail may	Area Code & Phone (586) 82	22-3500		
7. Treasurer's Business Address		8. Designated Record Keeper Designated Record Keeper)		ss (If the commi	ttee has a
		Jacob San Carlotte			
·					
		, .			• .
· · ·					•
-					
Area Code and Phone		Area Code and Phone			
9. TYPE OF STATEMENT	Beguired Of	NLY if candidate	9e. Dissolution	of Candidate Co	ommittee
9a. Pre-Election OR 9b. Post-Election		ballot for the	by the committee	to the candidate	rtify any outstanding debt or his or her spouse is here
Pre-Election or Post-Election Statement relates to:	[ ] (t. O	t-ut.	the committee. The	ne committee ha	o longer collectible from is no oustanding assets,
Primary	July Quar	eny	owes no lates fees	or has any ous	tanding debt.
General	October C	Quarterly	Further, if the diss	olution cannot b	e granted, that this be rting Waiver.
Convention			considered a requi	est for the Repo	rting Waiver.
Special	9c. 🖂 .	2020	·	,	
	Annua	al Statement (2020 ) Coverage Year	Effective	e date of dissolu	tion
School	Amer	ndment to Campaign Statement		<del></del>	
Caucus	(Com	plete Item 9a, 9b, 9c or 9e to	Note: The disposi	tion of residual f	unds must be reported on
·	amen	ite which Statement is being ded.)	Schedule 1B and	the Summary P	age.
Date of Election, Convention or Caucus					
Date of Election's Confestition of Cardina		· ·			
				•	
·		· ·			
10. Verification: I\We certify that all reasonable dilig	ence was used	in the preparation of this statem	ent and attached so	hedules (if any)	and to the best of
my/our knowledge and belief the contents are true,	accurate and c	omplete.		-, , <b>. .</b> , <b>.</b>	
Current Treasurer or Michael C. Ta	avlor	Man X	J-1	Fe	bruary 2, 2021
Designated Record keeper Type or Print Name	.,	Signature		— Date	
. Type of their regime	•	12V			
Candidate Michael C. Taylor		Mus Ke	٤	Date	ebruary 2, 2021
Type or Print Name	•	Signature	1		

1. Committee I.D. Number 138477

## SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Michael C. Taylor

CANDIDATE COMMITTEE	2. Committee Name	
RECEIPTS 3. Contributions	Column I This Period	Column II Cumulative this election cycle
	(3a.) \$ 0.00	
a. Itemized (Schedule 1A - Column 6)	•	,
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE (3c.) \$ \$0.00	(18.) \$ \$0.00
c. Subtotal of "Contributions"		(19.) \$ \$0.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$0.00	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$0.00	(20.) \$ \$0.00
N-KIND CONTRIBUTIONS & EXPENDITURES	· · · · · · · · · · · · · · · · · · ·	
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$1,149.03	(21.) \$ \$0.00
7. in-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
3. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$1,222.16	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	
O. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9:) \$ \$1,222.16	(23.) \$ \$311.33
NCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ \$0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ \$0.00	,
(Add Line 10a + Line 10b)  DEBTS AND OBLIGATIONS	(11.) \$ \$0.00	(24.) \$ \$0.00
12. Debts and Obligations	(12a.) <b>\$_\$4,526.84</b>	
a. Owed by the Committee (Schedule 1E)		
b. Owed to the Committee (Schedule 1E)	(12b.) \$ \$0.00	
13. Ending Balance of last report filed	BALANCE STATEMENT (13.) \$ \$28,039.53	
(Enter zero if no previous reports have been filed.)  14. Amount received during reporting period	(14.) + \$ \$0.00	
(Line 5, Total Contributions & Other Receipts)	(15.) = \$ <u>\$28,039.53</u>	
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(16.) - \$ \$1,222.16	
(Add lines 9 and 11) 17. ENDING BALANCE	*** ***	
(Subtract line 16 from line 15)	(17.) \$ \$26,817.37	•



## ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 138477

CAND	DATE (	COMM	ITT	EE

2. Committee Name CTE Michael C. Taylor

CANDIDA I E COMP	III I E 2. Continue value	
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 For Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: Michael C. Taylor	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others.	\$349.03 <sub>\$</sub>
14076 Red Pine Dr. Sterling Heights, MI 48313 If over \$100.00 cumulative, please provide: Occupation: Attorney	Goods or Services Purchased by Candidate or Others- LOAN  Description Vehicle Expense - 607 Miles on Personal Vehicle @ \$0.575/mile	
Employer Name & Business Address:	5. Date Of Receipt: 12/31/20	
Kirk, Huth, Lange & Badalamenti, PLC 19500 Hall Rd., Suite 100 Clinton Township, MI 48038	6. Vendor Name & Address:  Michael C. Taylor 14076 Red Pine Dr. Sterling Heights, MI 48313	ck for Memo Itemization Type
Contribution #2 PAC Receipt? Yes Name & Address Michael C. Taylor	4. ☐ Endorsement or Guarantee of Bank Loan ☐ Goods Donated or Loaned ☐ Services Donated	.00 s
14076 Red Pine Dr. Sterling Heights, MI 48313	Goods or Services Purchased by Candidate or Others-LOAN	· · · · · · · · · · · · · · · · · · ·
If over \$100.00 cumulative, please provide:  Occupation: Attorney  Employer Name & Address:	Description Cell Phone Expense  5. Date Of Receipt: 12/31/20	
Same	6. Vendor Name & Address:  Verizon Wireless , Ciio 1095 Ave of Americas New York, NY 10013	ck Here for Memo Itemization
Fund Raiser Contribution		
Contribution #3 PAC Receipt? Yes Name & Address:	4.  Endorsement or Guarantee of Bank Loan  Goods Donated or Loaned Services Donated \$ 60	00s
Michael C. Taylor 14076 Red Pine Dr. Sterling Heights, MI 48313	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN	
If over \$100.00 cumulative, please provide:  Occupation: Attorney	Description Cable/Internet Expense	
Employer Name & Address:	5. Date Of Receipt: 12/31/20 6. Vendor Name & Address:	
Same	Comcast 1701 JFK Boulevard	ck Here for Memo Itemization
Fund Raiser Contribution	Philadelphia, PA 19103	
1 It will raise Combination	Page Subtotal	\$1,149.03
	Grand Total of all Schedules 1-lk (Complete on last page of Schedule)	\$1,149,03

Enter this total on line 6 of Summary Page



## SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

138477

2. Committee Name CTE Michael C. Taylor 3. Name and address of person or vendor to whom paid 4. Purpose (Required Information) 5. Date 6. Amount Expenditure #1 Name Costco 10/30/20 Purpose: Office Supplies / Paper Date Address 45460 Market St. Click Here for Memo Itemization Type Shelby Twp, MI 48315 Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #2 Name Michael C. Taylor 12/31/20 s 1149.03 Reimbursement, In-Kind Contribution Loa Address 14076 Red Pine Dr. Memo Itemization Below Sterling Heights, MI 48313 Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #3 Name See Schedule 1-IK Loans from Candidate Expenditure 2 is repayment of in-kind loans made by the Click Here for Memo Itemization Type candidate to the committee, as described on Schedule Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #4 Name Address Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #5 Name Address Purpose:

Subtotal this page

Click Here for Memo Itemization Type:

\$1,222,16

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

Check box if this expenditure is payment of

debt or obligation reported on previous

statement

\$1,222.16

Enter this total on line 8a of Summary Page

•	1	1
Page		of

Fund Raiser



<b>DEBTS AND</b>	OBLIC	<b>SAT</b>	IONS
SCHE	DULE	1E	

1. Committee I.D. Number 1

138477

CANDIDATE COMMITTEE 2.0	Committee Name CIEMIC	chael C. Taylor		· .
This Schedule Hernizes:		<del></del>	<del></del>	<del></del>
a Chebis and abiligations award by or forgiven the con (Che	numities OR b. Deb	is and obligations owed Igo	r forgiven by the co	mmilloe.
3. Name and Meilling 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 enough of each payment	8, Cumulative payment to date on debt	9. Cutstanding Balance of close of this period (Ilem 6 minus from 5)
Oved to or by:  Taylor, Michael C.  14076 Red Pine Dr.  Sterling Heights, MI 48313	5. Date Debt Was Incurred: 08/14/09  5. Original Amount of Debt: \$ 75.51	\$ 	\$ <u>0.00</u>	3_75.51
If bank toan, name of endorser or guarantor:  Debt #2 Corp? Yes		Amo	uni Endorsect \$	
Owed to or by:  Taylor, Michael C.  Same  If bank loss, name of endorser or guarantor.	5. Date Debt Was Jacourred: 8/15/09 6. Ottoinel Amount of Debt: \$ 14.30	\$	\$ 0.00	\$_14.30
Date #3 Corp? Yes Owed to or by: Taylor, Michael C. Same	4. Type: In-Kind Loan 5. Date Debt Was Incurred: 8/16/09 6. Original Amount of Debt \$ 115.60	\$\$	\$ · 0.00	\$_115.80 FORGIVEN
If bank loan, name of endorser or gustantor;	· · · · · · · · · · · · · · · · · · ·	Arr	curt Endorsed: \$_	
(Cr	amplete on tast page of Schedule s	- ·	Oulstanding debit of all Schedules 15 to the committee)	\$205.41
A debt or obligation must be shown on this Schedu this Compaign Statement or it was forgiven during t	de if there was an outstanding ar the period covered by this Camp	nount owed on it at the ck algn Statement	osing date of	on line 12a "owed by" or line 12b "owed to" of the Summary Page

Page 1 o 5



DEB.	S	AND	OBL	GAT	IONS
	_	At res			

138477

CANDIDATE COMMITTEE  This Schedule kernizes:  a Debts and obligations owed by ar forgiven the con	amittee OR b. Deb	is and obligations owed jo	r forgiven by the co	mmittee.
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check but to indicate whether debt is ewed 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) 6. Indicate date debt was incurred 6. Indicate diginal amount of debt	7. Date and amount of each payment	8. Cumulativa: payment to deb on debt	8. Outstanding Balance at clos of this period (item 6 minus item 8).
Comp? Yes Cwed to or by: Taylor, Michael C. 14076 Red Pine Dr. Sterling Heights, MI 48313	4. Type: In-Kind Loan 5. Date Pebt Wes Incurred: 09/08/09 8. Original Amount of Debt: 5 550.00	\$\$	\$ <u>0.00</u>	\$ 550.00
if bank loan, name of endorser or guarentor.		Anx	ount Endorsed: \$	·
Owed to or by:  Taylor, Michael C.  Same	4. Type: In-Kind Loan 5. Date Nebt Was lacgred: 10/2/09 6. Original Amount of Debt: 5. 1107.82	\$ \$ \$ \$ \$	\$ 0.00	\$ 1107,82
Oebt#3 Corp? Yes	In-Kind Loan	An	ount Endorsed: 5	
Owed to a by: Faylor, Michael C. Same	4. Type: In-Kind Loan 5. Pate Debt Was Incurred: 10/1/09 6. Original Amount of Debt: 5. 62.97	\$ \$ \$ \$	\$ 0.00	\$_62.97
If bank loan, name of endorser or guarantor:		An	ount Endoraed: \$_	
(Co	mplete on last page of Schedule s	(20net Tetral a	Outstanding debit) of all Schedules 1E to the committee)	\$1,720.79

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

by" or the 12b "owed to" of the Summery Page

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DEBT	S AND	OB	UG.	ATI	ons
	DOLLE	min.	E 4	=	

Committee LD, Number 1384

138477

SCHEDULE 1E	OTE MIA	hool C Taylor		
CANDIDATE COMMITTEE 2.Co	oramities Name CTE Mic	naero, raylor		<del></del>
This Schedule territors:				
a Debts and obligations owed by or forgiven the comm (Chec	nitice OR b. Debt k either s or b. Use only for the pu	s and obligations owed <u>to</u> or	forgiven by the con	milas.
3. Name and Mailing Address of person, vendor or financial lastitution 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 guarantom, 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	Outstanding     Balance at close     of this period     (Ham 6 minus,     item 8)
Debt #1 Corp? Yes	4. Typs: In-Kind Loan			
Taylor, Michael C. 14076 Red Pine Dr. Sterling Heights, MI 48313	5. Date Debt Was Incorred: 07/06/11 6. Original Amount of Debt	\$\$ \$	s <u>0.00</u>	\$ 556.5 FORGIVEN
If bank loss, name of endorser or guarantor:		Are	ount Endorsed: \$ -	<u> </u>
Debt #2 Corp? Yes Owed to or by:	4. Type: In-Kind Loan	\$		
Taylor, Michael C. Same	S. <u>Date Debt Was Incurred</u> : 9-7-11	<u> </u>		• 1533.82
	6. Original Amount of Debt \$ 1533.82	\$	\$ 0.00	
		3		FORGIVEN
If bank loan, name of endorser or guaranter:		An	nount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type In-Kind Loan	\$		
Taylor, Michael C.	S. Date Dabe Was Incurred:	\$		
Same	9-29-11 6. Original Amount of Debt		\$ 0.00	s_130
	s 130	3	· V	FORGIVEN
If bank tom, name of endorser or guerantor:		A	mount Endorsed: §	

Page Sublotal (Outstanding debt) \$2,220.32

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

er this total

A debt or obligation must be shown on this Schedule II 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.

enter this look on line 12s fewed by ar line 12b fewed to of the Summary Page

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	1. Committee I.D. Number 138477								
SCHEDULE 1E  CANDIDATE COMMITTEE 2.0	2. Committee Name CTE Michael C. Taylor								
This Schadule lierrizes:		· · · · · · · · · · · · · · · · · · ·							
a $\checkmark$ Debts and obligations owed by or forgiven the con (Cha	nmittee OR b. Debt eck either e or b. Use only for the pu	s and obligations owed <u>to</u> o	forgiven <u>by</u> the cor	millet.					
3. Name and Malling 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 andorsers 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 sach payment	8. Cumulative payment to date on debt	9. Outstanding Belance at class of this period (from 6 minus item 5)					
Debt #1 Corp? Yes Owed to ar by:	4. Type: In-Kind Loan	\$							
Taylor, Michael C. 14076 Red Pine Dr. Sterling Heights, MI 48313	5. Date Debi Was Incurred: 09/07/11		g 0.00	ş <u>159.00</u>					
	6. Original Amount of Debt: \$ 159.00	<u>\$</u>	<u> </u>	FORGIVEN					
If bank loan, name of endorser or guarantor:		An	unt Endorsed: \$ _						
Debt #2 Cup? Yes Owed to or by:	4. Type: In-Kind Loan	\$		i.					
Taylor, Michael C. Same	5. Date Debt Was Incarred:  8-7-11 6. Original Amount of Debt  \$ 23.30	\$ \$ \$	\$ <u>0.00</u>	\$ 23.30					
If bank loss, name of enforcer or guarantor.		Ar	nount Endorsed: \$_						
Debt Ki Corpy Yes Owed to or by:	4. Type: In-Kind Loan								
Taylor, Michael C. Same	5. Date Debt Was Incurred: 9-7-11 8. Original Amount of Dabt:	\$\$	s 0.00	s 103.68					
	103.68	<u> </u>		FORGIVEN					
If benicion, name of endorser or guarantor:		A	mount Endorsed: &						
Page Subtotal (Outstanding debt)									
	Complete on last page of Schedule	Grand Total showing amounts owed by	of all Schedules 15 or to the committee)	Enter this total on line 12s "ower					

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 longiven during the period covered by this Campaign Statement.

try" or line 12b "owed to" of the Summery Page

Page 4 d 5



Debts	AND	OBL	GA	TIO	NS

138477 1. Committee I.D. Number SCHEDULE 1E 2. Committee Name CTE Michael C. Taylor CANDIDATE COMMITTEE This Schedule itemizer: Debis and obligations owedby or forgiven the committee e committee CR b. Debts and obligations owed to or largiven by the committee. (Check either a or b. Use only for the purpose checked.) 3. Name and Meiling Address of person, vendor or financial institution to whom debt is owed. 4. Type of Obligation 9. Ouistanding Balance at close 7. Date and amount of 8. Cumulative (Description) eachpayment payment to date on debt 6. indicate date debt was of this period Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please incurred (liem 8 minus 6. Indicate orlginel amount Item 8) provide information regarding the endorsers or of debt guerantora, Ifany. Debt #1 4. Type: In Kind Loan Owed to or by: Michael C. Taylor 5. Date Debt Was Incurred: 14076 Red Pine Dr. 09/29/11 Sterling Heights, MI 48313 94.34 8. Original Amount of Debt: **TFORGIVEN** If bank loan, name of endorser or guarantor: Amount Endorsed: \$ Debt #2 4. Type: Owed to ar by: 5. Date Debt Was Incurred: 6. Original Amount of Debt: FORGIVEN if bank loan, name of endorser or guaranter: Amount Endorsed: \$ Debt#3 Com? 4. Type: Owed to or by: 5. Date Debt Was Incurred: 6. Original Amount of Debt: FORGIVEN If bank loan, name of endorser or guarantor. Amount Endorsed: \$ \$94.34 Page Subtotal (Outstanding debt

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

\$4,526,84 Enter this total

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

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