



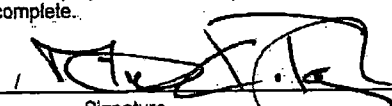
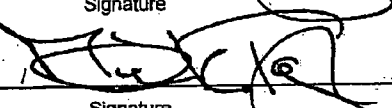
MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

CANDIDATE COMMITTEE
COVER PAGE

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

FILED
21 FEB -2 PM 3:07
MACOMB COUNTY CLERK
JAMES CLEMENS, MICHIGAN

FOR OFFICIAL USE ONLY

1. Committee I.D. Number 138477		3. This Statement covers From: <u>10/21/20</u> to <u>12/31/20</u>	
2. Committee Name Committee to Elect Michael C. Taylor		4. Candidate Last Name: Taylor First Name: Michael M.I.: C. 4a. Office Sought Including District # or Community Served (if applicable) Mayor of Sterling Heights 4b. County of Residence MACOMB	
5. Committee's Mailing Address: 14076 Red Pine Dr. Sterling Heights, MI 48313 Area Code and Phone <u>(586) 822-3500</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 Michael C. Taylor 14076 Red Pine Dr. Sterling Heights, MI 48313 Area Code & Phone <u>(586) 822-3500</u>	
7. Treasurer's Business Address Area Code and Phone _____		8. Designated Record Keeper's Name and Address (if the committee has a Designated Record Keeper) Area Code and Phone _____	
9. TYPE OF STATEMENT 9a. <input type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus Date of Election, Convention or Caucus _____		Required ONLY if candidate is not on the ballot for the current year. <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly 9c. <input checked="" type="checkbox"/> Annual Statement (2020) Coverage Year 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)	
		9e. Dissolution of Candidate Committee <input type="checkbox"/> 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 Michael C. Taylor Type or Print Name		 Date February 2, 2021	
Candidate Michael C. Taylor Type or Print Name		 Date February 2, 2021	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 138477

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Committee to Elect Michael C. Taylor

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>0.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$0.00</u>	(18.) \$ <u>\$0.00</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>\$0.00</u>	(20.) \$ <u>\$0.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$1,149.03</u>	(21.) \$ <u>\$0.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u></u>	(22.) \$ <u></u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$1,222.16</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u></u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u></u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>\$1,222.16</u>	(23.) \$ <u>\$311.33</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>\$4,526.84</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>\$28,039.53</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$0.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$28,039.53</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$1,222.16</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$26,817.37</u>	



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 138477

2. Committee Name CTE Michael C. Taylor

CANDIDATE COMMITTEE

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? <input type="checkbox"/> Yes Name & Address: Michael C. Taylor 14076 Red Pine Dr. Sterling Heights, MI 48313 If over \$100.00 cumulative, please provide: Occupation: <u>Attorney</u> Employer Name & Business Address: Kirk, Huth, Lange & Badalamenti, PLC 19500 Hall Rd., Suite 100 Clinton Township, MI 48038 <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Vehicle Expense - 607 Miles on Personal Vehicle @ \$0.575/mile</u> 5. Date Of Receipt: <u>12/31/20</u> 6. Vendor Name & Address: Michael C. Taylor 14076 Red Pine Dr. Sterling Heights, MI 48313	\$ <u>\$349.03</u>	
Contribution #2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Michael C. Taylor 14076 Red Pine Dr. Sterling Heights, MI 48313 If over \$100.00 cumulative, please provide: Occupation: <u>Attorney</u> Employer Name & Address: Same	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Cell Phone Expense</u> 5. Date Of Receipt: <u>12/31/20</u> 6. Vendor Name & Address: Verizon Wireless 1095 Ave of Americas New York, NY 10013	\$ <u>200</u>	
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Michael C. Taylor 14076 Red Pine Dr. Sterling Heights, MI 48313 If over \$100.00 cumulative, please provide: Occupation: <u>Attorney</u> Employer Name & Address: Same	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Cable/Internet Expense</u> 5. Date Of Receipt: <u>12/31/20</u> 6. Vendor Name & Address: Comcast 1701 JFK Boulevard Philadelphia, PA 19103	\$ <u>600</u>	

Page Subtotal \$1,149.03

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule) \$1,149.03

Enter this total
on line 6 of Summary
Page



ITEMIZED EXPENDITURES
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 <u>Costco</u> Address <u>45460 Market St.</u> <u>Shelby Twp, MI 48315</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Office Supplies / Paper</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/30/20</u> Date	\$ <u>73.13</u>
Expenditure #2 Name <u>Michael C. Taylor</u> Address <u>14076 Red Pine Dr.</u> <u>Sterling Heights, MI 48313</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Reimbursement; In-Kind Contribution Loan</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/31/20</u> Date	\$ <u>1149.03</u>
Expenditure #3 Name <u>See Schedule 1-IK Loans from Candidate</u> Address <u>Expenditure 2 is repayment of in-kind loans made by the candidate to the committee, as described on Schedule 1-IK.</u> <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #4 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page **\$1,222.16**

Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$1,222.16**

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 138477
2. Committee Name CTE Michael C. Taylor

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 guarantor, 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) <input type="checkbox"/> FORGIVEN
Debt #1 Owed to or by: Corp? <input type="checkbox"/> Yes Taylor, Michael C. 14076 Red Pine Dr. Sterling Heights, MI 48313	4. Type: <u>In-Kind Loan</u> 5. Date Debt Was Incurred: <u>08/14/09</u> 6. Original Amount of Debt: <u>\$ 75.51</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 75.51 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Owed to or by: Corp? <input type="checkbox"/> Yes Taylor, Michael C. Same	4. Type: <u>In-Kind Loan</u> 5. Date Debt Was Incurred: <u>8/15/09</u> 6. Original Amount of Debt: <u>\$ 14.30</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 14.30 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Owed to or by: Corp? <input type="checkbox"/> Yes Taylor, Michael C. Same	4. Type: <u>In-Kind Loan</u> 5. Date Debt Was Incurred: <u>8/16/09</u> 6. Original Amount of Debt: <u>\$ 115.60</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 115.60 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Page Subtotal (Outstanding debt)				\$205.41
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				

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.

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS

SCHEDULE 1E

CANDIDATE COMMITTEE

1. Committee I.D. Number 138477

2. Committee Name CTE Michael C. Taylor

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 guarantor, if any.	4. Type of Obligation (Description) 5. Date Debt Was Incurred 6. 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) <input type="checkbox"/> FORGIVEN
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Taylor, Michael C. 14076 Red Pine Dr. Sterling Heights, MI 48313	4. Type: <u>In-Kind Loan</u> 5. Date Debt Was Incurred: <u>09/08/09</u> 6. Original Amount of Debt: <u>\$ 550.00</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 550.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Taylor, Michael C. Same	4. Type: <u>In-Kind Loan</u> 5. Date Debt Was Incurred: <u>10/2/09</u> 6. Original Amount of Debt: <u>\$ 1107.82</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 1107.82 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Taylor, Michael C. Same	4. Type: <u>In-Kind Loan</u> 5. Date Debt Was Incurred: <u>10/1/09</u> 6. Original Amount of Debt: <u>\$ 62.97</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 62.97 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Page Subtotal (Outstanding debt)				\$1,720.79
Grand Total of all Schedules 1E (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 the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 138477
2. Committee Name CTE Michael C. Taylor

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 guarantor, 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? <input type="checkbox"/> Yes Owed to or by: Taylor, Michael C. 14076 Red Pine Dr. Sterling Heights, MI 48313	4. Type: <u>In-Kind Loan</u> 5. Date Debt Was Incurred: <u>07/08/11</u> 6. Original Amount of Debt: <u>\$ 556.60</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 556.6 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Taylor, Michael C. Same	4. Type: <u>In-Kind Loan</u> 5. Date Debt Was Incurred: <u>9-7-11</u> 6. Original Amount of Debt: <u>\$ 1533.82</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 1533.82 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Taylor, Michael C. Same	4. Type: <u>In-Kind Loan</u> 5. Date Debt Was Incurred: <u>8-28-11</u> 6. Original Amount of Debt: <u>\$ 130</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 130 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt)

\$2,220.32

Grand Total of all Schedules 1E
(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 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.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 138477
2. Committee Name CTE Michael C. Taylor

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 guarantor, 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? <input type="checkbox"/> Yes Owed to or by: Taylor, Michael C. 14076 Red Pine Dr. Sterling Heights, MI 48313	4. Type: <u>In-Kind Loan</u> 5. Date Debt Was Incurred: <u>09/07/11</u> 6. Original Amount of Debt: <u>\$ 159.00</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 159.00 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Taylor, Michael C. Same	4. Type: <u>In-Kind Loan</u> 5. Date Debt Was Incurred: <u>8-7-11</u> 6. Original Amount of Debt: <u>\$ 23.30</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 23.30 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Taylor, Michael C. Same	4. Type: <u>In-Kind Loan</u> 5. Date Debt Was Incurred: <u>9-7-11</u> 6. Original Amount of Debt: <u>\$ 103.68</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 103.68 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

\$285.98

Grand Total of all Schedules 1E

(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.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS

SCHEDULE 1E

CANDIDATE COMMITTEE

1. Committee I.D. Number

138477

2. Committee Name

CTE Michael C. Taylor

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 guarantor, 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 8 minus Item 6)
Debt #1 Owed to or by: Corp? <input type="checkbox"/> Yes Michael C. Taylor 14076 Red Pine Dr. Sterling Heights, MI 48313	4. Type: In Kind Loan 5. Date Debt Was Incurred: 09/29/11 6. Original Amount of Debt: \$ 94.34	\$ \$ \$ \$ \$	\$	\$ 94.34 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Owed to or by: Corp? <input type="checkbox"/> Yes	4. Type: _____ 5. Date Debt Was Incurred: _____ 6. Original Amount of Debt: _____ \$ _____	\$ \$ \$ \$ \$	\$	\$ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Owed to or by: Corp? <input type="checkbox"/> Yes	4. Type: _____ 5. Date Debt Was Incurred: _____ 6. Original Amount of Debt: _____ \$ _____	\$ \$ \$ \$ \$	\$	\$ <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

\$94.34

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

\$4,526.84

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 if it was forgiven during the period covered by this Campaign Statement.