

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 the treasurer (or designated record keeper) and ca	signed by adidate	3 This Statement covers From:	2-20-2020 10 10-202020	_
1. Committee I.D. Number		4. Candidate Last Name	First Name M.I.	ᅦ
139728		Yanez	Henry J	
2. Committee Name		4a. Office Sought Including District # or Community Served (If applicable) Board Momber - Local		
CTE Henry Yanez				
		4b County of Residence MACOMB		
5. Commiltee's Mailing Address CTE Henry Yanez		6 Treasurer's Name & Residential Address		
P.O. Box 7213		Henry Yanez 14052 Bery Dr.		
Sterling Heights, MI. 48311		Sterling Heights, Ml. 48312		
		Coming Hoighto, Wil.		
Area Code and Phone (586) 321-3058				- [
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		Area Code & Phone (586) 321-3058		
7. Treasurer's Business Address		8 Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) N/A		
N/A				
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Area Code and Phone		Area Code and Phone		
9 TYPE OF STATEMENT		<u> </u>	9e. Dissolution of Candidate Committee	
9a. Pre-Election OR 9b. Post-Election	Required ONLY if candidate is not on the ballot for the current year		By checking this item I/We certify any outstanding deb by the committee to the candidate or his or her spouse is h	l ere
Pre-Election or Post-Election Statement relates to.			by discharged and forgiven, and no longer collectible from the committee. The committee has no ouslanding assets.	
Primary	July Quar	terly	owes no lates fees or has any austanding debt	
General	X October (Duarterly .	Further, if the dissolution cannot be granted, that this be	
			considered a request for the Reporting Waiver	
Convention	l			
Special	^{9€} □Annu	al Statement ()	Effective date of dissolution	
School	F-1-	Coverage Year		
Caucus	(Con	ndment to Campaign Statement oplote Item 9a, 9b, 9c or 9c to ate which Statement is being	Note: The disposition of residual funds must be reported of Schedule 18 and the Summary Page	n
	amer	nded)	Computer to butting animal case	
Date of Election, Convention or Caucus				
	1			
10. Verification: I/We certify that all reasonable diffic	ence was use	d in the preparation of this statem	ent 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 Harry Vant-2, Apriler Maries 2/22/2022				
Designated Record keeper TENT (ARVET) Date Type or Print Name Signature				
1/2017				
Candidate HENRY YANEZ		1 trong yang	2 Date ALLIANTE	
Type or Print Nam	e	Signaly/re_(/(<i>)</i>	