

CANDIDATE COMMITTEE COVER PAGE

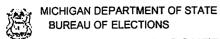
FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by Indidate.	3. This Statement covers From	^{1:} 07/19/21 to 08/2	23/21				
1. Committee I.D. Number		Candidate Last Name	First Name	M.I.				
138477		Taylor	Michael	C.				
		4a. Office Sought Including District # or Community Served (If applicable)						
2. Committee Name		Mayor of Sterling Heig	Mayor of Sterling Heights					
Committee to Elect Michael C.	Taylor	4b. County of Residence MACOMB						
5. Committee's Mailing Address		6. Treasurer's Name & Reside	ential Address					
14076 Red Pine Dr.		Michael C. Taylor						
Sterling Heights, MI 48313		14076 Red Pine Dr.	14076 Red Pine Dr.					
		Sterling Heights, MI	48313					
Area Code and Phone (586) 822-3500 If the address in this box is different from the comminating address on the Statement of Organization, not be sent to this address by the filing official.		Area Code & Phone (586) 82		13 2 15 2 25 0 0 0 0				
7. Treasurer's Business Address		8. Designated Record Keeper Designated Record Keeper)		miltee hasa? -2 PM 3: 44				
Area Code and Phone		Area Code and Phone						
9. TYPE OF STATEMENT	Boquired Of	NLY if candidate	9e. Dissolution of Candidate	Committee				
9a. Pre-Election OR 9b. Post-Election	is not on the	e ballot for the	By checking this item I/We	certify any outstanding debt				
Pre-Election or Post-Election Statement relates to:	current year	:	by the committee to the candidate or his or her spouse is here by discharged and forgiven, and no longer collectible from					
	July Quart	terly	the committee. The committee owes no lates fees or has any o					
Primary		S da . da		· ·				
General	October C	quarterly	Further, if the dissolution canno considered a request for the Re	ot be granted, that this be				
Convention			considered a request for the re	sporting vvalver.				
Special	9c. Annua	al Statement ()						
School		Coverage Year	Effective date of diss	olution				
Caucus	9d. Amer	ndment to Campaign Statement						
		nplete Item 9a, 9b, 9c or 9e to ate which Statement is being nded.)	Note: The disposition of residu Schedule 1B and the Summan					
Date of Election, Convention or Caucus								
08/03/21								
10. Verification: I\We certify that all reasonable diligingly who will be and belief the contents are true.	ence was used	in the preparation of this statem	nent and attached schedules (if a	ny) and to the best of				
Current Treasurer or Designated Record keeper Michael C. Ta		Mac	Date -	August 31, 2021				
Type or Print Name		Signature	~~~					
Candidate Michael C. Taylor		Mala	Date _	August 31, 2021				
Type or Print Name		Signature	<u> </u>					

1. Committee I.D. Number 138477

SUMMARY PAGE CANDIDATE COMMITTEE

CANDIDATE COMMITTEE	Oak-ma l	Column II
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions	05 050 00	
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 25,250.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$	(18.) \$ \$64,497.84
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$25,250.00	(20.) \$ \$64,497.84
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$1,125.00	(21.) \$ \$1,125.00
7. In-Kind Expenditures (Schedule 18-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$7,357.81	_
b. Itemized Get-Out-the-Vote (Schedule 18-G)	(8b.) \$	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$7,357.81	(23.) \$ \$23,805.72
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ \$0.00	
b. Uniternized (less than \$50.01 each - no Schedule)	(10b.) \$ \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ \$0.00	(24.) \$ \$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ _\$4,526.84	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ _\$0.00	
	BALANCE STATEMENT	
 Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 	(13.) \$ \$49,817.30	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ \$25,250.00	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$_\$75,067.30	
 Amount expended during reporting period (Add lines 9 and 11) 	(16.) - \$ \$7,357.81	
17. ENDING BALANCÉ	¢67 700 40	
(Subtract line 16 from line 15)	(17.) \$ \$67,709.49	•



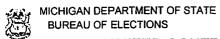
CANDIDATE COMMITTEE

1. Committee I.D. Number _____138477

2. Committee Name

Committee to Elect Michael C. Taylor

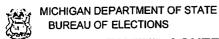
Enter contributor's name and address. If contribution is from an individual, enter last name, firs middle initial. Check box to indicate if contribution is from a Political Committee or an Independ Committee (PAC) Report all contributions regardless of amount.	
3. Contribution # 1 PAC Receipt? ✓ YES 4. Date of Receipt 07/22/21 Name & Address:	
A Better Michigan PAC 1100 W. Maple Rd., Troy, MI 48084	_{\$} 1000
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Employer	——
Business Address	<u></u>
Type of Contribution: Direct Loan from a person ✓ Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/22/21 Name & Address	
Cy Abdo 42550 Garfield Rd., Suite 104-A Clinton Township, MI 48038	<u>\$ 1000 </u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Attorney Employer Self-Employed	
Business Address 42550 Garfield Rd., Suite 104-A, Clinton Township, MI 48038	8
Type of Contribution: ☐ Direct ☐ Loan from a person ✓ Fund Raiser	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 07/22/21 Name & Address:	
Darren Dabbish 55127 Breton Woods Dr. Macomb, MI 48042	<u>\$ 2100</u>
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Owner Employer Med Farms	
Business Address 3843 N. Euclid Ave, Bay City, MI 48706	
Type of Contribution: Direct Loan from a person 🗸 Fund Raiser	
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/22/21 Name & Address	
Brandon Dabbish 50855 Bredenbury Dr. Macomb, MI 48044	_{\$} 2100 _{\$}
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Owner Employer Creative COnstruction Inno	ovations
Business Address 50855 Bredenbury Dr., Macomb, MI 48044	
Type of Contribution: Direct Loan from a person Fund Raiser	
Pa Grand Total of All Sch (Complete on last page o	
Page 1 of 10	line 3a of Summary Page.



CANDIDATE COMMITTEE

1. Committee I.D. Number ______138477

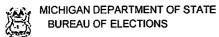
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07/22/21 Name & Address:		
Dennis Bostick 5408 Barrington Dr. Rochester, MI 48306	_{\$} 2100	\$
5. If over \$100.00 cumulative, please provide: Occupation Owner Employer John R. Spring Service	Click Here fo	r Memo Itemization
, , ,		
Business Address 1782 E. Maple, Troy, MI 48083 Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/22/21 Name & Address		
Latif Oram 3924 Wards Point Orchard Lake, MI 48324	<u>\$ 1000</u>	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Owner Employer Jam Sound Specialist		
Business Address 22304 Woodward, Ferndale, MI 48220		
Type of Contribution: ☐ Direct ☐ Loan from a person ✓ Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 07/22/21 Name & Address:		
Joseph Oram PO Box 252755 West Bloomfield, MI 48325	\$ 500	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Owner Employer Five Star Outdoor		
Business Address PO Box 252755, West Bloomfield, MI 48325		
Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/22/21 Name & Address		
Philip Ruggeri 55764 St. Regis Dr. Shelby Twp, MI 48315	_{\$} 500	_{\$_} 2000
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Attorney Employer Ruggeri & Associates		
Business Address 43231 Schoenherr Rd., Sterling Heights, MI 48313		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 2 of 10	\$4,100.00 Enter this total on line 3a of Summary Page.	-



CANDIDATE COMMITTEE

1. Committee I.D. Number ______138477

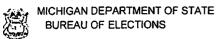
Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 07/22/21 Name & Address:		
Wassem Ayar 54371 Thorn Tree Ln Macomb, MI 48044 5. If over \$100.00 cumulative, please provide:	\$ 2100	\$or Memo Itemization
Occupation Owner Employer Urban Air Sterling Heights	Ollow Field IC	A MORIO ROTTIZATION
Business Address 12050 Hall Rd., Sterling Heights, MI 48313		
Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/22/21 Name & Address		
Michael C. Taylor 52440 Cheswick Ct. Shelby Twp, MI 48315	_{\$} 1000	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Retired Employer		
Business Address		
Type of Contribution: ☐ Direct ☐ Loan from a person ✓ Fund Raiser		
3. Contribution # 3 PAC Receipt? ✓ YES 4. Date of Receipt 07/22/21 Name & Address:		
Sterling Heights POA PAC PO Box 546 Sterling Heights, MI 48311	\$ 500 Click Here fo	\$r Memo Itemization
5. If over \$100.00 cumulative, please provide:		
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/22/21 Name & Address		
Jared Maynard 35956 Vaugh St. Clinton Township, MI 48035 5. If over \$100.00 cumulative, please provide:	_{\$} 250	\$
Occupation Consultant Employer Self-Employed	Click Here fo	r Memo Itemization
Business Address 35956 Vaugh, Clinton Township, MI 48035		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule) Page 3 of 10	\$3,850.00 Enter this total on line 3a of Summan Page.	



CANDIDATE COMMITTEE

1. Committee I.D. Number ______138477

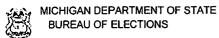
Enter contributor's name middle initial. Check box Committee (PAC) Repor	to indicate if contr	ibution is from a Politica		nter last name, first name, tee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	PAC Receipt?	YES 4. Date	of Receip	ot <u>07/22/21</u>		
Larry Campbell 6690 Vernmoor D Troy, MI 48098					_{\$_} 250	\$
5. If over \$100.00 cumu	• • •		, 21 Ca	mpholl	Click Here fo	or Memo Itemization
Occupation Real Esta		_ Employer Century				
Business Address 1186	E 12 Mile Rd.	, Madison Heights,	WII 480	1/1		
Type of Contribution:	Direct	Loan from a persor	✓	Fund Raiser		
Contribution #2 Name & Address	PAC Receipt?	YES 4. Date	of Receip	07/22/21		
Stephen Rabaut 16931 19 Mile Ro Clinton Township					_{\$} 250	\$
5. If over \$100.00 cumu		vide:			Click Here fo	r Memo Itemization
Occupation Attorney		Employer Self-Emp	loyed			
Business Address 1693	31 19 Mile Rd, (38		
Type of Contribution:	Direct	Loan from a person	√	Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YES 4. Date	of Recei	pt 07/22/21		
Art Ammori 248 E. Gunn Rd Oakland Townsh	ip, MI 48306				_{\$} 250	\$
5. If over \$100.00 cumu	•	vide:			Click Here to	r Memo Itemization
Occupation Builder		Employer Self-Em	ployed			
Business Address 248 E	Gunn, Oakland	Twp, MI 48306				,
Type of Contribution:	Direct	Loan from a persor	✓	Fund Raiser		
Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date	e of Rece	ipt 07/22/21		
Lucido for a Brigh 6306 26 Mile Rd. Washington, MI 4	, Suite 203 18094				_{\$} 250	\$
5. If over \$100.00 cumu	ılative, please pro	vide:			Click Here fo	r Memo Itemization
Occupation		_ Employer				
Business Address		. <u></u> .				
Type of Contribution:	Direct	Loan from a persor	ı √	Fund Raiser		
				Page Subtotal	\$1,000.00	
				and Total of All Schedules 1A lete on last page of Schedule)	Enter this total on	
Page of					line 3a of Summary Page.	,



CANDIDATE COMMITTEE

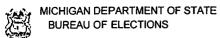
1. Committee I.D. Number _____138477

	ox to indicate if contr	ibuti	on is from a Political Con		nter last name, first name, ee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	PAC Receipt?		YES 4. Date of Re	ceip	07/22/21		
Stephen Pangor	İ						
8106 Rosebud L						, 250	450
Clarkston, MI 48	348					<u>\$_</u> ZJU	\$_ - 00
5. If over \$100.00 cum						Click Here fo	or Memo Itemization
Occupation Engineer			mployer AEW				. Mono nomization
Business Address 513	301 Schoenherr	Rd.	, Shelby Twp, MI 48	3315	5		
Type of Contribution:	Direct		Loan from a person	√	Fund Raiser		
Contribution #2 Name & Address	PAC Receipt?		'ES 4. Date of Re	ceipt	07/22/21		
Gordie Wilson 49572 Compass Chesterfield, MI						_{\$} 250	ş 450
5. If over \$100.00 cum		ride:				Click Here fo	or Memo Itemization
Occupation Engineer			ployer_AEW				
Business Address 513			, Shelby Twp, MI 48	3315	5		
Type of Contribution:	Direct	\neg	oan from a person	√	Fund Raiser		
Contribution # 3 Name & Address:	PAC Receipt?		YES 4. Date of Re	eceip	07/22/21		
Khoder Abdallah 38229 Pinebrook Sterling Heights	k Dr					§ 250	\$
5. If over \$100.00 cum		/ide:				Click Here fo	r Memo Itemization
Occupation Real Esta	ate	E	mployer Self-Employe	ed			
Business Address 3822		terl	ing Heights, MI 48310				
Type of Contribution:	Direct	_	Loan from a person	V	Fund Raiser		
Contribution # 4 Name & Address	PAC Receipt?		YES 4. Date of R	ecei	pt <u>07/22/21</u>		
Citizens for Mich 34205 Barrett Di Sterling Heights,	r. MI 48312					_{\$} 100	\$
5. If over \$100.00 cum	ulative, please pro	vide	:			Click Here fo	r Memo Itemization
Occupation		-	Employer				
Business Address							
Type of Contribution:	Direct		Loan from a person	\checkmark	Fund Raiser		
					Page Subtotal	\$850.00	
			(Co		nd Total of All Schedules 1A ete on last page of Schedule)	Enter this total on	
Page	_					line 3a of Summary Page.	,



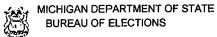
CANDIDATE COMMITTEE

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3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07/22/21 Name & Address:		
Avis Choulagh		
48528 Isola Dr	₂ 300	
Shelby Twp, MI 48315	\$	\$
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Attorney Employer Self-Employed		
Business Address 32059 Utica Rd., Fraser, MI 48026		
Type of Contribution:		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/22/21 Name & Address		
Adam Behrendt 7394 Sandy Creek Bloomfield Hills, MI 48301	_{\$} _200	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Attorney Employer Bodman	CHOK HEIG IOI	
Occupation Autority Employer Business Address 2901 St. Antoine, Detroit, MI 48226		
Type of Contribution: □ Direct □ Loan from a person ▼ Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 07/22/21 Name & Address:		
Louis Ciotti 30500 Northwestern Hwy, Suite 200 Farmington Hills, MI 48334	\$ 500	\$ Memo Itemization
5. If over \$100.00 cumulative, please provide:	CHOK HEIE IUI	WOME ROTHER BUILD
Occupation Real Estate Employer Landmark		
Business Address 30500 Northwestern Hwy, Suite 200, Farmington Hills, MI 48334		
Type of Contribution: ☐ Direct ☐ Loan from a person ✓ Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/22/21 Name & Address		
Michael Torres 5865 Jackelyn Ct Washington, MI 48094	_{\$} 250	\$
5. If over \$100.00 cumulative, please provide:	Click Here for	Memo Itemization
Occupation Owner Employer Torch Development		
Business Address 5865 Jackelyn, Washington, MI 48094		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal	\$1,250.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		
Page 6 of 10	Enter this total on line 3a of Summary Page.	



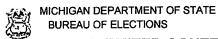
CANDIDATE COMMITTEE

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 all contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 07/22/21 Name & Address:	_	
Pashko Ujkic 38346 Phyllis Sterling Heights, MI 48312	_{\$} 400	_{\$} 800
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Owner Employer Dodge Park Coney Island		
Business Address 35252 Dodge Park, Sterling Heights, MI 48312		
Type of Contribution: ☐ Direct ☐ Loan from a person ✔ Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/22/21 Name & Address		
James Galloway 61624 Bunker Hill Washington, MI 48094	_{\$} 250	\$
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Owner Employer Jet's Pizza		
Business Address 37501 Mound Rd., Sterling Heights, MI 48310		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 07/22/21 Name & Address:	_	
Peter Torrice 32059 Utica Rd Fraser, MI 48026	_{\$} 250	\$
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Attorney Employer Self-Employed		
Business Address 32059 Utica Rd, Fraser, MI 48026		
Type of Contribution: Direct Loan from a person 🗸 Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt 07/22/21 Name & Address	-	
Thomas Murray 1048 Goodlette Rd N Naples, FL 34102	_{\$} 1000	\$
5. If over \$100.00 cumulative, please provide:	Click Here	for Memo Itemization
Occupation Real Estate Employer Self-Employed		
Business Address 1048 Goodlette Rd N, Naples, FL 34102		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtot	\$1,900.00	
Grand Total of All Schedules 1. (Complete on last page of Schedul	1	
Page _ 7 _ of _ 10 _	Page.	ω, ,



CANDIDATE COMMITTEE

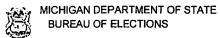
Enter contributor's name and address. If comiddle initial. Check box to indicate if contributions recommittee (PAC) Report all contributions re	ibution is from a Political Committ	nter last name, first name, ee or an Independent	6. Amount	Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? Name & Address:	YES 4. Date of Receip	07/22/21		
Eugene D'Agostini 38700 Van Dyke, Suite 200 Sterling Heights, MI 48312 5. If over \$100.00 cumulative, please prov	vide:		\$ 500	\$ 700
Occupation Builder	Employer Self-Employed		Click Here to	or Memo Itemization
Business Address 38700 Van Dyke, S	uite 200, Sterling Heights,	MI 48312		
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt? Name & Address	YES 4. Date of Receipt	07/26/21		
Shant Shirinian 23670 Ryan Rd. Warren, MI 48091			_{\$} _1000	\$
5. If over \$100.00 cumulative, please prov	vide:		Click Here fo	r Memo Itemization
Occupation Owner	Employer_Van-8 Collision			
Business Address 23670 Ryan Rd, Wa	arren, MI 48091			
Type of Contribution:	Loan from a person	Fund Raiser		
Contribution # 3 PAC Receipt? Name & Address:	YES 4. Date of Receip	ot <u>07/26/21</u>		
Dino Juncevic 52756 Blue Ridge Dr Shelby Township, MI 48316			\$ 2100	\$ r Memo Itemization
5. If over \$100.00 cumulative, please pro-			Click Here to	Memo Remization
Occupation Owner	Employer Utica Van Dyke	Towing		
Business Address 43500 Utica Rd., Sterl				
Type of Contribution: Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 PAC Receipt? Name & Address	YES 4. Date of Rece	ipt 07/26/21		
Roko Juncevic 52756 Blue Ridge Dr Shelby Township, MI 48316 5. If over \$100.00 cumulative, please pro	vido		_{\$} 1000	\$
	Employer Utica Van Dy	ke Towing	Click Here fo	r Memo Itemization
Occupation Owner				
Business Address 43500 Utica Rd, S	Sterling Heights, MI 4831	1		
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
8 , 10		Page Subtotal and Total of All Schedules 1A lete on last page of Schedule)	\$4,600.00 Enter this total on line 3a of Summar Page.	
Pageof			. 290.	



CANDIDATE COMMITTEE

1. Committee I.D. Number ______138477

SCHEDULE IA	Committee to Floot Michael C. Taylor
CANDIDATE COMMITTEE 2. Co	Committee to Elect Michael C. Taylor
Enter contributor's name and address. If contribution is from an individual, enter lamiddle initial. Check box to indicate if contribution is from a Political Committee or Committee (PAC) Report all contributions regardless of amount.	st name, first name, an Independent 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? YES 4. Date of Receipt 07, Name & Address:	/30/21
Daniel Rubino 19857 Emerald Ln Clinton Township, MI 48038 5. If over \$100.00 cumulative, please provide:	<u>\$ 250 </u>
Occupation Owner Employer Pilot Property Group	Click Here for Memo Itemization
Business Address 44400 Van Dyke, Sterling Heights, MI 48314	
	Raiser
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 07/3	30/21
Paul Manni 42778 Flis Dr Sterling Heights, MI 48314	_{\$} 250
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Manager Employer All Phones Wholesale	
Business Address 22850 Dequindre Rd, Warren, MI 48091	
Type of contributions	d Raiser
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 08/	04/21
Laura Taylor 52440 Cheswick Ct Shelby Township, MI 48315 5. If over \$100.00 cumulative, please provide:	\$ 500 \$ Click Here for Memo Itemization
Occupation Retired Employer	
Business Address	
	nd Raiser
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 08 Name & Address	/04/21
Daniel Bradley 13722 Bayview Dr Sterling Heights, MI 48313 5. If over \$100.00 cumulative, please provide:	\$ 100 \$ Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fun	d Raiser
	Page Subtotal \$1,100.00
# · *····	otal of All Schedules 1A
Page 9 of 10	Enter this total on line 3a of Summary Page.



CANDIDATE COMMITTEE

1. Committee I.D. Number ____138477

Enter contributor's name and address. If contribution is from an individual, enter middle initial. Check box to indicate if contribution is from a Political Committee Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receipt? YES 4. Date of Receipt (Name & Address:	08/05/21		
Gary Roncelli 69900 Hicks Rd Armada, MI 48005		_{\$} 250	\$
5. If over \$100.00 cumulative, please provide:		Click Here for	r Memo Itemization
Occupation Chairman Employer Roncelli, Inc.		Click Here lo	Wemo itemization
Business Address 6741 Metro Pkwy, Sterling Heights, MI 48312			
Type of Contribution: ✓ Direct Loan from a person Fu	ınd Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt Of Name & Address	8/05/21		
Jerry Moffitt PO Box 128506 Shelby Twp, MI 48318		_{\$} _150	\$
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Senior Advisor Employer Alidade Capital			
Business Address 40900 Woodward Ave, Bloomfield Hills, MI 4830	4		
Type of Contribution:	und Raiser		
Name & Address: 5. If over \$100.00 cumulative, please provide:		\$Click Here for	\$ Memo Itemization
Occupation Employer			
Business Address Type of Contribution: Direct Loan from a person F	Fund Raiser		
Contribution # 4 PAC Receipt? YES 4. Date of Receipt Name & Address			
		\$	\$
5. If over \$100.00 cumulative, please provide:		Click Here for	Memo Itemization
Occupation Employer			
Business Address			
Type of Contribution: Direct Loan from a person Fo	und Raiser		
	Page Subtotal	\$400.00	
(Complete	Total of All Schedules 1A on last page of Schedule)	\$25,250.00 Enter this total on	
Page of		line 3a of Summary Page.	



ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 1-IK

1. Committee I. D. Number 138477

CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Michael C. Taylor

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? Yes Name & Address: Stavros Toma 47677 Milonas Shelby Twp, MI 48315 If over \$100.00 cumulative, please provide: Occupation: Real Estate Employer Name & Business Address: Self-Employed 47677 Milonas Shelby Twp, MI 48315 Fund Raiser Contribution	Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description Fundraiser Tent & Chairs 5. Date Of Receipt: 07/22/2021 6. Vendor Name & Address:	1125 §	mization
Contribution # 2 PAC Receipt? Yes Name & Address If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description 5. Date Of Receipt: Click Click Click Condense Address:	\$_ ck Here for Memo Ite	mization
Fund Raiser Contribution Contribution #3 PAC Receipt? Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation:	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOAN Description 5. Date Of Receipt:	\$_	
Employer Name & Address: Fund Raiser Contribution	6. Vendor Name & Address: Clic Page Subtotal	ck Here for Memo Ite	emization
	Grand Total of all Schedules 1-Ik (Complete on last page of Schedule)		nary

Page ______ of _____



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

ammittee L.D. Number 138477

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

3. Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Facebook		07/21/21	\$ 250
Address	Purpose: Facebook Ads	Date	
1 Hacker Way		lere for Memo I	temization Type
Menlo Park, ĆA 94025			, , , , , , , , , , , , , , , , , , ,
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement	· · · · · · · · · · · · · · · · · · ·	
Expenditure #2			
Name Michael C. Taylor		07/21/21	\$ 1000
Address	Purpose: Fundraiser Expense - All In House	Date	
14076 Red Pine Dr	Click H	ere for Memo II	temization Type
Sterling Heights, MI 48313	Check box if this expenditure is payment of		
✓ Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name Best Buy		07/26/21	\$ 180.19
Address	Purpose: Phone Equipment	Date	
45220 Utica Park Blvd	Click H	ere for Memo II	emization Type
Utica, MI 48315	Check box if this expenditure is payment of		,
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name C&G Newspapepr		07/30/21	s 1625
Address	Purpose: Newspaper Ads	Date	\$ 1023
13650 E. Eleven Mile Rd			
Warren, MI 48089	l	ere for Memo II	temization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name M. Beshara, Inc.		08/02/21	c 244 57
Address	Purpose: Printing	Date	\$ <u>344.57</u>
10020 Capital St.	Click H	lere for Memo I	temization Type
Oak Park, MI 48237	Check box if this expenditure is payment of		••
Fund Raiser	debt or obligation reported on previous statement		
Manual Control of the	Subto	tal this page	\$3,399.76
	Grand Total of all S (Complete on last page		
	(00	/	Enter this total

Enter this total on line 8a of Summary Page

Page 1 of 3



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

Sammittee L.D. Number 138477

1. Committee I. D. Number		
2. Committee Name CTI	E 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 Facebook		08/02/21	s 126.34
Address	Purpose: Facebook Ads	Date	
1 Hacker Way	Click H	lere for Memo I	temization Type
Menlo Park, CA 94025			,,
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		·
Expenditure #2			
Name iStorage		08/02/21	s 128
Address	Purpose: Storage Unit	Date	
41250 Garfield Rd	Click H	lere for Memo I	temization Type
Clinton Twp, MI 48038	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name Macomb County Clerk		08/03/21	\$ 25
Address	_{Purpose:} Campaign Fines	Date	
32 Market St	Click H	lere for Memo I	temization Type
Mt. Clemens, MI 48043	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			İ
Name Mass Mailing		08/10/21	. 2649.70
Address	Purpose: Postage & Mail Service	Date	\$ 3618.72
35468 Mound Rd.	Click L	lere for Memo I	temization Type
Sterling Heights, MI 48310			ici.neador i ypo
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name Detroit Free Press		08/16/21	
Address	Purpose: Newspaper Subscription	Date	\$ <u>9.99</u>
160 W. Fort St.	Click F	Here for Memo	Itemization Type
Detroit, MI 48226 Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
<u></u>		tal this page	\$3,908.05
	Grand Total of all (Complete on last page		
	(Complete on last page		Cotes this total

Enter this total on line 8a of Summary Page

Page 2 of 3



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	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Mackenzie Tolitsky		08/18/21	s 50
Address	Purpose: Campaign Support Services - All In House	Date	
33441 Garfield Rd.	Click H	lere for Memo	Itemization Type
Fraser, MI 48026			······································
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name			\$
Address	Purpose:	Date	`
	Click H	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name			•
Address	Purpose:	Date	\$
	Click H	ere for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4	statement		
Name			
		Date	\$
Address	Purpose:	Date	···
	Click H	ere for Memo	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name			
Address	Purpose:	Date	\$
	Click H	lere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
		tal this page	\$50.00
	Grand Total of all \$ (Complete on last page		\$7,357.81

Enter this total on line 8a of Summary Page



DEBTS AND OBLIGATIONS SCHEDULE 15

1. Committee I.D. Number 138477

V	CTE MAIL	shool C Toulor	ı	
	COmmittee Name CTE Mic	MIGGI O. I GYIOI		
This Schedule Hernizos:			**************************************	
a Debts and obligations owed by or forgiven the com (Che	unittee OR b. Deb ck either a or b. Use only for the p	to and obligations owed <u>10</u> 0 urpose chacked.)	r forgiven <u>by</u> the co	mnitioe.
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 (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and enount of each payment	8. Cumulative payment to date on debt	8. Culatanding Balance at close of this period (Nem 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: In-Kind Loan			
Taylor, Michael C. 14076 Red Pine Dr. Sterling Heights, MI 48313	5. Date Debt Was Incurred: O8/14/09 6. Original Amount of Debt: \$ 75.51		\$ 0.00	* 75.51 FORGIVEN
If bank toan, name of endorser or guarantor:		Amo	uni Endorsed: \$ _	
Debt #2 Corp? Yas Owed to or by:	4. Type: In-Kind Loan	ş	C	
Taylor, Michael C.	5. Data Dobt Was Incurred:	•		
Same	8/15/09			
	6. Orlainel Amount of Debt:		3 0.00	ş <u>14.30</u>
	<u>s 14.30</u>			FORGIVEN
		<u> </u>		
if bank loss, name of enforser or guarantor:		Am	ount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Typo: in-Kind Loan	8		
Taylor, Michael C.	5. Date Debt Was Incurred:			
Same	8/16/09	•		
	8. Original Amount of Debt:	•	\$ 0.00	\$ 115.60
	115.60			FORGIVEN
	•	8		
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$_	
		Page Subtotal (Ouistanding dabi)	\$205.41
~ -	mplete on iasi page of Schedule si			
(Ca	mixens ou mas bails or acusions s	Inversit supportion OAMS DA 05	то вие соптине	Enter this total
A dight or obligation must be shown on this Schedul this Compsign Statement or it was forgiven during t	e if there was an outstanding an he period covered by this Camp	nount owed on it at the ck aign Statement	eing date of	on line 12a "owed by" or line 12b "owed to" of the Summary Page

Page 1 of 5



DEBTS AND OBLIGATIONS SCHEDULE 1E CANDIDATE COMMITTEE	1. Committee I.D. Number 2. Committee Name	138477 E Michael C. Taylor	r	
Itis Schedule Remizers:				
Debts and obligations awad by ar forgiven the	(Check either a or b. Use only	Debts and obligations owed to of the purpose checked.)	or forgiven <u>by</u> Ste co	mmittee.
Name and Mailing Address of person, vendor	or 4. Type of Obligation	7. Date and appoint of	8. Constalive	9. Outstand

1140 Galdiday beliebbli				
a Debts and obligations owed by or forgiven the com	milities OR b. Deb ck either a or b. Use only for the p	ots and obligations owed <u>to</u> o surpose checked.)	or forgiven <u>by</u> lite co	mmittee.
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 quarantors, 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	8. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: Taylor, Michael C.	4. Type: in-Kind Loan			
14076 Red Pine Dr. Sterling Heights, MI 48313	5. Date Debt Wee Incurred: 09/08/09 8. Original Amount of Debt: 550.00	\$	\$ 0.00	\$ 550.00
if bank loss, name of endorser or guaranter:		Am	ount Endorsed: 5	
Debt #2 Corp? Yes Owed to or by: Taylor, Michael C. Same	4. Type: In-Kind Loan 5. Date Debt Was facurred: 10/2/09 6. Original Amount of Debt: 8 1107.82	\$ \$ \$	\$ 0.00	\$ 1107.82
Debt #3 Corp? Yes Owed to or by: Taylor, Michael C. Same If bank loan name of endorser or guarantor:	4. Type: In-Kind Loan 5. Pate Debt Was Incorred: 10/1/09 6. Original Amount of Debt: \$ 62.97	\$	© O.CO	\$ <u>62.97</u>
			(Cutstanding debi)	\$1,720.79

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

Enter this total on line 12m "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 hat the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

Page 2 of 5



DEBTS AND OBLIGATIONS	1. Committee I.D. Number	138477

SCHEDULE 1E

2. Committee Name

CTE Michael C. Taylor

This Schedule itembos: a	milities OPL b. Debi	a and obligations owed <u>to</u> or	forgiven <u>by</u> the con	milles.
Name and Misking 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 guaranton, 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	Cumulative payment to date on debt	9. Outstanding Balance at close of this period (flem 6 minus item 8)
Debt #t Corp? Yes Owed to or by:	4. Type: In-Kind Loan			
Taylor, Michael C. 14076 Red Pine Dr. Sterling Heighls, MI 48313	5. <u>Date Beht Was Incorred</u> : 07/06/11 6. <u>Original Amount of Debt</u> \$ 558.60	\$\$ \$\$	\$ <u>0.00</u>	\$ 556.5
lf bank loan, name of endorsor or guarantor:		Amo	unt Endorsed: \$	
Debt #2 Corp? Yes Owed to or by: Taylor, Michael C.	4. Type: In-Kind Loan 5. Date Debt Was Incurred:			
Same	9-7-11 6. Original Amount of Debt: \$ 1533.82		\$ 0.00	\$_1533.82
if bank toan, name of endorser or guaranter:		Arr	nount Endorsed: 5_	
Debt #3 Com? Yes Owed toor by: Taylor, Michael C. Same	4. Type: In-Kind Loan 5. Date Debt Was Incurred: 9-29-11 6. Original Amount of Cebt:	<u> </u>	\$_0.00	\$_130
If bank loan, name of endorser or guerantor.	\$ 130		mount Endorsed: §	FORGIVE
II BRIN WELL TIMING WITHOUT OF STREET				\$2,220.32
			(Outstanding debt) of all Schedules 15	

(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 Summany Page

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.

Page 3 o 5



SCHEDULE 1E CANDIDATE COMMITTEE 2. C This Schedule literates: a 7 Debts and obligations owed by or forgiven the committee.		hael C. Taylor	forgiven by the con 8. Cumulative payment to date on debt	9. Cuistanding Bolance & close of this period (flam 6 minus from 8)
Debt #1 Cop? Yes Owed to or by: Taylor, Michael C. 14076 Red Pine Dr. Sterling Heights, MI 48313 If bank loss, name of endorser or guaranter: Debt #2 Cop? Yes Owed to or by: Taylor, Michael C. Same	4. Type: In-Kind Loan 5. Date Debt Was Incurred: 09/07/11 6. Original Amount of Debt: \$ 159.00 4. Type: In-Kind Loan 5. Date Debt Was Incurred: 9-7-11 6. Original Amount of Debt: \$ 23.30	\$ \$ \$	\$ <u>0.00</u> und Endorsed: \$	\$ 159.00 FORGIVEN
If benk loan, name of endorser or guarantor.		ATT	ount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by: Taylor, Michael C. Same	4. Type: In-Kind Loan 5. Date Debt Was Incurred: 9-7-11 8. Original Amount of Dabt: 8 103.68	\$	\$_0.00	\$_103.88
If bank loss, name of endorser or quaranter:	0.5			\$285.98
		. •	(Outstanding debt)	
(C	emplete on last page of Schedule	showing amounts owed by (of all Schedules 1E or to the committee)	Enter this total

A debt crobilization 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 12s "owed by" or line 12b "owed to" of the Summery Page

Page 4 d 5



138477 **DEBTS AND OBLIGATIONS** 1. Committee I.D. Number SCHEDULE 1E 2. Committee Name CTE Michael C. Taylor **CANDIDATE COMMITTEE** This Schedule Itemizes: s committee OR b. Debts and obligations owed to or forgiven by the committee. (Check either a or b. Use only for the purpose checked.) Debis and obligations owedby or forgiven the committee 3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. 4. Type of Obligation 9. Outstanding 6. Cumutative (Description) each payment payment to Balance at close 5. Indicate date debt was of this period date on debt 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 incurred (Item 6 minus 8. Indicate original amount Item 8) of debt guarantors, If any. Debt #1 Comp? Yes 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: 94.34 **TFORGIVEN** If bank loan, name of endoner or guarantor: Amount Endorsed: \$ Debt #2 Corp? 4. Type:_ Owed to or by: 5. Date Debi Was Incurred: 6. Original Amount of Dabt: FORGIVEN if bank loan, name of endorser or guaranter: Amount Endorsed: \$ Debt #3 Corp? 4. Type: Owed to or by: 5. Date Debt Was Incurred: 6. Original Amount of Debt: FORGIVEN If bank loan, name of endorser or guaranton. Amount Endorsed: \$ \$94.34 Page Sublotsi (Outstanding debt) 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

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

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Page _1 ___ of _1

FUND RAISER SCHEDULE 1F CANDIDATE COMMITTEE

138477

1. Committee I.D. Number	 	-				

7							
	- USE A	SEPARATE SH	EET FOR EACH EVENT -				
3. Date Event Was Held	Number of Individuals Attending or Participating (whichever is		5. Type of Fund Raising Activity	Address and Name (If any) of the place where the activity was held.			
07/22/21	greater)	75	Campaign Fundraiser	47677 Milonas Shelby Twp, MI 4831 Private Residence			
7. Total Contributions		\$19,900.00					
8. Other Receipts							
9. Gross Receipts (Add lines 7 and 8) 10. Total Cost of Event (Total Cost includes In-Kind Contributions		\$19,900.00					
		\$2,125.00 and All Expenditures	Made For the Event)				
11. Check if event was a join	int fund ra	iser and complete the	following:				
Co-Sponsor(s)		Contribution S (%)	Split	Expenditure Split (%)			
							
	•						
	-						
	-	<u></u>					
	_						
 period covered by the O Receipts and expenditu Schedule (1A), Itemized Summary Page. 	Campaign res listed d In-Kind (Statement. on a Fund Raiser Sch Contributions Schedul	er Schedule for each fund raisin nedule must also be reported on le (1-IK), Itemized Expenditures must file a Fund Raiser Schedul	the Itemized Contributions Schedule (1B) and the			