

CANDIDATE COMMITTEE
COVER PAGE

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

FOR OFFICIAL USE ON

<p>1. Committee I.D. Number 69954-50</p>		<p>3. This Statement covers From: 7-19-21 to 8-23-21</p>	
<p>2. Committee Name COMMITTEE JOE ELECT DEANNA KOSKI</p>		<p>4. Candidate Last Name KOSKI First Name DEANNA M.I.</p>	
<p>5. Committee's Mailing Address 15079 HARVEST MEADOWS STERLING HTS, MI 48313</p>		<p>4a. Office Sought Including District # or Community Served (If applicable) CITY COUNCIL</p>	
<p>Area Code and Phone 586 5662388 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.</p>		<p>4b. County of Residence MALOMB</p>	
<p>7. Treasurer's Business Address 15079 HARVEST MEADOWS STERLING HTS, MI 48313</p>		<p>6. Treasurer's Name & Residential Address DEANNA KOSKI 15079 HARVEST MEADOWS STERLING HTS MI 48313</p>	
<p>Area Code and Phone 586 5662388</p>		<p>Area Code & Phone 586 5662388</p>	
<p>9. TYPE OF STATEMENT 9a. Pre-Election OR 9b. <input checked="" type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: Primary <input checked="" type="checkbox"/> General Convention Special School Caucus</p>		<p>8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) Area Code and Phone</p>	
<p>Date of Election, Convention or Caucus AUG 3, 2021</p>		<p>9c. Annual Statement () Coverage Year 9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)</p>	
<p>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 our knowledge and belief the contents are true, accurate and complete.</p>		<p>9e. 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 18 and the Summary Page.</p>	
<p>Designated Record keeper DEANNA KOSKI Type or Print Name</p>		<p>Signature Deanna Koski Date 8-25-21</p>	
<p>Candidate DEANNA KOSKI Type or Print Name</p>		<p>Signature Deanna Koski Date 8-25-21</p>	

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21 AUG 26 AM 10:58
HACETOWN COMMUNITY CLERK
HACETOWN, MICHIGAN



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

SUMMARY PAGE
CANDIDATE COMMITTEE

1. Committee I.D. Number

69954-50

2. Committee Name

COMMITTEE TO RE-ELECT
DEANNA KOSKI

RECEIPTS

3. Contributions

a. Itemized (Schedule 1A - Column 6)

(3a.) \$ 8080.00

b. Unitemized (less than \$20.01 each - no Schedule)

(3b.) \$ NOT APPLICABLE

c. Subtotal of "Contributions"

(3c.) \$

4. Other Receipts (Schedule 1A - 1, Column 6)

(4.) \$

5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS
(Add Line 3c + Line 4)

(5.) \$ 8080.00

Column II
Cumulative this election cycle

(18.) \$ 12330.00

(19.) \$

(20.) \$ 12330.00

IN-KIND CONTRIBUTIONS & EXPENDITURES

6. In-Kind Contributions (Schedule 1-IK, Column 7)

(6.) \$

7. In-Kind Expenditures (Schedule 1B-IK, Column 6)

(7.) \$ 0

(21.) \$

(22.) \$ 0

EXPENDITURES

8. Expenditures

a. Itemized (Schedule 1B, Column 6)

(8a.) \$ 236.30

b. Itemized Get-Out-the-Vote (Schedule 1B-G)

(8b.) \$

c. Unitemized (less than \$50.01 each - no Schedule)

(8c.) \$

9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)

(9.) \$ 236.30

(23.) \$ 2213.76

INCIDENTAL EXPENSE DISBURSEMENTS
(Officeholders Only)

10. Disbursements

a. Itemized (Schedule 1C, Column 6)

(10a.) \$

b. Unitemized (less than \$50.01 each - no Schedule)

(10b.) \$

11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS
(Add Line 10a + Line 10b)

(11.) \$ 0

(24.) \$ 0

DEBTS AND OBLIGATIONS

12. Debts and Obligations

a. Owed by the Committee (Schedule 1E)

(12a.) \$ 6248.20

b. Owed to the Committee (Schedule 1E)

(12b.) \$

BALANCE STATEMENT

13. Ending Balance of last report filed
(Enter zero if no previous reports have been filed.)

(13.) \$ 5204.83

14. Amount received during reporting period
(Line 5, Total Contributions & Other Receipts)

(14.) + \$ 8080.00

15. SUBTOTAL Add lines 13 and 14

(15.) = \$ 13284.83

16. Amount expended during reporting period
(Add lines 9 and 11)

(16.) - \$ 236.30

17. ENDING BALANCE

(Subtract line 16 from line 15)

(17.) \$ 13048.53



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 69954-50
2. Committee Name COMMITTEE TO REELECT DEANNA KOSKI

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 7-26-21

Name & Address:

JUNCEVIC DED
52756 BLDERIDGE DR
SHEIBY MI 48316

\$ 500.⁰⁰ \$ 500.-

5. If over \$100.00 cumulative, please provide:

Occupation SELF Employer UTICA VANDYKE TOWING

Business Address 43500 UTICA SH

Type of Contribution: ☒ Direct

Loan from a person

Fund Raiser

3. Contribution #2 PAC Receipt? YES

4. Date of Receipt 7-26-21

Name & Address:

JUNCEVIC ROKO
52756 BLDERIDGE DR
SHEIBY MI 48316

\$ 500.⁰⁰ \$ 500.-

5. If over \$100.00 cumulative, please provide:

Occupation OWNER Employer UTICA V.D. TOWING

Business Address 43500 UTICA SH

Type of Contribution: ☒ Direct

Loan from a person

Fund Raiser

3. Contribution # 3 PAC Receipt? YES

4. Date of Receipt 8-11-21

Name & Address:

LEHMAN PATRICIA
11165 LAUREL
STERLING HTS MI 48312

\$ 40.⁰⁰ \$ 40.-

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 8-12-21

Name & Address:

MOCCERI DOMINIC
3005 UNIVERSITY
AUBURN HILLS MI 48326

\$ 1000.⁰⁰ \$ 1000.-

5. If over \$100.00 cumulative, please provide:

Occupation DEV-SELF Employer MOCCERI

Business Address 3005 UNIVERSITY AUBURN HILLS

Type of Contribution: ☒ Direct

Loan from a person

Fund Raiser

Page Subtotal

2040.⁰⁰

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 69954-50
2. Committee Name Committee to Reelect DEANNA KOSKI

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 8-19-21
Name & Address: STERLING HEIGHTS FIRE FIGHTERS UNION
LOCAL 1557
38911 VAN DYKE ST. MI 48312

\$ 1000.⁰⁰ \$ 1000.-

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 8-19-21
Name & Address: INKS NATHAN
11848 ANGUS CIR.
STERLING HTS MI 48312

\$ 500.⁰⁰ \$ 500.-

5. If over \$100.00 cumulative, please provide:

Occupation LAW CLERK Employer MICHIGAN SUPREME CT

Business Address 3034 W. GRAND BLVD DET 48209

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☒ YES 4. Date of Receipt 8-19-21
Name & Address: MICHIGAN LABORERS' POLITICAL LEAGUE
1118 CENTENNIAL WAY #100
LANSING MI 48917

\$ 1000.⁰⁰ \$ 1000.-

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 8-20-21
Name & Address: LUKASIK MICHAEL
3464 DAVIDOFF DR
STERLING HTS MI 48310

\$ 40.⁰⁰ \$ 40.-

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal

2540.⁰⁰

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 69954-50
2. Committee Name Comm. HEE TO REELECT DEANNA KOSKI

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

Name & Address:

4. Date of Receipt 8-20-21

PARKER GEORGE JR
13899 BROUGHAM DR
STERLING HTS MI 48312

\$ 50.00 \$ 50.-

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☒ YES

Name & Address

4. Date of Receipt 8-20-21

STERLING HEIGHTS POLICE OFFICERS ASSOC
40333 DODGE PARK
STERLING HTS MI 48313

\$ 250.00 \$ 250.-

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #3 PAC Receipt? YES

Name & Address:

4. Date of Receipt 8-20-21

KASZUBEKI LAURA
1096 Brompton
ROCHESTER HILLS MI 48309

\$ 40.00 \$ 40.-

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

Name & Address

4. Date of Receipt 8-23-21

GALLO TONY
6303 - 26 MILE #200
WASHINGTON MI 48094

\$ 500.00 \$ 500.-

5. If over \$100.00 cumulative, please provide:

Occupation DEV Employer SELF

Business Address 6303 - 26 MILE, WASHINGTON 48094

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal

840.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

69954-50

2. Committee Name

Committee Joke Elect
DEANNA KOSKI

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 08/18/21

Name & Address:

Luke Bonner
4875 Sawgrass W
Ann Arbor, MI. 48108

\$ 200

\$ 200. ✓

5. If over \$100.00 cumulative, please provide:

Occupation CEO Employer Bonner Advisory Group

Click Here for Memo Itemization

Business Address 4875 Sawgrass W Ann Arbor, MI. 48108

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt 08/18/21

Name & Address

Paul Calmi
51771 West End Dr
Shelby Twp., MI. 48315

\$ 100

\$ 100. ✓

5. If over \$100.00 cumulative, please provide:

Occupation Not Employed Employer

Click Here for Memo Itemization

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3

PAC Receipt? ☐ YES

4. Date of Receipt 08/18/21

Name & Address:

Gerald Rowe
42609 Jason Ct
Sterling Heights, MI. 48313

\$ 40

\$ 40. ✓

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer

Click Here for Memo Itemization

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4

PAC Receipt? ☐ YES

4. Date of Receipt 08/18/21

Name & Address

Ashley Steffen
6206 Beechfield Dr
Lansing, MI. 48910

\$ 25

\$ 25. ✓

5. If over \$100.00 cumulative, please provide:

Occupation Writer Employer MI Protection and Adv Services

Click Here for Memo Itemization

Business Address 4095 Legacy Parkway Ste. 500 Lansing, MI. 48911

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal \$365.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

69954-50

2. Committee Name

COMMITTEE TO RE-ELECT
DEANNA KOSKI

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 08/18/21

Name & Address:

Timothy Zollner
54421 Iroquois Ln
Shelby Twp., MI. 48315

\$ 20

\$ 20.00

5. If over \$100.00 cumulative, please provide:

Occupation Engineer Employer Paslin

Click Here for Memo Itemization ☐

Business Address 54421 Iroquois Ln Shelby Twp, MI. 48315

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt 08/18/21

Name & Address:

Nick Najjar
436 Mayapple
Rochester, MI. 48307

\$ 100

\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation Self Employer _____

Click Here for Memo Itemization ☐

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3

PAC Receipt? ☐ YES

4. Date of Receipt 08/18/21

Name & Address:

Thomas Slowik
15201 Peggy Ct
Sterling Heights, MI. 48312

\$ 20

\$ 20.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer _____

Click Here for Memo Itemization ☐

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4

PAC Receipt? ☐ YES

4. Date of Receipt 08/18/21

Name & Address:

Leon Kniaz
14016 Pernell
Sterling Heights, MI. 48313

\$ 20

\$ 20.00

5. If over \$100.00 cumulative, please provide:

Occupation Tradesman Employer Sheetmentl Workers L80

Click Here for Memo Itemization ☐

Business Address 17100 W. 12 Mile Rd Southfield, MI. 48076

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal \$160.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

69954-50

2. Committee Name

COMMITTEE TO RE-ELECT
DEANNA KOSKI

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 08/18/21

Name & Address:

SMW-L80
17100 12 Mile Rd
Southfield, MI. 48076

\$ 250

\$ 250.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Click Here for Memo Itemization

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt 08/18/21

Name & Address

George Eschenberg
11739 Wheaton
Sterling Heights, MI. 48313

\$ 40

\$ 40.00

5. If over \$100.00 cumulative, please provide:

Occupation Tech Support Employer CareTech Solutions

Click Here for Memo Itemization

Business Address 0843270 W. Big Beaver Troy, MI. 48

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3

PAC Receipt? ☐ YES

4. Date of Receipt 08/18/21

Name & Address:

Stephen Pangori
8106 Rosebud Ln
Clarkston, MI. 48348

\$ 200

\$ 200.00

5. If over \$100.00 cumulative, please provide:

Occupation Manager Employer AEW

Click Here for Memo Itemization

Business Address 51301 Schoenherr Rd Shelby Twp, MI 48315

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4

PAC Receipt? ☐ YES

4. Date of Receipt 08/18/21

Name & Address

James Winne
59658 Thunder Head
Washington Twp. MI. 48094

\$ 20

\$ 20.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer _____

Click Here for Memo Itemization

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal \$510.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

69954-50

2. Committee Name

COMMITTEE TO RE-ELECT
JEANNA KOSKI

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 08/18/21

Name & Address:

Clark Andrews
53985 Sutherland Ln
Shelby Twp., MI 48316

\$ 20

\$ 120.00

5. If over \$100.00 cumulative, please provide:

Occupation Attorney Employer Oreilly Rancillio

Click Here for Memo Itemization ☐

Business Address 12900 Hall Rd Sterling Heights, MI. 48313

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt 08/18/21

Name & Address

Gary Kolartz
33626 Schoenherr
Sterling Heights, MI. 48312

\$ 150

\$ 150.00

5. If over \$100.00 cumulative, please provide:

Occupation Self Employer ROGERS ROOST

Click Here for Memo Itemization ☐

Business Address 33626 SCHOENHERR S.H.

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3

PAC Receipt? ☐ YES

4. Date of Receipt 08/18/21

Name & Address:

Phyllis Bourgois
4500 Dobry
Sterling Heights, MI. 48314

\$ 20

\$ 20.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Click Here for Memo Itemization ☐

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4

PAC Receipt? ☐ YES

4. Date of Receipt 08/18/21

Name & Address

John Bologna
19135 Saxon Dr.
Beverly Hills MI. 48025

\$ 50

\$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation Self Employer _____

Click Here for Memo Itemization ☐

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal \$240.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 69954-50
2. Committee Name Committee To Elect DEANNA ROSKI

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 08/18/21

Name & Address:

Gary Sakwa
5130 Deep Wood Rd
Bloomfield Hills, MI. 48302

\$ 500

\$ 500.

5. If over \$100.00 cumulative, please provide:

Occupation Self

Employer GRAND/SAKWA PROP.

Click Here for Memo Itemization ☐

Business Address 28470 - 13 mile Farmington Hills

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt 08/18/21

Name & Address

Michael MacDonald
18890 San Quentin Dr
Lathrup Village, MI. 48076

\$ 150

\$ 150.

5. If over \$100.00 cumulative, please provide:

Occupation Engineer

Employer HRC

Click Here for Memo Itemization ☐

Business Address 555 Hulet Dr Bloomfield Hills, MI 48302

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3

PAC Receipt? ☐ YES

4. Date of Receipt 08/18/21

Name & Address:

David Peckhem
42217 Arcadia
Sterling Heights, MI. 48313

\$ 50

\$ 50.

5. If over \$100.00 cumulative, please provide:

Occupation Retired

Employer _____

Click Here for Memo Itemization ☐

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4

PAC Receipt? ☐ YES

4. Date of Receipt 08/18/21

Name & Address

Jozef Srodek
2773 Norwalk
Hamtramck, MI. 48

\$ 50

\$ 50.

5. If over \$100.00 cumulative, please provide:

Occupation President

Employer Srodeks Quality Sausage

Click Here for Memo Itemization ☐

Business Address 9601 Joseph Campeau Hamtramck, MI. 48212

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal \$750.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

69954-50

2. Committee Name

COMMITTEE TO REELECT
DEANNA ROSKI

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 08/18/21

Name & Address:

Robert Wilcox
13983 Diversion
Sterling Heights, MI. 483112

\$ 20

\$ 20.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer

Click Here for Memo Itemization ☐

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt 08/18/21

Name & Address

Nancy Duemling
20776 Moxon Dr
Clinton Twp, MI. 48036

\$ 20

\$ 20.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer

Click Here for Memo Itemization ☐

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3

PAC Receipt? ☐ YES

4. Date of Receipt 08/18/21

Name & Address:

William Froling
5440 Brookdale Rd
Bloomfield Hills, MI. 48304

\$ 125

\$ 125.00

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer Titan Construction

Click Here for Memo Itemization ☐

Business Address 3715 15 Mile rd. Sterling Heights, MI. 48310

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4

PAC Receipt? ☐ YES

4. Date of Receipt 08/18/21

Name & Address

James McNulty
5065 Bayleaf Dr
Sterling Heights, MI. 48314

\$ 40

\$ 40.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer

Click Here for Memo Itemization ☐

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal \$205.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 69954-50
2. Committee Name COMMITTEE TO REELECT DEANNA KOSKI

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 08/18/21
Name & Address:
Matthew Ratliff
50323 Oxford
Macomb Twp., MI. 48044

\$ 40 \$ 40.00

5. If over \$100.00 cumulative, please provide:
Occupation Retired Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 08/18/21
Name & Address:
Dana Gire
37567 Radde St
Clinton Twp., MI 48036

\$ 20 \$ 20.00

5. If over \$100.00 cumulative, please provide:
Occupation Retired Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 08/18/21
Name & Address:
John Tangelos
43455 Schoenherr #10
Sterling Heights, MI. 48313

\$ 20 \$ 20.00

5. If over \$100.00 cumulative, please provide:
Occupation Retired Employer _____
Business Address _____
Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt _____
Name & Address _____

\$ _____ \$ _____

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 \$80.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

Enter this total on
line 3a of Summary
Page.



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 69954-50
2. Committee Name Comm. #EE To REELECT DEANNA KOSKI

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 8-23-21

Name & Address:

JENNA KEVIN
700 N OLD WOODWARD
BIRMINGHAM MI 48009

\$ 100.00

\$ 100.-

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer SELF

Business Address _____

Type of Contribution: ☒ Direct

☐ Loan from a person

☐ Fund Raiser

3. Contribution #2 PAC Receipt? YES

4. Date of Receipt 8-23-21

Name & Address:

WEISS HARVEY
32820 WOODWARD
ROYAL OAK, MI 48073

\$ 250.00

\$ 250.-

5. If over \$100.00 cumulative, please provide:

Occupation DEV Employer WEISS Prop

Business Address 32820 WOODWARD RO 48073

Type of Contribution: ☒ Direct

☐ Loan from a person

☐ Fund Raiser

3. Contribution #3 PAC Receipt? YES

4. Date of Receipt _____

Name & Address:

\$ _____

\$ _____

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 _____

Name & Address:

\$ _____

\$ _____

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct

☐ Loan from a person

☐ Fund Raiser

Page Subtotal

350.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

8080.00

Enter this total on
line 3a of Summary
Page.



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number

69954-50

2. Committee Name

Committee To Re-Elect DEANNA KOSKI

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
<p>Expenditure #1</p> <p>Name <u>ROGERS ROOST</u></p> <p>Address <u>33626 SCHDENTHERK</u> <u>STERLING HTS MI, 48312</u></p> <p><input checked="" type="checkbox"/> Fund Raiser</p>	<p><u>50%</u></p> <p>Purpose: <u>PIZZA, SALAD</u> <u>SODA</u></p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p><u>8-18-21</u></p> <p>Date</p>	<p><u>\$236.30</u></p>
<p>Expenditure #2</p> <p>Name _____</p> <p>Address _____</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: _____</p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p>_____</p> <p>Date</p>	<p>\$ _____</p>
<p>Expenditure #3</p> <p>Name _____</p> <p>Address _____</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: _____</p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p>_____</p> <p>Date</p>	<p>\$ _____</p>
<p>Expenditure #4</p> <p>Name _____</p> <p>Address _____</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: _____</p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p>_____</p> <p>Date</p>	<p>\$ _____</p>
<p>Expenditure #5</p> <p>Name _____</p> <p>Address _____</p> <p><input type="checkbox"/> Fund Raiser</p>	<p>Purpose: _____</p> <p><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement</p>	<p>_____</p> <p>Date</p>	<p>\$ _____</p>

Subtotal this page

236.30

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

236.30

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

69954-50

2. Committee Name

Committee to REELECT DEANNA KOSKI

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: DEANNA KOSKI 15079 HARVEST MEADOWS STERLING HTS, MI 48313	4. Type: NLC 5. Date Debt Was Incurred: 5-24-99 6. Original Amount of Debt: \$241.00	\$ \$ \$ \$ \$	\$	\$241.00 FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? Yes Owed to or by: DEANNA KOSKI 15079 HARVEST MEADOWS STERLING HTS MI 48313	4. Type: NLC 5. Date Debt Was Incurred: 6-4-99 6. Original Amount of Debt: \$664.13	\$ \$ \$ \$ \$	\$	\$664.13 FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? Yes Owed to or by: DEANNA KOSKI 15079 HARVEST MEADOWS STERLING HTS MI 48313	4. Type: FO 5. Date Debt Was Incurred: 2-16-99 6. Original Amount of Debt: \$595.00	\$ \$ \$ \$ \$	\$	\$595.00 FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

1500.13

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

69954-50

2. Committee Name

Committee to Reelect DEANNA Koski

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: DEANNA Koski 15079 HARVEST MEADOWS STERLING Hts, MI 48313	4. Type: FO 5. Date Debt Was Incurred: 4-6-99 6. Original Amount of Debt: \$337.00	\$ \$ \$ \$ \$	\$	\$337.00 FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? Yes Owed to or by: DEANNA Koski 15079 HARVEST MEADOWS STERLING Hts MI 48313	4. Type: FO 5. Date Debt Was Incurred: 10-19-99 6. Original Amount of Debt: \$885.81	\$ \$ \$ \$ \$	\$	\$885.81 FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? Yes Owed to or by: DEANNA Koski 15079 HARVEST MEADOWS STERLING Hts MI 48313	4. Type: FO 5. Date Debt Was Incurred: 6-16-00 6. Original Amount of Debt: \$900.00	\$ \$ \$ \$ \$	\$	\$900.00 FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

2122.81

(Complete on last page of Schedule showing amounts owed by or to the committee)

Grand Total of all Schedules 1E

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

69954-50

2. Committee Name

Committee to ReElect DEANNA KOSKI

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: DEANNA KOSKI 15079 HARVEST MEADOWS STERLING HTS, MI 48313	4. Type: FO 5. Date Debt Was Incurred: 7-7-00 6. Original Amount of Debt: \$ 749.58	\$ \$ \$ \$ \$	\$	\$ 749.58 FORGIVEN
If bank loan, name of endorser or guarantor: _____				
Debt #2 Corp? Yes Owed to or by: DEANNA KOSKI 15079 HARVEST MEADOWS STERLING HTS MI 48313	4. Type: ADS 5. Date Debt Was Incurred: 10-17-09 6. Original Amount of Debt: \$ 486.00	\$ \$ \$ \$ \$	\$	\$ 486.00 FORGIVEN
If bank loan, name of endorser or guarantor: _____				
Debt #3 Corp? Yes Owed to or by: DEANNA KOSKI 15079 HARVEST MEADOWS STERLING HTS MI 48313	4. Type: CARBY-TREAT 5. Date Debt Was Incurred: 3-3-10 / 10-19-10 6. Original Amount of Debt: \$ 109.67	\$ \$ \$ \$ \$	\$	\$ 109.67 FORGIVEN
If bank loan, name of endorser or guarantor: _____				

Page Subtotal (Outstanding debt)

1345.25

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

69954-50

2. Committee Name

Committee to Reelect DEANNA KOSKI

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 Owed to or by: Corp? Yes DEANNA KOSKI 15079 HARVEST MEADOWS STERLING HTS, MI 48313	4. Type: Cost FR 5. Date Debt Was Incurred: 5-15-13 6. Original Amount of Debt: \$337.05	\$ \$ \$ \$ \$	\$	\$337.05 FORGIVEN
If bank loan, name of endorser or guarantor: _____				
Debt #2 Owed to or by: Corp? Yes DEANNA KOSKI 15079 HARVEST MEADOWS STERLING HTS MI 48313	4. Type: Cost FR 5. Date Debt Was Incurred: 9-9-15 6. Original Amount of Debt: \$692.96	\$ \$ \$ \$ \$	\$	\$692.96 FORGIVEN
If bank loan, name of endorser or guarantor: _____				
Debt #3 Owed to or by: Corp? Yes DEANNA KOSKI 15079 HARVEST MEADOWS STERLING HTS MI 48313	4. Type: Cost FR 5. Date Debt Was Incurred: 10-24-17 6. Original Amount of Debt: \$250.00	\$ \$ \$ \$ \$	\$	\$250.00 FORGIVEN
If bank loan, name of endorser or guarantor: _____				

Page Subtotal (Outstanding debt)

1280.01

(Complete on last page of Schedule showing amounts owed by or to the committee)

Grand Total of all Schedules 1E

6248.20

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



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number

69954-50

2. Committee Name

COMMITTEE TO RE-ELECT
DEANNA KOSKI

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>08/18/21</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>28</u>	5. Type of Fund Raising Activity <u>Pizza Dinner</u>	6. Address and Name (if any) of the place where the activity was held. <u>Rogers Roost</u> <u>33626 Schoenherr</u> <u>Sterling Heights 48312</u> <input type="checkbox"/> Private Residence
---	---	---	--

7. Total Contributions

\$4,620.00

8. Other Receipts

\$0.00

9. Gross Receipts (Add lines 7 and 8)

\$4,620.00

10. Total Cost of Event

\$472.60

(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. ☒ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
CTE HENRY YANEZ	50	50

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.