# CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

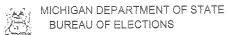
Report must be legible, typed or printed in ink and	signed by	3 This 9	Statement covers From				
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	indidate.			1 <del>2/31/20</del> 1/1/21 to	07/18/20		
1. Committee I.D. Number		4. Can	didate Last Name	First Name		M.I.	
137189		SCHI	MIDT	MARIA		G	
2. Committee Name			e Sought Including Dis	strict # or Community Serve	d (If applicable	)	-
CTE MARIA G. SCHMI	DT						
	DI	4b. Cour	nty of Residence MA	COMB			
5. Committee's Mailing Address		1	surer's Name & Reside		3		
35755 WOODVILLA DR			ERT J. SCHMIE	)T	man major		
STERLING HEIGHTS, MI 48312		SAME	-		-12	N	
					CLEMENS.		
					The contract of the contract o		
Area Code and Phone (586) 264-9242 If the address in this box is different from the commit	+				EG C	23	
mailing address on the Statement of Organization, r					marine serveral		
be sent to this address by the filing official.	TO CONTROL TO THE		de & Phone			PALLET ES	40
7. Treasurer's Business Address		8. Design	gnated Record Keeper ated Record Keeper)	's Name and Address (If the	A. (1)		
		Design	ated Record Recper)			C)	
							or consider
Area Code and Phone		Area Co	ode and Phone				
9. TYPE OF STATEMENT				9e. Dissolution of Cand	idate Committ	tee	
9a. X Pre-Election OR 9b. Post-Election	Required ON is not on the			By checking this item	I/Me certify an	v outstandir	a dobt
	current year:	Dallot loi	uie	by the committee to the ca	andidate or his	or her spous	se is here
Pre-Election or Post-Election Statement relates to:				by discharged and forgive the committee. The comm	n, and no longe nittee has no ou	er collectible ustanding as	from sets.
<b>⊠</b> Primary	July Quart	erly		owes no lates fees or has			200 554 5550 7
General	October Q	uarterly		Further, if the dissolution of	annot be grant	ed that this	ho
Convention				considered a request for th	ne Reporting W	aiver.	De
Special	9c. 🗀 .						
	Annua	al Stateme	ent () Coverage Year	Effective date of	f dissolution		
School	9d. Amen	dment to	Campaign Statement	ASSAULTANIA DIRECTI IN ROSS CONTROLLARIO DE LA CARRACTERIO DEL CARRACTERIO DE LA CAR	Ex CONTRACTOR CONTRACT		
Caucus	(Com	plete Item	9a, 9b, 9c or 9e to	Note: The disposition of re	eidual funde m	nuet ha rana	tod on
	ameno		Statement is being	Schedule 1B and the Sum		idst be repor	ted on
Date of Election, Convention or Caucus		,					
08/03/20							
10. Verification: I\We certify that all reasonable dilige	nce was used	in the pre	paration of this statem	I ent and attached schedules	(if anv) and to	the best of	
my\our knowledge and belief the contents are true, a	accurate and co	omplete.		(	7/		
Current Treasurer or ROBERT J. SC	HMIDT	. 1/	17 L1	( <del>\</del>	1/2	0/20	7,
Designated Record keeper Type or Print Name	and the same of	/	Signature	Date	1/2	1 200	
Type of Fine Name			o.g.iataio	1		í	
Candidate MARIA G. SCHMIDT		(	an P	Date	7/2	0/20	21
Type or Print Name			Signature	Date		-	

1. Committee I.D. Number 137189

#### SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name CTE MARIA G. SCHMIDT

RECEIPTS COMMITTEE	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 3,750.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$_\$0.00	(18.) \$ \$3,750.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$0.00	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS: AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$\_\$3,750.00	(20.) \$ \$3,750.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$850.00	(21.) \$ \$850.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$0.00	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <b>\$1,977.46</b>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <b>\$0.0</b> 0	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <b>\$0.00</b>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$1,977.46	(23.) \$ \$1,977.46
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$ \$0.00	-
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	ФО ОО	(24.) \$ \$0.00
DEBTS AND OBLIGATIONS  12. Debts and Obligations	(11.) \$ \$0.00	(24.) \$ \(\psi \).
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <b>\$2</b> ,180.00	-
b. Owed to the Committee (Schedule 1E)	(12b.) \$ \$0.00	_
<ul> <li>13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)</li> <li>14. Amount received during reporting period (Line 5, Total Contributions &amp; Other Receipts)</li> <li>15. SUBTOTAL Add lines 13 and 14</li> <li>16. Amount expended during reporting period (Add lines 9 and 11)</li> <li>17. ENDING BALANCE (Subtract line 16 from line 15)</li> </ul>	BALANCE STATEMENT  (13.) \$ \$1,838.99  (14.) + \$ \$3,750.00  (15.) = \$ \$5,588.99  (16.) - \$ \$1,977.46  (17.) \$ \$3,677.53	*



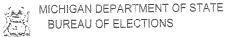
### ITEMIZED CONTRIBUTIONS SCHEDULE 1A

#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_\_\_137189

2. Committee Name CTE MARIA G. SCHMIDT

<u> </u>	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE	-	and displayed before a minimum and analysis and an analysis an			
Enter contributor's nar middle initial. Check b Committee (PAC) Rep	ox to indicate if contr	ibut	bution is from an individual, e ion is from a Political Commi rdless of amount.	enter last name, first name, ttee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: GRANT, BRIAN 46563 MARINE MACOMB, MI 4	R DR		YES 4. Date of Receip	ot <u>06/01/20</u>	<u>\$ 100.00</u>	\$
5. If over \$100.00 cun	nulative, please pro	vide	):		OP I May 6	. B. B Br County on
Occupation		_ E	Employer		Click Here to	r Memo Itemization
Business Address						
Type of Contribution:	Direct		Loan from a person	Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?		YES 4. Date of Recei	pt <u>06/01/20</u>		Microsoft Control (1906) 1 State 1 Sta
PETRUSAK, NATI 12900 HALL RD STERLING HTS, I					§ 100.00	\$
5. If over \$100.00 cun					Click Here fo	r Memo Itemization
Occupation		En	nployer			
'siness Address	for-occurso e.e.					
ype of Contribution:	<b>∠</b> Direct		Loan from a person	Fund Raiser	ZP H	
3. Contribution # 3 Name & Address:	PAC Receipt?		YES 4. Date of Rece	ipt 06/01/30		
YONO, ROBIN 6186 WINDEM SHELBY TWP,	MI 48316				\$ 100.00 Click Here for	\$ Memo Itemization
5. If over \$100.00 cur	nulative, please pro					
Occupation			Employer			
Business Address Type of Contribution:	Direct		Loan from a person	Fund Raiser		
3. Contribution # 4	PAC Receipt?			eipt 06/01/20	. Communication and instruction of the communication of the communicatio	
Name & Address ANDREWS, CL 53985 SUTHER SHELBY TWP,	RLAND LN	L	1		<sub>\$</sub> 100.00	\$
5. If over \$100.00 cu	mulative, please pro	vid	e:		Click Here for	Memo Itemization
Occupation			Employer		Onor Hore for	Memo Remization
Business Address	got a serving of "	parame	T			
Type of Contribution	:  Direct		Loan from a person	Fund Raiser		
$\smile$				Page Subtotal	\$400.00	-
Á				rand Total of All Schedules 1A plete on last page of Schedule)	Enter this total on	
Page of	)				line 3a of Summary Page.	



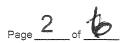
# ITEMIZED CONTRIBUTIONS SCHEDULE 1A

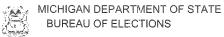
CANDIDATE COMMITTEE

1. Committee I.D. Number 137189

2. Committee Name CTE MARIA G. SCHMIDT

CANDIDATE COMMITTEE 2. Committee Manie				
nter 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 06/15/20  Name & Address:  LAWRENCE M SCOTT  12900 HALL RD #350  STERLING HEIGHTS, MI 48313	<sub>s</sub> 200	\$		
5. If over \$100.00 cumulative, please provide:  Occupation ATTORNEY Employer OREILLY-RANCILIO	Click Here f	Click Here for Memo Itemization		
Business Address 12900 HALL RD #350 STERLING HGTS, MI 48313  Type of Contribution: Direct Loan from a person Fund Raiser				
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 06/15/20  Name & Address		1 H		
CHARLES TURNBULL 53957 SUTHERLAND CT SHELBY TWP, MI 48316	§ 200	\$\$		
5. If over \$100.00 cumulative, please provide:  Occupation ATTORNEY Employer OREILLY-RANCILIO	Click Here f	for Memo Itemization		
Business Address 12900 HALL RD #350 STERLING HEIGHTS, MI 48313  pe of Contribution: Direct Loan from a person Fund Raiser				
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 06/01/20 Name & Address:				
MARC KASZUBSKI 1096 BROMPTON RD ROCHESTER HILLS, MI 48309	§ 250	\$		
5. If over \$100.00 cumulative, please provide:  Occupation ATTORNEY  Employer OREILLY-RANCILIO	Click Here to	or Memo Itemization		
Occupation ATTORNEY Employer OREILLY-RANCILIO Business Address 12900 HALL RD #350 STERLING HEIGHTS, MI 48313				
Type of Contribution: Direct Loan from a person Fund Raiser				
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt 06/01/20 Name & Address  DONALD DENAULT				
15731 MARCIE FRASER, MI 48026	<sub>\$</sub> 200	\$		
5. If over \$100.00 cumulative, please provide:  Occupation ATTORNEY Employer OREILLY-RANCILIO	Click Here f	or Memo Itemization		
Business Address 12900 HALL RD #350 STERLING HGTS, MI 48313				
Type of Contribution: Direct Loan from a person Fund Raiser				
Page Subtota	\$850.00			
Grand Total of All Schedules 1A (Complete on last page of Schedule	}	· visit in the control of the contro		





# ITEMIZED CONTRIBUTIONS **SCHEDULE 1A**

#### CANDIDATE COMMITTEE

1. Committee I.D. Number \_\_137189

CTE MARIA G. SCHMIDT

Enter contributor's name and ad middle initial. Check box to indicommittee (PAC) Report <u>all</u> cor	cate if contribu	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)		
3. Contribution #1 PAC Name & Address: UAW MICHIGAN V-PA 8000 E. JEFFERSON DETROIT, MI. 48214		YES 4. Date of Receip	ot 07/02/20	<sub>\$</sub> 2500	\$
5. If over \$100.00 cumulative,	please provid	e:		Olista Hana fa	B. A
Occupation		Employer		Click Here to	Memo Itemization
Business Address					
Type of Contribution: V Direct	ct	Loan from a person	Fund Raiser		
Contribution #2 PAC Name & Address	Receipt?	YES 4. Date of Receip	ot		
				\$	\$
5. If over \$100.00 cumulative, p	please provid	e:		Click Here for	Memo Itemization
Occupation	E	mployer			
Business Address					
Type of Contribution: Direct	t 🔲	Loan from a person	Fund Raiser		
3. Contribution # 3 PAC Name & Address:	Receipt?	YES 4. Date of Recei	ipt		element of the second of the s
				\$	\$
5 If over \$100.00 cumulative,	niana menid			Click Here for	Memo Itemization
Occupation		Employer			
Business Address  Type of Contribution: Direct	ot [	Loan from a person	Fund Raiser		
3. Contribution # 4 PAC Name & Address	Receipt?	YES 4. Date of Rece	eipt		
				\$	\$
5. If over \$100.00 cumulative,	please provid	e:		Click Here for	Memo Itemization
Occupation		Employer			
Business Address					
Type of Contribution: Dire	ect	Loan from a person	Fund Raiser		
Terrorental Control of the Control o			Page Subtotal	\$2,500.00	
		C.	and Total of All Schedules 1A	\$2.750.00	

(Complete on last page of Schedule) \$\frac{\\$3,750.00}{-}\$

Enter this total on line 3a of Summary Page.



# **ITEMIZED IN-KIND CONTRIBUTIONS**

#### SCHEDULE 1-IK

1. Committee I. D. Number 137189

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2. Committee Name CTE MARIA G. SCHIMIDT

OANLIDAIL OOMIN	18 8 U Flace Scan		
3. Name and Address from whom received if contribution is from an individual, enter last name first. Check box to indicate if contribution s 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: GREGORY A. BUSS 12900 HALL RD #3:22 STERLING HEIGHTS, MI 48313 If over \$100.00 cumulative, please provide: Occupation: Employer Name & Business Address: SELF EMPLOYED	Gioods or Services Purchased by Candidate or Others  Gioods or Services Purchased by Candidate or Others- LCIAN  Description  LEGAL REPRESENTATION FOR DISANC VS. STERLING HEIGHTS CITY ELECTION COMMISSION  5. Date Of Receipt: 05/24/2:1  6. Vendor Name & Address:	750.00 \$_	mization
Fund Raiser Contribution			
Contribution # 2 PAC Receipt? Yes IName & Address  MARIA SCHMIDT  35755 WOODVILLA DR.	Goods or Services Purchased by Candidate or Others	00.00 \$	
STERLING HGTS, MI 48312  If over \$100.00 cumulative, please provide: Occupation:  Employer Name & Address:	Goods or Services Purchased by Candidate or Others- LOAN  Description LATE FILING FEE  5. Date Of Receipt: 02/05/21  6. Vendor Name & Address:	ck Here for Memo Ite	mization
Fund Raiser Contribution			
Contribution #3 PAC Receipt? Yes 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-LCAN	\$ <u></u>	
If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address:	Description  5. Date Of Receipt:  6. Vendor Name & Address: Cli	ck Here for Memo Ite	emization
Fund Raiser Contribution			
	Page Subtotal	\$850.00	
	Grand Total of all Schedules 1-lk (Complete on last page of Schedule		

Enter this total on line 6 of Summary Page



# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number

137189

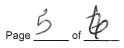
2. Committee Name CTE MARIA G. SCHMIDT

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1  Name C & G NEWSPAPERS	Purpose: SENTRY ADS	06/03/20 ——————	\$ 820.00
Address 13650 11 MILE RD WARREN, MI 48089	Click F	Here for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name MASS MAILING		06/23/20	s 428.40
Address	Purpose:	Date	
35468 MOUND RD STERLING HGTS, MI 48310	Click H	lere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name SAWICKI AND SONS		06/24/20	\$383.08
Address 1521 LAFAYETTE	Purpose: JOINT LAWN SIGNS	Date	6.046.169.00.490.000.000.000.000.000.000.000.000
DETROIT, MI 48216	Click F	lere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name AMERICAN GRAPHICS		06/28/20	\$ 345.98
Address 34895 GROESBECK HWY	Purpose:	Date	
CLINTON TWP, MI 48035	Click H	lere for Memo	Itemization 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 F	Here for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
	statement Subto	tal this page	\$1,977.46

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

\$1,977.46

Enter this total on line 8a of Summary Page





## **DEBTS AND OBLIGATIONS** SCHEDULE 1E

1. Committee I.D. Number

137189

**CANDIDATE COMMITTEE** 

2. Committee Name CTE MARIA G. SCHMIDT

This Schedule itemizes:		na principalis principalis de compresenta por descripción especial de manda diferente del consede disposar e describido es						
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.)								
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 amount of each payment	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: ROBERT J. SCHMIDT	4, Type: LOAN	12/17/07 <sub>\$</sub> 720.00						
35755 WOODVILLA DR	5. Date Debt Was Incurred:	\$	and the second s					
STERLING HGTS, MI.48312	01/24/03	\$		e 880.00				
2 3 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	6. Original Amount of Debt:	\$	\$ 720.00	\$ 000.00				
	\$_1,600.00		and the state of t	FORGIVEN				
If bank loan, name of endorser or guarantor:	<u> Andrew Andrew Commenter</u>	\$ Am	nount Endorsed: \$					
Debi #2 Corp? Yes	LOAN							
Owed to or by: ROBERT J. SCHMIDT	4. Type: LOAN	\$	Alleganista					
35755 WOODVILLA DR	5. Date Debt Was Incurred: 5/30/03	S	giornal grande sitiane					
STERLING HGTS, MI 48312	6. Original Amount of Debt:	\$	s 0.00	s 300.00				
	s 300.00	\$	1 \$ 0.00					
	9	\$		FORGIVEN				
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$_					
Debt #3 Corp? Yes Owed to or by:	4. Type: LOAN	\$						
ROBERT J. SCHMIDT	5. Date Debt Was Incurred:	Š		syridayanan				
35755 WOODVILLA DR.	2/23/05		epopuli petanada	dipunindent de la constant de la con				
STERLING HGTS, MI 48312	6. Original Amount of Debt:	3	\$ 0.00	\$_1,000.00				
	\$_1,000.00	\$		FORGIVEN				
		\$		. 0.1011				
If bank loan, name of endorser or guarantor:		Α	mount Endorsed: \$_	al hazantirkwee				
		Page Subtota	l (Outstanding debt)	\$2,180.00				
10	emplete on last page of Schedule s	Grand Total	of all Schedules 1E	\$2,180.00				
19.			and committees!	Enter this total				

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.

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

