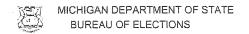


CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

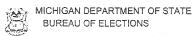
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by indidate.	3. This Statement covers From	1-1-21	to 7-1	18-21	/
1. Committee I.D. Number		4. Candidate Last Name	First Na	me	M.I.	Marian
13696950		Ziarko	Barbara		Α	
2. Committee Name		4a. Office Sought Including Dis	trict # or Community Se	erved (If applicabl	e)	
CTE Barbara A. Ziarl	10	City Council				
CTE Barbara A. Zian	KO	4b. County of Residence MA	СОМВ	Z		
5. Committee's Mailing Address 13805 Deepwood Ct. Sterling Heights, MI 48312		6. Treasurer's Name & Reside Barbara A. Ziarko 13805 Deepwood Ct Sterling Heights, MI		MWCOME COUNTY	22	C 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Area Code and Phone (586) 939-0332 If the address in this box is different from the commit mailing address on the Statement of Organization, no be sent to this address by the filing official.	ttee nail may	Area Code & Phone (586) 9	39-0332	25 A T C E C E C E C E C E C E C E C E C E C	2 C	
7. Treasurer's Business Address 13805 Deepwood Ct. Sterling Heights, MI 48312		8. Designated Record Keeper Designated Record Keeper)	s Name and Address (I	f the committee h	as an	
Area Code and Phone (586) 939-0332		Area Code and Phone				
9. TYPE OF STATEMENT			9e. Dissolution of Ca	andidate Commi	ttee	
9a. Pre-Election OR 9b. Post-Election	Required ON is not on the current year:		By checking this if	e candidate or his	s or her spous	se is here
Pre-Election or Post-Election Statement relates to:	July Quart	erly	by discharged and forg the committee. The co owes no lates fees or h	ommittee has no	oustanding as	from ssets,
Primary	October C)uarterly		ad any duotanan	ig 400t.	
General Convention		,	Further, if the dissolution considered a request for	on cannot be gran or the Reporting \	nted, that this Naiver.	be
Special	9c. 🗀 ,	10				
School	Annua	al Statement () Coverage Year	Effective dat	e of dissolution		
Caucus	(Com	idment to Campaign Statement plete Item 9a, 9b, 9c or 9e to te which Statement is being ded.)	Note: The disposition Schedule 1B and the		must be repo	rted on
Date of Election, Convention or Caucus						
08/03/21						
,						
10. Verification: I/We certify that all reasonable diligemy/our knowledge and belief the contents are true, a	ence was used accurate and co	in the preparation of this statem	ent and attached sched	ules (if any) and t	o the best of	***************************************
Current Treasurer or Designated Record keeper Barbara A. Zi		Parborato	earks.	7-	22-	.21
Type or Print Name		Signature		Date		- F
Candidate Barbara A. Ziarko		- Parbarall	Larko	Date 2-	22-	21



SUMMARY PAGE

2. Committee Name CTE Barbara A. Zialko

CANDIDATE COMMITTEE		
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>1175.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ 1175.00	(18.) \$
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	(20.) \$
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ 2469.36	
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.) \$ 2469.36	(23.) \$
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.) \$	(24.) \$
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.)\$ 5600.00	
b. Owed to the Committee (Schedule 1E)	(12b.)\$	
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15)	BALANCE STATEMENT (13.) \$ 2249.25 (14.) + \$ 1175.00 (15.) = \$ 9424.25 (16.) - \$ 2469.36 (17.) \$ 6954.99	*



CANDIDATE COMMITTEE

1. Committee I.D. Number 1309 4950

Enter contributor's name and address. If contribution is from an individual, enter last name, first name,

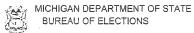
6. Amount

7. Cumulative for

middle initial. Check box to indicate if contribution is from a Political Committee or an Independ Committee (PAC) Report all contributions regardless of amount.	dent Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 1/2 Name & Address: Kaith Jablons Ki	
21318 Florance Macomb, M1 48044 5. If over \$100.00 cumulative, please provide:	\$ 100.00 \$ Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/26/3. Name & Address	21
Nathan Petrusak 12900 Hall Rd Ste. 350 Sterling Hgts MI 40313	s_100.00 s
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 Fund Raiser	
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 5/27/2	21
Clark Andrews 53985 Suthenandlu. Shellay Township, MI 48310 5. If over \$100.00 cumulative, please provide:	\$ 100.55 \$ Click Here for Memo Itemization
Occupation Employer	
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution #4 PAC Receipt? YES 4. Date of Receipt W 1 72 Name & Address JAMES SAKONI 50691 Shelby Rd. Shelby TWP, MI 46316 5. If over \$100.00 cumulative, please provide:	\$ 100.00 \$
Occupation Employer	Click Here for Memo Itemization
Business Address	
Type of Contribution: Direct Loan from a person Fund Raiser	
Pa	ge Subtotal 400.00
Grand Total of All Sch (Complete on last page o	f Schedule) Enter this total on
1 7	line 3a of Summary

Page of

Page.



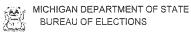
CANDIDATE COMMITTEE

1. Committee I.D. Number 13696950
2. Committee Name CTE BAYDAYA A. ZIANYO

Enter contributor's name and address. If contribution is from an individual, enter last name, first name,	6. Amount	7. Cumulative for
middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		Election Cycle for Each Contributor (Through
3. Contribution #1 PAC Receipt? YES 4. Date of Receipt 5/27/21		date of receipt)
Name & Address:		
Robin Yono		
0184 Windemere Ln.	. 100.00	œ
Shelby Twp, MI 49310 5. If over \$100.00 cumulative, please provide:	2 100	D
	Click Here for	or Memo Itemization
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 5/20/21		
Donald Denault		
15731 Marcie	\$ 200.00	\$
Fraser, MI 480ZU		·
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Lawyer Employer Orally Rancillo		
Business Address 12900 Hall Rd, Stc. 350 SH, MI 40312	•	
Type of Contribution: Loan from a person Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 14/2		
Name & Address: Charles Tumbull		
53957 Sutherland	\$ 200.00	e
• • • • • • • • • • • • • • • • • • • •	****	Ψ
Shelby Twp, MI 46310 5. If over \$100.00 cumulative, please provide:	Click Here for	r Memo Itemization
Occupation Lawyer Employer Orally Rancillio		
Business Address 12900 Hall Rd. Stc. 350 SH, MI 49313		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 4 VI52		
Lawrence Swith		
12900 Hall Rd Ste. 350	\$ 200 %	\$
Sterling Hgts, MI 40313 5. If over \$100.00 cumulative, please provide:		¥
	Click Here fo	r Memo Itemization
Occupation Lawyer Employer Okeilly Ranallo	_	
Business Address 12900 Hall Rd Ste. 350 SH, MI 48313	3	
Type of Contribution: Direct Loan from a person Fund Raiser		NAME AND ADDRESS OF THE PARTY O
Page Subtotal	700.00	
Grand Total of All Schedules 1A	7175.00	-
(Complete on last page of Schedule)		

Page 2 of 7

Enter this total on line 3a of Summary Page.



CANDIDATE COMMITTEE

1. Committee I.D. Number

2. Committee Name

Enter contributor's name and address. If contribution is from an individual, enter last name, first name,

6. Amount

7. Cumulative for

Committee (PAC) Report <u>all</u> contributions regardless of amount.		Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? YES 4. Date of Receipt 5/28/21 Name & Address:		
Marc Kaszubski		
1094 Brompton Rd.	250.00) \$
Rochester Hills, MI 40309 5. If over \$100.00 cumulative, please provide:	V	
Occupation LAWYER Employer ORcilly Rancillo	Click Here fo	or Memo Itemization
Business Address 12900 Hall Rd Ste 350 SH, MI 46315	3	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 719121 Name & Address		
Rachel Skodek	in a Ch	
27U7 NOWALK	\$ 100.00	\$
Hantranck, MI 48212 5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation OWNCR Employer Skodek Market	0,500,700,70	in one seem action
Business Address 40217 Mound Rd. Storling Hats, MI 4	8312	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 715121	_	
John Boloana	ION M	
19135 Saxon Dr.	² 100°0P	\$
Beverly Hills, MI 48025 5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address Type of Contribution: Direct Loan from a person K Fund Raiser		
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7/1/2\		
JOZEF STOCK		
2773 Norwalk	: 100.06	0
Hamtvamck, MI 48212	9	
5. If over \$100.00 cumulative, please provide:	Click Here fo	r Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: Direct Loan from a person X Fund Raiser		
Page Subtota	55000	

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

Enter this total on line 3a of Summary Page.

Page 3 of 7



CANDIDATE COMMITTEE

1. Committee I.D. Number 13696950

2. Committee Name CTE Barbara A Ziarko

	ox to indicate if contri	ibution is from a Political C	dual, enter last name, first name committee or an Independent	, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: Shant Sh 23470 R Warren, M 5. If over \$100.00 cum	yan Rd	YES 4. Date of I	Receipt <u>4 30/2</u> 1	\$ 100.00	\$or Memo Itemization
Occupation		Employer		-	or Memo Remization
Business Address Type of Contribution:	Direct	Loan from a person	X Fund Raiser		
3. Contribution #2 Name & Address JONN Klik 43173 For Stevling Hg 5. If over \$100.00 cum	tner.	YES 4. Date of f	Receipt 111121	\$_ IDD.90 Click Here for	sor Memo Itemization
Occupation		Employer			
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution # 3 Name & Address: Alan Cast 28834 Pa Warren, M 5. If over \$100.00 cum Occupation Owne Business Address 32 Type of Contribution:	inama S I 48092 Julative, please pro- K	vide:	Neceipt 7/2/21 Neceipt 7/2/21 Neceipt 7/2/21 Neceipt 7/2/21 Neceipt 7/2/21		. \$ r Memo Itemization
3. Contribution # 4 Name & Address JONN FEN 13209 LII SHENINGH 5. If over \$100.00 cur Occupation Rest Business Address Type of Contribution:	iulative, please pro	312	f Receipt 7/9/2	\$ 20000 Click Here for	sor Memo Itemization
			Page Sub	total (00).00	
		1	Grand Total of All Schedules		

Page 4 of 7

Enter this total on line 3a of Summary Page.

BUREAU OF ELECTIONS

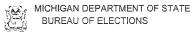
ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1, Committee I.D. Number 13696950

2. Committee Name CTE Baybara A. Ziarko

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 <u>all</u> 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 1/1/2		
Stephen Fangori 8104 Rosebud Lane Clarkston, MI 48348	\$ 200.00	\$
5. If over \$100.00 cumulative, please provide:	Click Here f	or Memo Itemization
Business Address 51301 Schoenhow, Shelby Twp, MI 48	315	
Type of Contribution: Direct Loan from a person Fund Raiser	a commence	
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/2/21		
A. Lynn 20009 Deerfield	s 300.00	\$
Farming ton, MI 48335 5. If over \$100.00 cumulative, please provide: Occupation OW MAR Employer Nothing Bundt Cakes	Click Here fo	or Memo Itemization
Business Address 14294 Hall Rd, Stor. Hgts M1 48313 Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 1/30/21		
Name & Address: Lacurence Calcaterra	-	
34900 Schoennerr	\$ 200 P C	\$
Starling Hats, MI 48312 5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation OWNER Employer WUSEK CALCUTERRA		
Business Address 36900 SCN0eNNov SH, MI 48312 Type of Contribution: Direct Loan from a person Fund Raiser		
Type of Contribution: Direct Loan from a person Fund Raiser 3. Contribution # 4 PAC Receipt? X YES 4. Date of Receipt (129 12)		
VAW Michigan V PAC		
8000 5. Jefferson	\$ 2500.00	\$
Detvoit MI 40214 5. If over \$100.00 cumulative, please provide:	Click Here fo	or Memo Itemization
Occupation Employer		
Business Address		
Type of Contribution: X Direct Loan from a person Fund Raiser	.,	
Page Subtotal Grand Total of All Schedules 1A	7175.00	
(Complete on last page of Schedule)		J y



CANDIDATE COMMITTEE

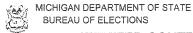
1. Committee I.D. Number 13696950

2. Committee Name CTE Baybara A. Zianko

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 7/1121 Name & Address: Keyin Denhal 700 N. Old Woodward Stc. 300 Birmingham, MI 48009 5. If over \$100.00 cumulative, please provide:	\$ 100.00	\$or Memo Itemization
Occupation Employer	011011 1 1010 1	of World Hornization
Business Address Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #2 PAC Receipt? YES 4. Date of Receipt 7/1/21 Name & Address		
Phil Ruggeri 55744 Saint Regis 5nelby Tup, MI 48315 5. If over \$100.00 cumulative, please provide: Occupation Atomey Employer Self Business Address 43231 Schoenherr SH, MI 48313	\$ 500.06 Click Here fo	sor Memo Itemization
Type of Contribution: Direct Loan from a person X Fund Raiser		
3. Contribution #3 PAC Receipt? YES 4. Date of Receipt 7/12/21 Name & Address: [] KOS BONNER 4075 SANGVASS W. ANN AYDON MI 48108 5. If over \$100.00 cumulative, please provide:	s 200.00	\$r Memo Itemization
Occupation OWNER Employer BONNER AG		
Business Address 1054 S. Main St. Ann Avoor, MI 481 Type of Contribution: Direct Loan from a person Fund Raiser	04	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 7/13/21 Name & Address TONY GAND U303 211 Mile Rd Stc. 200 Washington, MI 48004 5. If over \$100.00 cumulative, please provide: Occupation DWNLL Employer SGF Business Address U303 211 Mile Rd, Stc 200 Wash. Twp	_	ser Memo Itemization
Type of Contribution: Direct Loan from a person X Fund Raiser		
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)	1300.00	

Page 6 of 7

Enter this total on line 3a of Summary Page.



CANDIDATE COMMITTEE

1. Committee I.D. Number 13696950

2. Committee Name CTE Baybara A. Ziav Ko

	to indicate if contri	ntribution is from an individual, bution is from a Political Comm gardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 Name & Address:	PAC Receipt?	YES 4. Date of Recei	pt 7117/21		
Dominic M 3495 Mog bakland T	evict. Np.MI	48306		§ 300.0°	\$
5. If over \$100.00 cumula		ide:	Homes	Click Here fo	or Memo Itemization
Occupation OWN		Employer Moceki	700 41/11/1	Lille Mi	402710
Business Address 300	JO UNIV	EVGITY UV. STC	. 200 Auburr	I WILLS!	10024
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution #2	PAC Receipt?	YES 4. Date of Recei	pt 7/14/21		
Name & Address	al Cwita	Iski treasure	2		
		ism masura		, 100.00	
31412 Ga		ماء		\$_100.00	\$
Roseville, N				Official Laure for	B. A
5. If over \$100.00 cumula	, ,			Click Here to	r Memo Itemization
Occupation		Employer			
Business Address			-		
Type of Contribution:	Direct	Loan from a person 🔀	Fund Raiser		
Name & Address: ROBOT BU 35740 GO SHOTING HO 5. If over \$100.00 cumula	15, MI 4	8312		s 25.00 Click Here for	\$r Memo Itemization
Occupation		Employer			
Business Address					
Type of Contribution:	Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date of Rec	eipt		
				\$	\$
5. If over \$100.00 cumul	ative, please prov	vide:		Click Here fo	r Memo Itemization
Occupation		_ Employer			
Rusinass Address					
Business Address Type of Contribution:	Direct	Loan from a person	Fund Raiser		
L 1990 of Contambution. L	_ Direct	L Loan nom a person		1125 00	
Page 7 of 7			Page Subtotal irand Total of All Schedules 1A plete on last page of Schedule)	H25.00 1175.00 Enter this total on line 3a of Summary Page.	

ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

13696950

2. Committee Name CTE Barbara A. Ziarko

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Name Macomb County Treasurer. Address 1 S. Main St. 2nd Floor Mt. Clemens, M1 49043	Purpose: Late Fee Click I Check box if this expenditure is payment of debt or obligation reported on previous	2/5/21 Date Here for Memo I	\$ 100 PO
Fund Raiser Expenditure #2	statement		
Name C&G NEWSPAPER. Address	Purpose: Advertising	6/1121 Date	\$ <u>820.00</u>
13650 Eleven Mile Rd. Warren, MI 48089	Click I	Here for Memo I	temization Type
Fund Raiser Expenditure #3	statement		**************************************
Name Mass Mailing Address 35440 Mound Rd.	Purpose: Mailing	<u>6/22/2</u> Date	s <u>428.40</u>
Sterling Hgts, MI 40310	Click In Check box if this expenditure is payment of debt or obligation reported on previous statement		temization Type
Expenditure #4			
Address 1521 W. Lafayette Blvd. Detroit, MI 4021U	Purpose: <u>Gigns</u>	<u>6/24/21</u> Date	\$ 383.08
	Click I		temization Type
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5 Name American Graphics Address 34895 Grosebeck Clinton Twp, MI 48035	Purpose: Mailing	<u>4 26 2 </u> Date	\$ 245 .98
	Check box if this expenditure is payment of debt or obligation reported on previous		Itemization Type
Fund Raiser	statement	otal this page	2070 IIIA
<u></u>	Subt	otal this page	2077.40

Enter this total on line 8a of

Grand Total of all Schedules 1B (Complete on last page of Schedule) 2449.30

SCHEDULE 1B CANDIDATE COMMITTEE

ommittee I D Number 13696950

2. Committee Name CTE Barbara A. Ziarko

3. Name and address of person or vendor to whom paid 4. Purpose (Required Information) 5. Date 6. Amount Expenditure #1 Name Addi Purpose: Tablecloths Address 41500 Hoyes Clinton Twp, MI 40034 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous X Fund Raiser statement Expenditure #2 Name Kristi Hallman \$ 12.71 Purpose: Trank you Notes Address 13570 14 Mile Rd Warren. MI 49098 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser Expenditure #3 Name Kristi Hallmank \$ 12.71 Purpose: Thank You Notes Address 41891 Garfield Clinton Twp, MI 48038 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous X Fund Raiser Expenditure #4 Name Office Depot \$ 32.85 Purpose: Labels 37400 van Dyke Stening Heights, MI 48312 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Fund Raiser statement Expenditure #5 Name COSTCO Purpose: Stamps Address 30550 Stephenson Hwy Madison Hgts, MI 48071 Click Here for Memo Itemization Type Check box if this expenditure is payment of debt or obligation reported on previous Y Fund Raiser statement

Subtotal this page

287.22

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

2469.36

ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

ommittee I. D. Number 13696950

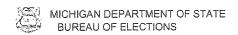
2. Committee Name CTE Barbara A. Ziarko

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Gardner Studios		0/19/21	\$104.68
	Purpose: Invitations	Date	
201 Main ST. 9		Here for Memo	temization Type
Stillwater, MN 55082		IOLE IOLIVICITIO	terrization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name			\$
		Date	Ψ
Address	Purpose:		
	Click I	Here for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3	Vision (10) (t		
Name			
		Data	\$
Address	Purpose:	Date	
,	Click H	Here for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name			
		Date	\$
Address	Purpose:		
	Click I	Here for Memo I	temization Type
	Check box if this expenditure is payment of		71
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name			
Address	Purpose:	Date	\$
			Itemization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
	Subto	otal this page	104.68

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

2469.36

Enter this total on line 8a of



DEBTS AND OBLIGATIONS 1. Committee I.D. Number 13696950 **SCHEDULE 1E**

CANDI	DATE	COMM	NITTEE

Page 1 of 2

CANDIDATE COMMITTEE 2. Co	ommittee Name	ala A. Ziaiku					
This Schedule itemizes:		ATTERNATION OF THE PROPERTY OF					
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 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	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:	4. Type: loan	\$					
Tommy Ziarko 13805 Deepwood Ct.	5. Date Debt Was Incurred:	\$					
Sterling Heights, MI 48312	02/18/05	\$		_{\$} 1,000.00			
	6. Original Amount of Debt:	\$	\$	\$FORGIVEN			
	\$_1,000.00	\$		I OKGIVEN			
If bank loan, name of endorser or guarantor:	dorser or guarantor: Amount Endorsed: \$						
Debt #2 Corp? Yes Owed to or by: Tommy Ziarko 13805 Deepwood Ct. Sterling Heights, MI 48312	4. Type: loan 5. Date Debt Was Incurred: 07/01/01 6. Original Amount of Debt:	\$ \$		¢ 1,100.00			
	\$ 1,100.00	\$\$	1 \$	FORGIVEN			
If bank loan, name of endorser or guarantor: Debt #3 Corp? Yes		Ar	nount Endorsed: \$				
Tommy Ziarko 13805 Deepwood Ct. Sterling Heights, MI 48312	4. Type: loan 5. Date Debt Was Incurred: 04/2003 6. Original Amount of Debt:	\$ \$ \$ \$	\$	\$_900.00			
	\$_900.00	\$		FORGIVEN			
If bank loan, name of endorser or guarantor:		Α	mount Endorsed: \$_	T			
		Page Subtota	l (Outstanding debt)	\$3,000.00			
(0	Complete on last page of Schedule		l of all Schedules 1E or to the committee)				
A debt or obligation must be shown on this Sched this Campaign Statement or it was forgiven during	ule if there was an outstanding a the period covered by this Cam	mount owed on it at the opaign Statement.	closing date of	on line 12a "owed by"" or line 12b "owed to" of the Summary Page			



DEBTS AND OBLIGATIONS SCHEDULE 1E

1. Committee I.D. Number

13696950

CANDIDATE	COMMITTEE
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2. Committee Name CTE Barbara A. Ziarko

CANDIDATE COMMITTEE 2. 9	Ommittee Name			
This Schedule itemizes:		WE		
a Debts and obligations owed by or forgiven the com (Che	mittee OR b. Debts ck either a or b. Use only for the pu	s and obligations owed to rpose checked.)	or forgiven <u>by</u> the con	nmittee.
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	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:	4. Type: loan	\$		
Barbara Ziarko 13805 Deepwood Ct.	5. Date Debt Was Incurred:	\$		
Sterling Heights, MI 48312	05/01/05	\$		600.00
	6. Original Amount of Debt:	\$	\$	\$_600.00
	\$_600.00			FORGIVEN
If bank loan, name of endorser or guarantor:		\$		
	1	Ar	nount Endorsed: \$	
Debt #2 Corp? Yes Owed to or by: Barbara Ziarko	4. Type: loan	\$		
13805 Deepwood Ct.	5. <u>Date Debt Was Incurred</u> : 10/01/17	\$		
Sterling Heights, MI 48312	6. Original Amount of Debt:	\$		_{\$} 2,000.00
	s 2,000.00	\$	т ф	~
	Ψ	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Α	mount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type:	\$		
owed to dr by.	5. Date Debt Was Incurred:	\$		
	6. Original Amount of Debt:	\$	 \$	\$
	\$	\$	-	FORGIVEN
		\$		
If bank loan, name of endorser or guarantor:			Amount Endorsed: \$_	
		Page Subtot	al (Outstanding debt)	\$2,600.00
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				
(complete on last page of contenting amounts owed by of to the continues)				

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

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