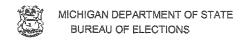


CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.		3. This Statement covers From:	01/01/21	to 07/20/21		
1. Committee I.D. Number		4. Candidate Last Name	Fir	rst Name	M.I.	
69133-50		Rice Steve				
		4a. Office Sought Including District # or Community Served (If applicable)				
2. Committee Name		City council				
Friends of steve Rice		4b. County of Residence MACOMB				
5. Committee's Mailing Address		6. Treasurer's Name & Residential Address				
5427 Southlawn		Steve Rice		N		
Sterling Heights MI 48310		200 =		Contra		
		Same		26	Control Contro	,
(586) 939-6726				28	N	
Area Code and Phone (586) 939-6726 If the address in this box is different from the committee		Charge contact to the				
mailing address on the Statement of Organization, mail may be sent to this address by the filing official.		Area Code & Phone (586) 939-6726				
7. Treasurer's Business Address		8. Designated Record keeper's Name and Mailing Address (If the committee has a				
N/A		Designated Record keeper)				
Area Code and Phone		Area Code and Phone				
9. TYPE OF STATEMENT	Danis de Oi	NII V II aandidada	9e. Dissolution	n of Candidate Comn	nittee	
9a. Pre-Election OR 9b. Post-Election	Required ONLY if candidate is not on the ballot for the current year: X July Quarterly		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 oustanding assets, owes no lates fees or has any oustanding debt.			
Pre-Election or Post-Election Statement relates to:						
Primary	October Quarterly					
General	October Quarterly		Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.			
Convention				1	,	
Special	9c. Annual Statement ()					
School	Coverage Year		Effective date of dissolution			
Caucus	9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to			370	4000000	
Amount	indica	ate which Statement is being	Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.			
	amen	nded.)	Concume to an	and Cullimary rage.	•	
Date of Election, Convention or Caucus	PAAAAGEE					
	000000000000000000000000000000000000000		***************************************			
10. 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 my\our knowledge and belief the contents are true, accurate and complete.						
Current Treasurer or Stephen Rice 7/23/2/						
Designated Record keeper						
Candidate Steve Rice						
Type or Print Name Signature						



1. Committee I.D. Number 69133

SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Friends Of Steve Rice

RECEIPTS	Column I	Column II
3. Contributions	This Period	Cumulative this election cycle
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 0.00	***************************************
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$_\$0.00	(18.) \$ \$0.00
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.) \$ \$0.00	(20.) \$ \$0.00
IN-KIND CONTRIBUTIONS & EXPENDITURES	•	
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$0.00	(21.) \$ \$0.00
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.) \$ \$0.00	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ \$0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ _\$0.00	(23.) \$ \$0.00
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.)\$ \$0.00	Annual control of the
b. Unitemized (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.) \$_\$0.00	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>\$0.00</u>	
	BALANCE STATEMENT	
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ \$0.00	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ \$0.00	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$_\$0.00	
16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE	(16.)- \$ \$0.00	
(Subtract line 16 from line 15)	(17.) \$ \$0.00	** .