



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FILED 2021 OCT 22 PM 4:30
MACOMB COUNTY CLERK

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 10/17/21

1. Committee I.D. Number 139744	4. Candidate Last Name Kropp	First Name Laura	M.I.
2. Committee Name Friends of Laura Kropp	4a. Office Sought Including District # or Community Served (If applicable) Mayor		
	4b. County of Residence MACOMB		

5. Committee's Mailing Address 15 Bellview Mt Clemens, MI 48043	6. Treasurer's Name & Residential Address Teresa Pionk 55510 E. Nocturne Ln Shelby Twp., MI 48316
Area Code and Phone (586) 933-3974 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.	Area Code & Phone (586) 615-2001

7. Treasurer's Business Address n/a	8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)
Area Code and Phone _____	Area Code and Phone _____

9. TYPE OF STATEMENT 9a. ☒ Pre-Election OR 9b. ☐ Post-Election Pre-Election or Post-Election Statement relates to: ☐ Primary ☒ General ☐ Convention ☐ Special ☐ School ☐ Caucus Date of Election, Convention or Caucus <u>11/02/21</u>	Required ONLY if candidate is not on the ballot for the current year: ☐ July Quarterly ☐ October Quarterly 9c. ☐ Annual Statement (_____) Coverage Year 9d. ☐ Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)	9e. Dissolution of Candidate Committee ☐ 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 1B and the Summary Page.
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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 Designated Record keeper	Teresa Pionk Type or Print Name	 Signature	Date <u>10/21/21</u>
Candidate	Laura Kropp Type or Print Name	 Signature	Date <u>10/21/21</u>



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 139744

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name Friends of Laura Kropp

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>17,690.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$17,690.00</u>	(18.) \$ <u>\$17,690.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>\$0.00</u>	(19.) \$ <u>\$0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>\$17,690.00</u>	(20.) \$ <u>\$17,690.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$0.00</u>	(21.) \$ <u>\$0.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>\$0.00</u>	(22.) \$ <u>\$0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$2,842.56</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>\$0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>\$0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>\$2,842.56</u>	(23.) \$ <u>\$2,842.36</u>
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.) \$ <u>\$593.02</u>	
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.) \$ <u>\$2,261.32</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$17,690.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$19,951.32</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$2,842.56</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$17,108.76</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 <u>04/21/21</u> Name & Address: Joshua Cecil 480 Manitou LaneLake Orion, MI 48362		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer <u>Self Employed</u> 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 <u>06/23/21</u> Name & Address: Mike and Jessica Romska 54100 Shelby RdShelby Twp, MI 48316		\$ <u>100</u>	\$ <u>100</u>
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	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/02/21</u> Name & Address: Patricia Heftler 118 Windwood PointeSaint Clair Shores, MI 48080		\$ <u>100</u>	\$ <u>100</u>
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	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/02/21</u> Name & Address: Stephen Saph Jr. 68 Clinton StMount Clemens, MI 48044		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Insurancre Sales</u> Employer <u>Nickel & Saph</u> Business Address <u>44 Macomb Place, Mount Clemens, MI 48043</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization ☒	

Page Subtotal **\$650.00**

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 139744

2. Committee Name Friends of Laura Kropp

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 <u>07/03/21</u>	
Name & Address: <u>Michelle Debeaussaert</u> <u>39856 Brylor Court Clinton Twp MI 48038</u>		\$ <u>100</u>	\$ <u>100</u>
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 v	
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/04/21</u>	
Name & Address: <u>Brenda (John) Beiter</u> <u>1745 Tiverton Rd. #24 Bloomfield Hills, MI 48304</u>		\$ <u>100</u>	\$ <u>100</u>
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	
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/04/21</u>	
Name & Address: <u>Michelle Weiss</u> <u>18200 Tara Dr Clinton Twp, MI 48036</u>		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Marketing</u> Employer <u>City of Mount Clemens</u> Business Address <u>Mount Clemens MI 48043</u> 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 <u>07/05/21</u>	
Name & Address: <u>James Kopas</u> <u>126 New St Mount Clemens, MI 48043</u>		\$ <u>100</u>	\$ <u>100</u>
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 v	

Page Subtotal \$550.00

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 139744
2. Committee Name Friends of Laura Kropp

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 <u>07/05/21</u> Name & Address: Julie Matuzak 38250 Fairway, Unit 71 Clinton Twp, MI 48038		\$ <u>35</u>	\$ <u>35</u>
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	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/05/21</u> Name & Address: Sheila Strunk 24106 Meadowbridge Clinton Township, MI 48035		\$ <u>50</u>	\$ <u>50</u>
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	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/05/21</u> Name & Address: Lorin Wright 197 Black Ridge Ct TRAVERSE CITY, MI 49696		\$ <u>100</u>	\$ <u>100</u>
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	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/05/21</u> Name & Address: Scott Wendt 1040 Balmoral Drive Mount Clemens, MI 48043		\$ <u>100</u>	\$ <u>100</u>
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 **\$285.00**

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

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line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 <u>07/06/21</u> Name & Address: <u>Beverly Bishop</u> <u>54 KendrickMount Clemens, MI 48043</u>		\$ <u>35</u>	\$ <u>35</u>
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	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/06/21</u> Name & Address: <u>Ferdinando Bartolotta</u> <u>52049 Van DykeShelby Twp, MI 48316</u>		\$ <u>100</u>	\$ <u>100</u>
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	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/06/21</u> Name & Address: <u>Chris Fisher</u> <u>11 BelleviewMount Clemens, MI 48043</u>		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Lawyer</u> Employer <u>Fischer Garon and Hoyumpa, PLLC</u> Business Address <u>48 Market Street Ste 2B, Mount Clemens, MI. 48043</u> 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 <u>07/06/21</u> Name & Address: <u>Melissa Lavender</u> <u>157 Robertson StMount Clemens, MI 48043</u>		\$ <u>70</u>	\$ <u>70</u>
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 \$455.00

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

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line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139744
2. Committee Name Friends of Laura Kropp

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 <u>07/06/21</u>	
Name & Address: Stacy Skaltsounis 19959 RosinClinton Township, MI 48038		\$ <u>100</u>	\$ <u>100</u>
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	
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/06/21</u>	
Name & Address: Lori Stone 27582 EvelynWarren, MI 48093		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>State Representative</u> Employer <u>State of Michigan</u> Business Address <u>100 N Capitol Ave, Lansing MI 48933</u> 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 <u>07/07/21</u>	
Name & Address: Susan Blanchard 42661 Mayhew DrSterling Heights, MI 48314		\$ <u>100</u>	\$ <u>100</u>
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	
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/07/21</u>	
Name & Address: Karol Pasden 19523 Gaynon DrClinton Township, MI 48035		\$ <u>100</u>	\$ <u>100</u>
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 \$550.00

Grand Total of All Schedules 1A
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ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744
2. Committee Name Friends of Laura Kropp

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 <u>07/07/21</u>	
Name & Address: <u>Dave & Lila Tirsell</u> <u>292 Jones St. Mount Clemens, MI 48043</u>		\$ <u>125</u>	\$ <u>125</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u> Employer <u>Macomb Habitat for Humanity</u> Business Address <u>46660 Van Dyke, Shelby Charter Township, MI 48317</u> 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 <u>07/08/21</u>	
Name & Address: <u>Joyce Lalonde</u> <u>24801 Rosalind Ave Eastpoint, MI 48021</u>		\$ <u>35</u>	\$ <u>35</u>
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	
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/08/21</u>	
Name & Address: <u>Leo Lalonde</u> <u>24801 Rosalind Ave Eastpoint, MI 48021</u>		\$ <u>35</u>	\$ <u>35</u>
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	
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/07/21</u>	
Name & Address: <u>William Sowerby</u> <u>37860 Saddle Ln Clinton Township, MI 48036</u>		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>State Representative</u> Employer <u>State of Michigan</u> Business Address <u>100 N Capitol Ave, Lansing MI 48933</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$ 445.00

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
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1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 <u>07/08/21</u> Name & Address: <u>Mark (Rebecca) Verschaeve</u> <u>739 North Channel Dr.Harsens Island, MI 48028</u>		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> 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 <u>07/09/21</u> Name & Address: <u>Kimberly Smith</u> <u>277 CambridgeMOUNT CLEMENS, MI 48043</u>		\$ <u>50</u>	\$ <u>50</u>
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	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/10/21</u> Name & Address: <u>Tammy Simmons</u> <u>17 Breitmeyer PIMount Clemens, MI 48043</u>		\$ <u>20</u>	\$ <u>20</u>
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	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/07/21</u> Name & Address: <u>Stacey Walther</u> <u>Mount Clemens, MI 48043</u>		\$ <u>50</u>	\$ <u>50</u>
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 **\$370.00**

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

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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 <u>07/12/21</u> Name & Address: Edward Bruley 38157 Radde StClinton Township, MI 48036		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Memo Itemization Below ▼	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/12/21</u> Name & Address: Patricia Marshall 1449 Balmoral DrMount Clemens, MI 48043		\$ <u>35</u>	\$ <u>35</u>
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 ▼	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/12/21</u> Name & Address: Marisa Nelson 30207 ManhattanSt Clair Shores, MI 48082		\$ <u>100</u>	\$ <u>100</u>
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 ▼	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/13/21</u> Name & Address: Michael Schichtel Mount Clemens, MI 48043		\$ <u>35</u>	\$ <u>35</u>
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 **\$270.00**

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 139744

2. Committee Name Friends of Laura Kropp

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 <u>07/15/21</u>	
Name & Address: Scott Atchison 49739 Leona Dr. Chesterfield, MI, 48051		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Memo Itemization Below	
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/15/21</u>	
Name & Address: Megan Bailer 23821 Bunker Hill Dr Clinton Twp, MI 48035		\$ <u>50</u>	\$ <u>50</u>
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	
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/15/21</u>	
Name & Address: Monica Baker 636 Huntington Mount Clemens, MI 48043		\$ <u>100</u>	\$ <u>100</u>
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	
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/13/21</u>	
Name & Address: Randall Buchman 7850 Shae Rd Ira MI 48023		\$ <u>1000</u>	\$ <u>1000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>Emerald Growth Partners</u> Business Address <u>41900 Executive Drive, Harrison Twp, MI</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$1,250.00

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 139744
2. Committee Name Friends of Laura Kropp

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 <u>07/15/21</u>	
Name & Address: Shawn Coppins 44 1st Street Mount Clemens MI 48043		\$ <u>35</u>	\$ <u>35</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Memo Itemization Below	
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/15/21</u>	
Name & Address: Ian and Hope Cole 12 Lincoln St Mount Clemens MI 48043		\$ <u>100</u>	\$ <u>100</u>
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	
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/15/21</u>	
Name & Address: Peter Dosmann 3556 Fernleigh Dr Troy MI 48083		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Hair Dresser</u> Employer <u>Self Employed</u> 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 <u>07/15/21</u>	
Name & Address: Jhonny & Christina Escalante 605 Wellington Cres Mount Clemens, Mi 48043		\$ <u>50</u>	\$ <u>50</u>
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 **\$435.00**

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

Enter this total on
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Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 <u>07/15/21</u>	
Name & Address: Laurie Eppler Brian 28 Belleview Street Mount Clemens, MI, 48043		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Memo Itemization Below	
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/15/21</u>	
Name & Address: Laura Fournier 70 Lodewyck St Mount Clemens, MI 48043		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>City Commissioner</u> Employer <u>City of Mount Clemens</u> Business Address <u>Mount Clemens, MI 48043</u> 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 <u>07/15/21</u>	
Name & Address: Cheryl Goin 4370 Barchester Drive Bloomfield Hills MI 48302		\$ <u>50</u>	\$ <u>50</u>
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	
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/15/21</u>	
Name & Address: Joseph George 19922 Westchester Dr Clinton Twp MI 48038		\$ <u>1000</u>	\$ <u>1000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Relator</u> Employer <u>Delta Management</u> Business Address <u>45511 Market St., Shelby Twp, MI 48315</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$1,400.00**

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 139744
2. Committee Name Friends of Laura Kropp

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 <u>07/15/21</u> Name & Address: <u>John George</u> <u>19634 Westchester DrClinton Twp MI 48038</u>		\$ <u>1000</u>	\$ <u>1000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Realtor</u> Employer <u>Delta Management</u> Business Address <u>45511 Market St. , Shelby Twp, MI 48315</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Memo Itemization Below	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/15/21</u> Name & Address: <u>James C George</u> <u>882 Cumberland Rdg CtRochester MI 48307</u>		\$ <u>1000</u>	\$ <u>1000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Realtor</u> Employer <u>Delta Management</u> Business Address <u>45511 Market St. , Shelby Twp, MI 48315</u> 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 <u>07/15/21</u> Name & Address: <u>James & Patrician George</u> <u>19634 WestchesterClinton Twp MI 48038</u>		\$ <u>1000</u>	\$ <u>1000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> 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 <u>07/15/21</u> Name & Address: <u>Rashidah Hammond</u> <u>290 Clinton River DrMount Clemens MI 48043</u>		\$ <u>40</u>	\$ <u>40</u>
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 **\$3,040.00**

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 139744

2. Committee Name Friends of Laura Kropp

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 <u>07/15/21</u> Name & Address: <u>Aaron Hall</u> <u>155 S. Main St Unit 875 Mount Clemens, MI 48043</u>		\$ <u>35</u>	\$ <u>35</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Memo Itemization Below	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/15/21</u> Name & Address: <u>Jan & Roger Heller</u> <u>24082 Medowbridge Drive Clinton Twp 48035</u>		\$ <u>35</u>	\$ <u>35</u>
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	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/15/21</u> Name & Address: <u>Brook Hendrick</u> <u>39314 Nautical Lane Harrison Twp, MI 48045</u>		\$ <u>100</u>	\$ <u>100</u>
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	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/15/21</u> Name & Address: <u>John Hanna</u> <u>1119 Forest Lane Bloomfield, MI 48301</u>		\$ <u>1050</u>	\$ <u>1050</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Self Employed</u> Employer <u>Hanna Development</u> Business Address <u>306 S Washington Ave #212, Royal Oak, MI 48067</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$1,220.00**

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 139744

2. Committee Name Friends of Laura Kropp

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 <u>07/15/21</u>	
Name & Address: <u>Amy Jones</u> <u>26015 Clinton Shore Dr Harrison Township, MI 48045</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Memo Itemization Below ☐	
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/15/21</u>	
Name & Address: <u>Jack Johns</u> <u>35 Riverside Dr. Mount Clemens, MI 48043</u>		\$ <u>50</u>	\$ <u>50</u>
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 ☐	
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/15/21</u>	
Name & Address: <u>Jason Kwapich</u> <u>9117 Eve rd Clarkston MI 48348</u>		\$ <u>70</u>	\$ <u>70</u>
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 ☐	
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/15/21</u>	
Name & Address: <u>Joseph M Krupp</u> <u>41233 Gloca Mora St Harrison Twp, MI 48045</u>		\$ <u>70</u>	\$ <u>70</u>
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 \$290.00

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

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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 <u>07/15/21</u>	
Name & Address: Debbie and Carl Koehler 8359 Colony Dr Pearl Beach MI 48001		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Memo Itemization Below	
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/15/21</u>	
Name & Address: Doug Koehler 8359 Colony Dr Algonac MI 48001		\$ <u>100</u>	\$ <u>100</u>
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	
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/15/21</u>	
Name & Address: Chris Kipp 296 Jones St. Mt. Clemens MI 48043		\$ <u>150</u>	\$ <u>150</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Autoworker</u> Employer <u>Ford</u> Business Address <u>Dearborn, MI</u> 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 <u>07/15/21</u>	
Name & Address: Xin Lin 312 Phillips Ave Clawson, MI 48017		\$ <u>35</u>	\$ <u>35</u>
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 \$ 385

Grand Total of All Schedules 1A
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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139744
2. Committee Name Friends of Laura Kropp

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 <u>07/15/21</u> Name & Address: <u>Jeffrey Morawski</u> <u>14085 claremont Shelby twp, MI 48315</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Memo Itemization Below	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/15/21</u> Name & Address: <u>Sharanne Raye Miller</u> <u>36 Eldredge StMount Clemens, MI 48043</u>		\$ <u>35</u>	\$ <u>35</u>
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	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/15/21</u> Name & Address: <u>Theresa McGarity</u> <u>19 Inches StMount Clemens, MI 48043</u>		\$ <u>100</u>	\$ <u>100</u>
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	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/15/21</u> Name & Address: <u>Austin Nelson</u> <u>22315 Alexander StSt. Clair Shores MI 48081</u>		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>IDC Industries</u> Business Address <u>18901 15 Mile Rd, Clinton Twp MI. 48035</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$485.00**

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

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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 <u>07/15/21</u>	
Name & Address: <u>Michael Oneill</u> <u>43335 Woodbridge DrClinton Twp, MI 48038</u>		\$ <u>100</u>	\$ <u>100</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Memo Itemization Below	
3. Contribution #2	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/15/21</u>	
Name & Address: <u>Nicole Peltier</u> <u>50469 Altman RdChesterfield, MI 48047</u>		\$ <u>40</u>	\$ <u>40</u>
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	
3. Contribution # 3	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/15/21</u>	
Name & Address: <u>Vito Strolis</u> <u>205 North GratiotMount Clemens, MI 48043</u>		\$ <u>100</u>	\$ <u>100</u>
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	
3. Contribution # 4	PAC Receipt? ☐ YES	4. Date of Receipt <u>07/15/21</u>	
Name & Address: <u>Benjamin Miles Sobczak</u> <u>4016 Jane CourtWaterford, MI 48329</u>		\$ <u>1000</u>	\$ <u>1000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Lawyer</u> Employer <u>Pleasantrees</u> Business Address <u>41900 Executive Drive, Harrison Twp., MI</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$1,240.00**

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

Enter this total on
line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 <u>07/15/21</u> Name & Address: <u>Bryan Wickersham</u> <u>42031 Ehrke Drive Clinton Twp MI 48038</u>		\$ <u>1000</u>	\$ <u>1000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Development</u> Employer <u>Emerald Growth Partners</u> Business Address <u>41900 Executive Drive, Harrison Twp., MI</u> 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 <u>07/15/21</u> Name & Address: <u>Michael Yassay</u> <u>508 Main St Northville, MI 48167</u>		\$ <u>1000</u>	\$ <u>1000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Finance</u> Employer <u>Pleasantrees</u> Business Address <u>41900 Executive Drive, Harrison Twp., MI</u> 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 <u>07/15/21</u> Name & Address: <u>Erick Monzo</u> <u>23633 Hagen Macomb, MI 48042</u>		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate</u> Employer <u>Keller Williams</u> Business Address <u>19900 E 10 Mile Rd, St Clair Shores, MI 48080</u> 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 <u>07/15/21</u> Name & Address: <u>Drew Breuninger</u> <u>50 Causeway St #3303 Boston MA 02114</u>		\$ <u>1000</u>	\$ <u>1000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Finance</u> Employer <u>Pleasantrees</u> Business Address <u>41900 Executive Drive, Harrison Twp MI</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$3,250.00**

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

Enter this total on
line 3a of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 <u>07/15/21</u> Name & Address: Karan Bates-Gaslor 147 LodewyckMount Clemens, MI 48043		\$ <u>50</u>	\$ <u>50</u>
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	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/15/21</u> Name & Address: Linda Curolato 57760 Main St. Ste 1New Haven MI 48048		\$ <u>100</u>	\$ <u>100</u>
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	
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/15/21</u> Name & Address: Adam and Andrea Staton 41330 Gloca MoraHarrison Twp, MI 48045		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>General Manager</u> Employer <u>MEAD LEXUS</u> Business Address <u>SOUTHFIELD, MI</u> 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 <u>07/15/21</u> Name & Address: Jack Hanna 9552 Mountain Ridge DrBoulder, CO 80302		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$600.00

Grand Total of All Schedules 1A
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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

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 <u>07/19/21</u> Name & Address: <u>Fabrizio Babino</u> <u>510 Lorimer street Brooklyn, NY 11211</u>		\$ <u>70</u>	\$ <u>70</u>
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	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/20/21</u> Name & Address: <u>Gina Badamo</u> <u>155 Clinton St Mount Clemens, MI 48043</u>		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Barber/Owner</u> Employer <u>Deep Cuts Babershop</u> Business Address <u>81 Macomb Place, Mount Clemens MI 48043</u> 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 <u>07/20/21</u> Name & Address: <u>Mary Fran Sobczynski</u> <u>76 Lodewyck Mount Clemens, MI 48045</u>		\$ <u>100</u>	\$ <u>100</u>
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	
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>07/15/21</u> Name & Address: <u>Judy Hartwell</u> <u>25921 Maritime Cir Harrison Twp</u>		\$ <u>100</u>	\$ <u>100</u>
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 \$435.00

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

17,690
Enter this total on
line 3a of Summary
Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139744
2. Committee Name Friends of Laura Kropp

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Gumbos llc</u> Address <u>53 North Walnut Street; Mt Clemens, MI 48043</u> ☐ Fund Raiser	Purpose: <u>Campaign planning with election committee</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>01/19/21</u> Date	<u>\$ 372.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>Macomb County Ministerial Alliance</u> Address <u>15570 Timbers Edge Dr. Clinton Township, MI 48035</u> ☐ Fund Raiser	Purpose: <u>Sponsorship Ad for MLK campaign</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>01/12/21</u> Date	<u>\$ 300.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>Little Caesars</u> Address <u>19 S. Groesbeck; Mt. Clemens, MI 48043</u> ☐ Fund Raiser	Purpose: <u>Fundraiser planning, flyer taking envelope addressing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/10/21</u> Date	<u>\$ 68.90</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>Sawicki & Sons</u> Address <u>1521 W Lafayette Blvd, Detroit, MI 48216</u> ☐ Fund Raiser	Purpose: <u>campaign yard signs</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/30/21</u> Date	<u>\$ 240.62</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>American Graphis</u> Address <u>34895 Groesbeck Hwy. Charter Township of Clinton, MI 48035</u> ☐ Fund Raiser	Purpose: <u>campaign buttons/literature</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/09/21</u> Date	<u>\$ 82.68</u> Click Here for Memo Itemization Type

Subtotal this page **\$1,064.20**

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139744
2. Committee Name Friends of Laura Kropp

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>TCF/Huntington Bank</u> Address <u>100 N. Main St</u> <u>Mt. Clemens Mi 48043</u> ☐ Fund Raiser	Purpose: <u>Monthly Fee</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/17/21</u> Date	<u>\$ 3.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>TCF/Huntington Bank</u> Address <u>100 N. Main St</u> <u>Mt. Clemens Mi 48043</u> ☐ Fund Raiser	Purpose: <u>Monthly Fee</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/13/21</u> Date	<u>\$ 3.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>The Emerald Theater</u> Address <u>31 N Walnut St.,</u> <u>Mt Clemens MI 48043</u> ☒ Fund Raiser	Purpose: <u>Fundraiser - Food</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/15/21</u> Date	<u>\$ 1500</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>Staples</u> Address ☐ Fund Raiser	Purpose: <u>Paper & Supplies</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/13/21</u> Date	<u>\$ 47.36</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>Vincent Chaple AME</u> Address ☐ Fund Raiser	Purpose: <u>Event Ad</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/01/21</u> Date	<u>\$ 125.00</u> Click Here for Memo Itemization Type

Subtotal this page **\$1,678.36**
Grand Total of all Schedules 1B
(Complete on last page of Schedule)

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139744
2. Committee Name Friends of Laura Kropp

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Macomb Cultural & Economic Partnership</u> Address <u>92 Northbound Gratiot Ave, Mount Clemens,</u> <u>MI 48043</u> ☐ Fund Raiser	Purpose: <u>Sculpture Fundraiser</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/18/21</u> Date	\$ <u>100.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name _____ Address _____ ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____ Click Here for Memo Itemization Type
Expenditure #3 Name _____ Address _____ ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____ Click Here for Memo Itemization Type
Expenditure #4 Name _____ Address _____ ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____ Click Here for Memo Itemization Type
Expenditure #5 Name _____ Address _____ ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____ Click Here for Memo Itemization Type

Subtotal this page **\$100.00**

Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$2,842.56**

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 139744
2. Committee Name Friends of Laura Kropp

This Schedule itemizes:				
a. ☐ Debts and obligations owed <u>by</u> or forgiven the committee OR b. ☐ Debts and obligations owed <u>to</u> or forgiven <u>by</u> 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: Laura Kropp 15 Bellview Mount Clemens, MI 48043	4. Type: <u>Office Supplies</u> 5. <u>Date Debt Was Incurred:</u> <u>06/20/19</u> 6. <u>Original Amount of Debt:</u> \$ <u>157.08</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>157.08</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? ☐ Yes Owed to or by: Laura Kropp 15 Bellview Mount Clemens, MI 48043	4. Type: <u>Evelopes</u> 5. <u>Date Debt Was Incurred:</u> <u>6/25/19</u> 6. <u>Original Amount of Debt:</u> \$ <u>11.65</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>11.65</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by: Laura Kropp 15 Bellview Mount Clemens, MI 48043	4. Type: <u>Postage</u> 5. <u>Date Debt Was Incurred:</u> <u>6/26/19</u> 6. <u>Original Amount of Debt:</u> \$ <u>220.00</u>	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	\$ _____	\$ <u>220.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) **\$388.73**

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 139744
2. Committee Name Friends of Laura Kropp

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: Laura Kropp 15 Bellview Mount Clemens, MI 48043	4. Type: <u>Campaign Mtg</u> 5. <u>Date Debt Was Incurred:</u> <u>06/26/19</u> 6. <u>Original Amount of Debt:</u> \$ <u>67.42</u>	\$ \$ \$ \$ \$	\$	\$ <u>67.42</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? ☐ Yes Owed to or by: Laura Kropp 15 Bellview Mount Clemens, MI 48043	4. Type: <u>Campaign Mtg</u> 5. <u>Date Debt Was Incurred:</u> <u>7/10/19</u> 6. <u>Original Amount of Debt:</u> \$ <u>21.08</u>	\$ \$ \$ \$ \$	\$	\$ <u>21.08</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by: Laura Kropp 15 Bellview Mount Clemens, MI 48043	4. Type: <u>Cookies/Candy</u> 5. <u>Date Debt Was Incurred:</u> <u>9/15/19</u> 6. <u>Original Amount of Debt:</u> \$ <u>64.94</u>	\$ \$ \$ \$ \$	\$	\$ <u>64.94</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

\$153.44

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 139744
2. Committee Name Friends of Laura Kropp

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: Alysa Diebolt 23225 Oakwood Eastpointe, MI 48021	4. Type: <u>Paper</u> 5. <u>Date Debt Was Incurred:</u> <u>10/31/21</u> 6. <u>Original Amount of Debt:</u> \$ <u>50.85</u>	\$ \$ \$ \$ \$	\$	\$ <u>50.85</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? ☐ Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ \$ \$ \$ \$	\$	\$ ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? ☐ Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ \$ \$ \$ \$	\$	\$ ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

\$50.85

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

\$593.02

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.



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139744

2. Committee Name Friends of Laura Kropp

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>07/15/21</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>100</u>	5. Type of Fund Raising Activity <u>Dinner</u>	6. Address and Name (If any) of the place where the activity was held. <u>The Emerald Theater</u> <u>31 N Walnut St.,</u> <u>Mt Clemens MI 48043</u> ☐ Private Residence
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7. Total Contributions \$17,690.00

8. Other Receipts \$0.00

9. Gross Receipts (Add lines 7 and 8) \$17,690.00

10. Total Cost of Event \$1,500.00
(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 (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- 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.