



**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

1. Committee I.D. Number 138484 2. Committee Name CTE Candice B. Rusie 3. Committee's Mailing Address 23149 N. Rosalee Ct St. Clair Shores, MI 48080 4. Candidate Last Name Rusie 4a. Office Sought Including District # or Community Served (if applicable) St. Clair Shores City Council 4b. County of Residence Macomb 5. Treasurer's Name & Residential Address Norma Rusie 21036 St. Corbala St. Clair Shores, MI 48081 6. Designated Record Keeper's Name and Address (if the committee has a Designated Record Keeper) — 7. Treasurer's Business Address 2730 Harper St. Clair Shores, MI 48081 8. 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 8-3-21 9. Type of Statement ☐ 9a. Pre-Election OR ☒ 9b. Post-Election Required ONLY if candidate is not on the ballot for the current year: ☐ July Quarterly ☐ October Quarterly ☐ Annual Statement () Coverage Year ☐ Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9d to indicate which Statement is being amended.) Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page. 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.		9. Type of Statement ☐ 9a. Pre-Election OR ☒ 9b. Post-Election Required ONLY if candidate is not on the ballot for the current year: ☐ July Quarterly ☐ October Quarterly ☐ Annual Statement () Coverage Year ☐ Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9d to indicate which Statement is being amended.) Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page. 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.	
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**SUMMARY PAGE
CANDIDATE COMMITTEE**

1. Committee I.D. Number

138484

2. Committee Name

CTE CANDICE B. Ruse

RECEIPTS

3. Contributions

a. Itemized (Schedule 1A - Column 6)

(3a.) \$ —

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

(3b.) \$ NOT APPLICABLE

c. Subtotal of "Contributions"

(3c.) \$ —

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

(4.) \$ —

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

(5.) \$ —

IN-KIND CONTRIBUTIONS & EXPENDITURES

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

(6.) \$ 377.62

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

(7.) \$ —

EXPENDITURES

8. Expenditures

a. Itemized (Schedule 1B, Column 6)

(8a.) \$ —

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.) \$ —

**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.) \$ —

DEBTS AND OBLIGATIONS

12. Debts and Obligations

a. Owed by the Committee (Schedule 1E)

(12a.) \$ 2186.25

b. Owed to the Committee (Schedule 1E)

(12b.) \$ —

BALANCE STATEMENT

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

(13.) \$ 1086.30

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

(14.) + \$ —

15. SUBTOTAL Add lines 13 and 14

(15.) = \$ 1086.30

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

(16.) - \$ —

17. ENDING BALANCE

(Subtract line 16 from line 15)

(17.) \$ 1086.30

Column II
Cumulative this election cycle

(18.) \$ 965-

(19.) \$ —

(20.) \$ 965-

(21.) \$ 2638.87

(22.) \$ —

(23.) \$ —

(24.) \$ —



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number

138484

2. Committee Name

CTE Candice B. Rustie

3. Name and Address from whom received
If contribution is from an individual, enter last
name first. Check box to indicate if contribution
is from a Political Committee or an Independent
Committee (Both are commonly called PACs).
Report all in-kind contributions.

4. Type of In-Kind Contribution (Check applicable box)

5. Date of Receipt

6. Name & Address of Vendor from whom goods or services were
purchased

7. Amount or
Fair Market
Value

8. Cumulative
for Election
Cycle (Through
date in Item 5)

Contribution # 1

PAC Receipt? ☐ Yes

Name & Address:

Candice Rustie
23149 N. Rosedale Ct
St. Clair Shores, MI 48080

If over \$100.00 cumulative, please provide:

Occupation: Attorney

Employer Name & Business Address:

K10 Discovery
39555 W. 11th St (Hq 8201 Greenleaf Dr
Novi, MI 48325 Ste 300
(revok) McLean, VA 22102

☐ Fund Raiser Contribution

4. ☐ Endorsement or Guarantee of Bank Loan

☐ Goods Donated or Loaned ☐ Services Donated

☒ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description Victory dinner - primary election
8-3-21 results watch party

5. Date Of Receipt:

6. Vendor Name & Address:

Butter Run Saloon
27626 Harper Ave
St. Clair Shores, MI 48081

Click Here for Memo Itemization

\$ 173.10 2449.35

Contribution # 2

PAC Receipt? ☐ Yes

Name & Address

Candice Rustie
23149 N. Rosedale Ct.
St. Clair Shores, MI 48080

If over \$100.00 cumulative, please provide:

Occupation: Attorney

Employer Name & Address:

K10 Discovery
39555 W. 11th St (Hq 8201 Greenleaf Dr
Novi, MI 48325 Ste 300
(revok) McLean, VA 22102

☐ Fund Raiser Contribution

4. ☐ Endorsement or Guarantee of Bank Loan

☐ Goods Donated or Loaned ☐ Services Donated

☒ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description Campaign logo pens - "pass out"

5. Date Of Receipt: 8-5-21

6. Vendor Name & Address:

National Pen Company
12121 Scripps Summit Dr
San Diego, CA 92131

Click Here for Memo Itemization

\$ 204.52 \$ 2653.87

Contribution #3

PAC Receipt? ☐ Yes

Name & Address:

~~Candice Rustie
23149 N. Rosedale Ct.
St. Clair Shores, MI 48080~~

~~If over \$100.00 cumulative, please provide:~~

~~Occupation:~~

~~Employer Name & Address:~~

4. ☐ Endorsement or Guarantee of Bank Loan

☐ Goods Donated or Loaned ☐ Services Donated

☐ Goods or Services Purchased by Candidate or Others

☐ Goods or Services Purchased by Candidate or Others- LOAN

Description

5. Date Of Receipt:

6. Vendor Name & Address:

Click Here for Memo Itemization

☐ Fund Raiser Contribution

Page Subtotal

377.62

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

377.62

Enter this total
on line 6 of Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number

138484

2. Committee Name

CTE Candice B. Rusie

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 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 Owed to or by: Corp? ☐ Yes Candice Rusie 23149 N. Rosedale Ct St. Clair Shores, MI 48080	4. Type: <u>payroll - sign</u> 5. Date Debt Was Incurred: <u>6-4-21</u> 6. Original Amount of Debt: <u>\$ 1060.00</u>	\$ - \$ - \$ - \$ - \$ -	\$ -	\$ 1060.00 ☐ FORGIVEN

If bank loan, name of endorser or guarantor: _____

Amount Endorsed: \$ _____

Debt #2 Owed to or by: Corp? ☐ Yes Candice Rusie 23149 N. Rosedale Ct St. Clair Shores, MI 48080	4. Type: <u>payroll - sign</u> 5. Date Debt Was Incurred: <u>6-23-21</u> 6. Original Amount of Debt: <u>\$ 1126.25</u>	\$ - \$ - \$ - \$ - \$ -	\$ -	\$ 1126.25 ☐ FORGIVEN
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If bank loan, name of endorser or guarantor: _____

Amount Endorsed: \$ _____

Debt #3 Owed to or by: Corp? ☐ Yes	4. Type: _____ 5. Date Debt Was Incurred: _____ 6. Original Amount of Debt: _____ \$ _____	\$ - \$ - \$ - \$ - \$ -	\$ -	\$ - ☐ FORGIVEN
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If bank loan, name of endorser or guarantor: _____

Amount Endorsed: \$ _____

Page Subtotal (Outstanding debt)

2186.25

Grand Total of all Schedules 1E

2186.25

(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.