## CANDIDATE COMMITTEE COVER PAGE

## FOR OFFICIAL USE ONLY

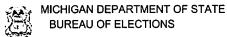
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.		3. This Statement covers From: 07/19/23 to 07/31/21					
1. Committee I.D. Number		Candidate Last Name	First Name		M.I.		
139728		Yanez	Henry		J		
		4a. Office Sought Including District # or Community Served (If applicable)					
2. Committee Name		Board Member - Local					
CTE Henry Yanez		4b. County of Residence					
5. Committee's Mailing Address P.O. Box 7213 Sterling Heights, MI. 48311		6. Treasurer's Name & Residential Address Henry yanez 14052 Bery Dr Sterling Heights, MI. 48312					
Area Code and Phone  If the address in this box is different from the commi mailing address on the Statement of Organization, r be sent to this address by the filing official.	Area Code & Phone (586) 321-3058						
7. Treasurer's Business Address Same		8. Designated Record Keeper Designated Record Keeper)  Note: The property of	s Name and Address (If the co	ommittee has a PM 4: 53	5		
Area Code and Phone		Area Code and Phone					
9. TYPE OF STATEMENT		7 ii ca coac ana i none	9e. Dissolution of Candida	te Committee			
9a. Pre-Election OR 9b. Post-Election  Pre-Election or Post-Election Statement relates to:			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.  Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.				
General Convention	October C	Quarterly					
Special School	9c. Annua	al Statement () Coverage Year	Effective date of dissolution				
Caucus	Comp	Idment to Campaign Statement plete Item 9a, 9b, 9c or 9e to te which Statement is being ded.)	Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.				
Date of Election, Convention or Caucus							
08/03/21							
10. Verification: I\We certify that all reasonable diligenty\u00e4our knowledge and belief the contents are true, a	ence was used accurate and co	in the preparation of this statemomplete.	ent and attached schedules (if	any) and to the	best of		
Current Treasurer or Designated Record keeper Type or Print Name		Signature	Date	07/23/	/21		
100 C C C C C C C C C C C C C C C C C C		5. <b>0</b> <del></del>			<i>' '</i>		
Candidate HenryYanez		/ Signature	Date	07/23	/21		
Type or Print Name		Signature					

1. Committee I.D. Number 139728

## **SUMMARY PAGE CANDIDATE COMMITTEE**

2. Committee Name CTE Henry Yanez

Column I This Period  (3a.) \$ 1,000.00  (3b.) \$ NOT APPLICABLE (3c.) \$ \$1,000.00  (4.) \$ \$0.00  (5.) \$ \$1,000.00	Column II Cumulative this election cycle  (18.) \$ \$5,550.00  (19.) \$ \$5,550.00  (20.) \$ \$5,550.00
(3a.) \$ 1,000.00 (3b.) \$ NOT APPLICABLE (3c.) \$ \$1,000.00 (4.) \$ \$0.00	(18.) \$ \$5,550.00 (19.) \$ \$0.00
(3b.) \$ NOT APPLICABLE (3c.) \$ \$1,000.00 (4.) \$ \$0.00	(19.) \$ \$0.00
(3c.) \$ \$1,000.00 (4.) \$ \$0.00	(19.) \$ \$0.00
(4.) \$ \$0.00	(19.) \$ \$0.00
(5.) \$ \$1,000.00	(20.) \$ \$5,550.00
(6.) \$ \$0.00	(21.) \$ \$0.00
(7.) \$ _\$0.00	(22.) \$ \$0.00
(8a.) \$ \$0.00	
(8b.) \$ \$0.00	
(8c.) \$ \$0.00	
(9.) \$ \$0.00	(23.) \$ \$0.00
(10a.) \$ \$0.00	
(10b) \$ \$0.00	
	(24.) \$ \$0.00
(12a.)\$_\$0.00	
BALANCE STATEMENT	<u> </u>
(13.) \$_\$11,544.33	
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· · ·	
(17.) \$ <u>\$12,544.33</u> *	
	\$0.00 \$0



## **ITEMIZED CONTRIBUTIONS SCHEDULE 1A**

**CANDIDATE COMMITTEE** 

1. Committee I.D. Number \_\_139728

2. Committee Name CTE Henry Yanez

line 3a of Summary

Page.

Enter contributor's name middle initial. Check bo Committee (PAC) Repor	x to indicate if cont t <u>all</u> contributions r	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)				
3. Contribution # 1 Name & Address: Ded Juncevic 52756 Blueridge Shelby Twp, MI		YES	S 4. Date of Rec	ceipt	07/21/21	<sub>\$</sub> 500	<sub>\$</sub> 500
5. If over \$100.00 cumulative, please provide:  Occupation Business Owner Employer Self					Click Here for Memo Itemization		
Business Address 435 Type of Contribution:	Direct		ng Heights, Mi	48	Fund Raiser		
3. Contribution #2 Name & Address Roko Juncevic 52756 Blueridge Shelby Twp, MI.		YES	4. Date of Rec	eipt		<sub>\$</sub> 500	<sub>\$</sub> 500
5. If over \$100.00 cumulative, please provide:  Occupation Business Owner Employer Self  Business Address 43500 Utica Rd Sterling Heights, MI 48313						Click Here	for Memo Itemization
Type of Contribution:			n from a person		Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YE	S 4. Date of Red	ceip	t		
If over \$100.00 cumulative, please provide:  Occupation					\$Click Here f	_ \$or Memo Itemization	
Business Address	7 p	<u> </u>					
Type of Contribution:  3. Contribution # 4 Name & Address	Direct PAC Receipt?		in from a person	eceip	Fund Raiser	\$	\$
5. If over \$100.00 cumu	ulative, please pro		mployer				or Memo Itemization
Business Address Type of Contribution:	Direct		an from a person		Fund Raiser		
' <del></del>			<del>-</del>		Page Subtotal	\$1,000.00	
					nd Total of All Schedules 1A ete on last page of Schedule)	\$1,000.00 Enter this total on	