



**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.

1. Committee I.D. Number 140074		3. This Statement covers From: <u>01/08/21</u> to <u>07/18/21</u>	
2. Committee Name CTE Ken Nelson Mayor		4. Candidate Last Name Nelson First Name Ken M.I. R. 4a. Office Sought Including District # or Community Served (If applicable) Mayor 4b. County of Residence MACOMB	
5. Committee's Mailing Address 40862 Firesteel Dr. Sterling Heights, MI 48313 Area Code and Phone <u>586-419-0701</u> 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.		6. Treasurer's Name & Residential Address Ken Nelson 40862 Firesteel Dr. Sterling Heights, MI 48313 Area Code & Phone <u>586-419-0701</u>	
7. Treasurer's Business Address Area Code and Phone _____		8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) Area Code and Phone _____	
9. TYPE OF STATEMENT 9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus Date of Election, Convention or Caucus <u>08/03/21</u>		Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly 9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year 9d. <input checked="" type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.) 9e. Dissolution of Candidate Committee <input type="checkbox"/> By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is hereby 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.	
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 Type or Print Name <u>Kenneth R. Nelson</u>		Signature <u>Kenneth R. Nelson</u> Date <u>08/10/21</u>	
Candidate Type or Print Name <u>Ken Nelson</u>		Signature <u>Ken Nelson</u> Date <u>08/10/21</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 140074

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name CTE Ken Nelson Mayor

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>18215.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>18215.00</u>	(18.) \$ <u>18215.00</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>18215.00</u>	(20.) \$ <u>18215.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>1239.25</u>	(21.) \$ <u>1239.25</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ _____	(22.) \$ _____
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>13312.06</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>13312.06</u>	(23.) \$ <u>13312.06</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.) \$ <u>0.00</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>13839.25</u>	
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.) \$ <u>0.00</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>18215.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>18215.00</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>13312.06</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>4902.94</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 140074
2. Committee Name CTE Ken Nelson Mayor

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 06/09/21

Name & Address:

Gary Nelson
53855 Franklin Dr.
Shelby Twp, MI 48316

\$ 200.00 \$ _____

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer N/A

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/09/21

Name & Address

Nancy Tiseo
16155 Vista Woods Ct.
Clinton Twp, MI 48038

\$ 200.00 \$ _____

5. If over \$100.00 cumulative, please provide:

Occupation Housewife Employer N/A

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 06/09/21

Name & Address:

John Carik
17610 E Kirkwood Dr.
Clinton Twp, MI 48038

\$ 200.00 \$ _____

5. If over \$100.00 cumulative, please provide:

Occupation President Employer Carik Marketing

[Click Here for Memo Itemization](#)

Business Address 17610 E Kirkwood Dr. Clinton Twp, MI 48038

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/09/21

Name & Address

Nanette Vayko
8752 Alwardt Dr
Sterling Heights, MI 48313

\$ 50.00 \$ _____

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer N/A

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

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 140074
2. Committee Name CTE Ken Nelson Mayor

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? <input type="checkbox"/> YES	4. Date of Receipt <u>06/09/21</u>	
Name & Address: David Saari 54480 Nicholas Dr. Macomb, MI 48042		\$ <u>500.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>General Motors</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/09/21</u>	
Name & Address: David Saari 54480 Nicholas Dr. Macomb, MI 48042		\$ <u>250.00</u>	\$ <u>750.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>General Motors</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/09/21</u>	
Name & Address: Nancy Tiseo 16155 Vista Woods Ct. Clinton Twp, MI 48038		\$ <u>20.00</u>	\$ <u>220.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Housewife</u> Employer <u>N/A</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>06/09/21</u>	
Name & Address: April Griffey 11423 Delvin Dr. Sterling Heights, MI 48314		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Property Manager</u> Employer <u>AMI</u> Business Address <u>47200 Van Dyke Ave, Shelby Twp, MI 48317</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 870.00

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
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1. Committee I.D. Number 140074
2. Committee Name CTE Ken Nelson Mayor

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? <input type="checkbox"/> YES 4. Date of Receipt <u>06/09/21</u> Name & Address: Kenneth Immler 14023 Pernell Dr Sterling Heights MI 48313		\$ <u>300.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Hawk Industrial Real Estate</u> Business Address <u>34537 Bennett Dr, Fraser, MI 48026</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/09/21</u> Name & Address: Thomas Mitchell 40171 William Dr Sterling Heights, MI 48313		\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/09/21</u> Name & Address: Dawn M. Miller 43942 Manitou Dr Clinton Twp, MI 48038		\$ <u>1000.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Key Association Managemen</u> Business Address <u>15760 19 Mile Rd, Suite G, Clinton Twp, MI 48038</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/09/21</u> Name & Address: Steven Bahoura 35664 Annette Sterling Heights, MI 48310		\$ <u>200.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Self Employed</u> Employer <u>KW Realty</u> Business Address <u>901 Wilshire, Ste 125 A, Troy MI 48084</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal 1550.00

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 140074
2. Committee Name CTE Ken Nelson Mayor

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? <input type="checkbox"/> YES 4. Date of Receipt <u>06/09/21</u> Name & Address: Jason Piotrowski 41624 Huntington Dr Sterling Heights, MI 48313		\$ <u>500.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Programmer</u> Employer <u>SECO Tools, LLC</u> Business Address <u>2805 Bellingham Dr, Troy, MI 48083</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/05/21</u> Name & Address: Patrick Parent 35649 Malibu Dr Sterling Heights, MI 48312		\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/12/21</u> Name & Address: James Thomas 49544 Compass Point Dr Chesterfield, MI 48047		\$ <u>250.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Lawyer</u> Employer <u>O'Reilly Rancilio P.C.</u> Business Address <u>12900 Hall Rd Suite 350, Sterling Heights, MI 48313</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>06/09/21</u> Name & Address: Heather Gaffke 50814 Summit View Dr Macomb, MI 48042		\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **850.00**

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 140074

2. Committee Name CTE Ken Nelson Mayor

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 06/09/21

Name & Address:
Robert Little
14625 Shirley Ave
Warren, MI 48089

\$ 100.00

\$ _____

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 #2 PAC Receipt? ☐ YES

4. Date of Receipt 06/09/21

Name & Address
Brent O'Dell
13795 Graham Dr
Shelby Twp, MI 48315

\$ 50.00

\$ _____

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 06/08/21

Name & Address:
Joseph Taylor
47790 Robin St
Shelby Twp, MI 48317

\$ 1000.00

\$ _____

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization](#)

Occupation Owner Employer JT Construction

Business Address Same as Above

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES

4. Date of Receipt 06/08/21

Name & Address
Paula Cikota
13455 Melanie Dr
Sterling Heights, MI 48313

\$ 20.00

\$ _____

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

Page Subtotal 1170.00

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 140074
2. Committee Name CTE Ken Nelson Mayor

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 06/16/21

Name & Address:
Joseph Valentic
43719 Saint Julian Ct
Sterling Heights, MI 48314

\$ 100.00 \$ _____

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 #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/27/21

Name & Address:
Victor Martin
14307 Bangor Dr
Sterling Heights, MI 48313

\$ 100.00 \$ _____

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 06/28/21

Name & Address:
Pamela Nelson
34415 Koch Ave
Sterling Heights, MI 48310

\$ 100.00 \$ _____

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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt 07/09/21

Name & Address:
Robert Pattyn
35330 Wellston Ave
Sterling Heights, MI

\$ 25.00 \$ _____

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

Page Subtotal 325.00

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 140074
2. Committee Name CTE Ken Nelson Mayor

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 06/28/21

Name & Address:
James Perna
38180 Saddle Lane
Clinton Twp, MI 48036

\$ 200.00 \$ _____

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer N/A

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 06/03/21

Name & Address
Ken Nelson
40862 Firesteel Dr.
Sterling Heights, MI 48313

\$ 10000.00 \$ _____

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer N/A

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt _____

Name & Address:
Ken Nelson
40862 Firesteel Dr.
Sterling Heights, MI 48313

\$ 2600.00 \$ 12600.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer N/A

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 06/27/21

Name & Address
Ken Nelson
40862 Firesteel Dr.
Sterling Heights, MI 48313

\$ 1239.25 \$ 13839.25

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer N/A

[Click Here for Memo Itemization](#)

Business Address _____

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal 14039.25

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

19454.25

Enter this total on
line 3a of Summary
Page.



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 140074

CANDIDATE COMMITTEE

2. Committee Name CTE Ken Nelson Mayor

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 <u>all</u> 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? <input type="checkbox"/> Yes Name & Address: Ken Nelson 40862 Firesteel Dr Sterling Heights, MI 48313 If over \$100.00 cumulative, please provide: Occupation: Retired Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Macomb County Voter List</u> 5. Date Of Receipt: <u>02/09/21</u> 6. Vendor Name & Address: Macomb County Elections	\$ <u>10.00</u>	\$ <u>10.00</u>
<input type="checkbox"/> Fund Raiser Contribution			
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Ken Nelson 40862 Firesteel Dr Sterling Heights, MI 48313 If over \$100.00 cumulative, please provide: Occupation: Retired Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Office Supplies for Campaign</u> 5. Date Of Receipt: <u>01/13/2021</u> 6. Vendor Name & Address: Office Depot Sterling Heights, MI 48313	\$ <u>68.86</u>	\$ <u>78.86</u>
<input type="checkbox"/> Fund Raiser Contribution			
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Ken Nelson 40862 Firesteel Dr Sterling Heights, MI 48313 If over \$100.00 cumulative, please provide: Occupation: Retired Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Office Supplies for Campaign</u> 5. Date Of Receipt: <u>04/21/21</u> 6. Vendor Name & Address: Office Depot Sterling Heights, MI 48313	\$ <u>128.74</u>	\$ <u>207.60</u>
<input type="checkbox"/> Fund Raiser Contribution			

Page Subtotal

207.60

207.60

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

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 140074

CANDIDATE COMMITTEE

2. Committee Name CTE Ken Nelson Mayor

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 <u>all</u> 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? <input type="checkbox"/> Yes Name & Address: Ken Nelson 40862 Firesteel Dr Sterling Heights, MI 48313 If over \$100.00 cumulative, please provide: Occupation: Retired Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Volunteer Appreciation Event F</u> 5. Date Of Receipt: <u>04/24/21</u> 6. Vendor Name & Address: Macomb County GOP Office 39099 Garfield Rd Clinton Twp, MI 48038	\$ <u>41.24</u>	\$ <u>248.84</u>
<input type="checkbox"/> Fund Raiser Contribution	Click Here for Memo Itemization		
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Ken Nelson 40862 Firesteel Dr Sterling Heights, MI 48313 If over \$100.00 cumulative, please provide: Occupation: Retired Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Campaign Business Cards</u> 5. Date Of Receipt: <u>03/29/21</u> 6. Vendor Name & Address: Vistaprint Netherlands BV Hudsonweg 8 Venlo, The Netherlands 5928LW	\$ <u>260.75</u>	\$ <u>509.59</u>
<input type="checkbox"/> Fund Raiser Contribution	Click Here for Memo Itemization		
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Ken Nelson 40862 Firesteel Dr Sterling Heights, MI 48313 If over \$100.00 cumulative, please provide: Occupation: Retired Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Fundraiser Balloons</u> 5. Date Of Receipt: <u>06/09/21</u> 6. Vendor Name & Address: Dollar Tree 40885 Garfield Rd Clinton Twp, MI 48038	\$ <u>4.24</u>	\$ <u>513.83</u>
<input type="checkbox"/> Fund Raiser Contribution	Click Here for Memo Itemization		

Page Subtotal

306.23

513.83

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

Enter this total
on line 6 of Summary
Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 140074

CANDIDATE COMMITTEE

2. Committee Name CTE Ken Nelson Mayor

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? <input type="checkbox"/> Yes Name & Address: Ken Nelson 40862 Firesteel Dr Sterling Heights, MI 48313 If over \$100.00 cumulative, please provide: Occupation: Retired Employer Name & Business Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Fundraiser Decorations</u> 5. Date Of Receipt: <u>06/08/21</u> 6. Vendor Name & Address: Party City 12220 Hall Rd Sterling Heights, MI 48313	\$ <u>68.79</u>	\$ <u>582.62</u>
<input type="checkbox"/> Fund Raiser Contribution	Click Here for Memo Itemization		
Contribution # 2 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Ken Nelson 40862 Firesteel Dr Sterling Heights, MI 48313 If over \$100.00 cumulative, please provide: Occupation: Retired Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Cable Ties and sign posts</u> 5. Date Of Receipt: <u>06/21/21</u> 6. Vendor Name & Address: Lowes 15350 Hall Road Clinton Twp, MI 48038	\$ <u>81.79</u>	\$ <u>664.41</u>
<input type="checkbox"/> Fund Raiser Contribution	Click Here for Memo Itemization		
Contribution #3 PAC Receipt? <input type="checkbox"/> Yes Name & Address: Ken Nelson 40862 Firesteel Dr Sterling Heights, MI 48313 If over \$100.00 cumulative, please provide: Occupation: Retired Employer Name & Address:	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>110 sign posts</u> 5. Date Of Receipt: <u>06/27/21</u> 6. Vendor Name & Address: Lowes 15350 Hall Rd Clinton Twp, MI 48038	\$ <u>574.84</u>	\$ <u>1239.25</u>
<input type="checkbox"/> Fund Raiser Contribution	Click Here for Memo Itemization		

Page Subtotal

725.42

1239.25

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

1239.25

Enter this total
on line 6 of Summary
Page



ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 140074
2. Committee Name CTE Ken Nelson Mayor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Villa Penna Address 43985 Hayes Rd Sterling Heights, MI 48313 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/09/21</u> Date	\$ <u>1500.00</u>
Expenditure #2 Name Harland Clark Address 15955 La Contera Pkwy San Antonio, TX 78256 <input type="checkbox"/> Fund Raiser	Purpose: <u>Check Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>01/27/21</u> Date	\$ <u>51.26</u>
Expenditure #3 Name All inOne Campaign, LLC Address 1273 Lindbergh St Wyandotte, MI 48192 <input type="checkbox"/> Fund Raiser	Purpose: <u>Yard & Commercial</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/17/21</u> Date	\$ <u>3582.50</u>
Expenditure #4 Name Head Full of Ideas Address 18641 Beatrice St Clinton Twp, MI 48036 <input type="checkbox"/> Fund Raiser	Purpose: <u>Web Design</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/22/21</u> Date	\$ <u>5000.00</u>
Expenditure #5 Name All in One Campaign, LLC Address 12731 Lindbergh St Wyandotte, MI 48192 <input type="checkbox"/> Fund Raiser	Purpose: <u>Artwork and Design</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/13/21</u> Date	\$ <u>1045.20</u>
Subtotal this page			11178.96
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 140074
2. Committee Name CTE Ken Nelson Mayor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name C&G Newspapers Address 13650 Eleven Mile Road Warren, MI 48089 <input type="checkbox"/> Fund Raiser	Purpose: <u>Full Page Ad</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/14/21</u> Date	\$ <u>1956.00</u>
Expenditure #2 Name Senator Michael McDonald Address P.O. Box 30036 Lansing, MI 48909-7536 <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser Ticket</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/15/21</u> Date	\$ <u>100.00</u>
Expenditure #3 Name Anedot.com Address <input type="checkbox"/> Fund Raiser	Purpose: <u>Card Processing Fe</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/15/21</u> Date	\$ <u>77.10</u>
Expenditure #4 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____
Expenditure #5 Name Address <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date	\$ _____

Subtotal this page **2133.10**
Grand Total of all Schedules 1B
(Complete on last page of Schedule) **13312.06**
Enter this total
on line 8a of
Summary Page



DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 140074

2. Committee Name CTE Ken Nelson Mayor

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? <input type="checkbox"/> Yes Owed to or by: Ken Nelson 40862 Firesteel Dr. Sterling Heights, MI 48313	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>06/03/21</u> 6. <u>Original Amount of Debt:</u> \$ <u>0.00</u>	\$ \$ \$ \$ \$	\$	\$ <u>10000.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Ken Nelson 40862 Firesteel Dr. Sterling Heights, MI 48313	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>06/23/21</u> 6. <u>Original Amount of Debt:</u> \$ _____	\$ \$ \$ \$ \$	\$	\$ <u>2600.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Ken Nelson 40862 Firesteel Dr. Sterling Heights, MI 48313	4. Type: <u>In Kind Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>06/27/21</u> 6. <u>Original Amount of Debt:</u> \$ _____	\$ \$ \$ \$ \$	\$	\$ <u>1239.25</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) **13839.25**

Grand Total of all Schedules 1E **13839.25**
(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.



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 140074
2. Committee Name CTE Ken Nelson Mayor

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>06/09/21</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>25</u>	5. Type of Fund Raising Activity <u>Buffet Dinner</u>	6. Address and Name (If any) of the place where the activity was held. <u>Villa Penna</u> <u>43985 Hayes Rd.</u> <u>Sterling Heights, MI 48313</u> <input type="checkbox"/> Private Residence
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7. Total Contributions 3670.00
8. Other Receipts 0.00
9. Gross Receipts (Add lines 7 and 8) 3670.00
10. Total Cost of Event 1573.03
(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.