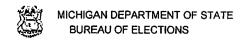


## CANDIDATE COMMITTEE COVER PAGE

#### FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by indidate.	3. This Statement covers From	08/24/21 to	10/17/21			
1. Committee I.D. Number		4. Candidate Last Name	First Name	M.I.			
138477		Taylor	Michael	C.			
		4a. Office Sought Including Dis	trict # or Community Served	(If applicable)			
2. Committee Name		Mayor of Sterling Heig	ıhts				
Committee to Elect Michael C.	Taylor	4b. County of Residence MA	СОМВ				
5. Committee's Mailing Address		6. Treasurer's Name & Reside	ntial Address				
14076 Red Pine Dr.		Michael C. Taylor					
Sterling Heights, MI 48313		14076 Red Pine Dr.					
		Sterling Heights, MI	48313				
Area Code and Phone (586) 822-3500 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) 82	2-3500				
7. Treasurer's Business Address		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	Boguired Of	NLY if candidate	9e. Dissolution of Candid	late Committee			
9a. Pre-Election OR 9b. Post-Election	is not on the	ballot for the	By checking this item la	We certify any outstanding debt			
Pre-Election or Post-Election Statement relates to:	current year:		by discharged and forgiven	ndidate or his or her spouse is here , and no longer collectible from			
	July Quar	erly	owes no lates fees or has a	itee has no oustanding assets, ny oustanding debt.			
Primary	October C	)uarterly					
X General			Further, if the dissolution ca considered a request for the	innot be granted, that this be e Reporting Waiver.			
Convention			Ì				
Special	9c. Annua	al Statement ()	Effective date of	dissolution			
School		Coverage Year	Ellective date of	noodation			
Caucus	9d. Amer	ndment to Campaign Statement plete Item 9a, 9b, 9c or 9e to					
		te which Statement is being	Note: The disposition of res Schedule 1B and the Sumr	sidual funds must be reported on mary Page.			
Date of Election, Convention or Caucus	amen	ueu.)					
, ,							
11/02/21							
10. Verification: I/We certify that all reasonable diligration my/our knowledge and belief the contents are true,	ence was used accurate and c	in the preparation of this statem omplete.	ent and attached schedules	(if any) and to the best of			
Current Treasurer or Michael C. Ta	vlor	Set 1		October 22, 2021			
Designated Record keeper  Type or Print Name		Signature	Date				
Condidate Michael C. Taylor		The state of the s	77	October 22, 2021			
Candidate		1X be X	Date				
Authority granted under P.A. 388 of 1976	!	Signature	$\overline{}$				
rights granted under 1 .7. 000 of 1970							

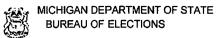


1. Committee I.D. Number 138477

### SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Michael C. Taylor

RECEIPTS COMMITTEE	Column I	Column II
	This Period	Cumulative this election cycle
3. Contributions	£ 800 00	]
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ 5,800.00	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ \$5,800.00	(18.) \$ \$70,497.84
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$5,800.00	(20.) \$ \$70,497.84
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$0.00	(21.) \$ \$1,125.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$31,283.21	
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.) \$ \$31,283.21	(23.) \$ \$55,088.93
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
Disbursements     a. Itemized (Schedule 1C, Column 6)	(10a.) \$ \$0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ _\$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS	(10b.) \$	
(Add Line 10a + Line 10b)	(11.) \$ \$0.00	(24.) \$ \$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <b>\$4,526.84</b>	
b. Owed to the Committee (Schedule 1E)	405.50 \$0.00	
10.00	(12b.) \$ \$0.00 BALANCE STATEMENT	
13. Ending Balance of last report filed	(13.) \$_\$67,709.49	
(Enter zero if no previous reports have been filed.)  14. Amount received during reporting period	(14.) + \$ \$5,800.00	•
(Line 5, Total Contributions & Other Receipts)		_
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period	(15.) = \$_\$73,509.49	-
(Add lines 9 and 11)	(16.) - \$ \$31,283.21	_
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ \$42,226.28	*



## ITEMIZED CONTRIBUTIONS SCHEDULE 1A

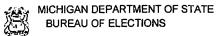
#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_138477

Committee Name CO

Committee to Elect Michael C. Taylor

Enter contributor's name and address. middle initial. Check box to indicate if c Committee (PAC) Report <u>all</u> contribution	ontribution is from a Political Con		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1 PAC Receip  Name & Address:	t? YES 4. Date of Re	ceipt 08/26/21		
Salem Meram 39053 Ajanta Ct Sterling Heights, MI 48310			<sub>\$</sub> 700	<sub>\$</sub> 1200
5. If over \$100.00 cumulative, please [	provide:		Click Here	for Memo Itemization
Occupation Retired	Employer			or morno nomization
Business Address	Transition of the second			
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
3. Contribution #2 PAC Receipt Name & Address	? YES 4. Date of Rec	ceipt 08/30/21		
David Ayoub 48588 Leafdale Ct. Shelby Twp, MI 48317			<sub>\$</sub> 100	_ \$
5. If over \$100.00 cumulative, please p	provide:		Click Here f	or Memo Itemization
Occupation	Employer			
Business Address				
Type of Contribution:	Loan from a person	Fund Raiser		
3. Contribution # 3 PAC Receipt Name & Address:	? YES 4. Date of Re	oceipt 09/10/21		
Marty Lewicki 8147 River Rd Cottrellville, MI 48039			§ 500	_ \$
5. If over \$100.00 cumulative, please p			Click Here fo	or Memo Itemization
Occupation Owner	Employer Highway Aut	o Parts		
Business Address 8147 River Rd., Co	ttrellville, MI 48039			
Type of Contribution:   Direct	Loan from a person	Fund Raiser		
3. Contribution # 4 PAC Receipt Name & Address	YES 4. Date of Re	eceipt 09/10/21		
Khoder Abdallah 38229 Pinebrook Dr. Sterling Heights, MI 48310 5. If over \$100.00 cumulative, please	provide:		<sub>\$</sub> 500	<sub>\$</sub> 750
Occupation Real Estate	<sub>Employer</sub> Self-Empl	oyed	Click Here fo	or Memo Itemization
Business Address 38229 Pinebroo	ok Dr., Sterling Heights, i	MI 48310		
Type of Contribution: V Direct	Loan from a person	Fund Raiser		
<u> </u>		Page Subtota	\$1,800.00	
	(Co	Grand Total of All Schedules 1A implete on last page of Schedule	Enter this total on	
Page of			line 3a of Summar Page.	у



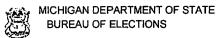
## ITEMIZED CONTRIBUTIONS SCHEDULE 1A

#### **CANDIDATE COMMITTEE**

1. Committee I.D. Number \_\_\_\_\_\_138477

2. Committee Name Committee to Elect Michael C. Taylor

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 09/10/21	
Name & Address: ———————————————————————————————————	_
43805 Van Dyke, Suite A	500
Sterling Heights, MI 48314	<sub>\$</sub> 500
5. If over \$100.00 cumulative, please provide:	Olista I lease for Manage Hanning stign
Occupation Attorney Employer Boyer, St. Pierre & Aull	Click Here for Memo Itemization
Business Address 43805 Van Dyke, Suite A, Sterling Heights, MI 48314	
Type of Contribution: ✓ Direct Loan from a person Fund Raiser	
3. Contribution #2 PAC Réceipt? YES 4. Date of Receipt 09/10/21  Name & Address	_
Raechel Badalamenti	<sub>s</sub> 500
19500 Hall Rd., Suite 100 Clinton Township, MI 48038	\$
5. If over \$100.00 cumulative, please provide:	Click Here for Memo Itemization
Occupation Attorney Employer Kirk, Huth, Lange & Badalamenti, PLC	
Business Address 19500 Hall Rd., Suite 100, Clinton Twp, MI 48038	
Type of Contribution:	
3. Contribution # 3 PAC Receipt? YES 4. Date of Receipt 09/14/21  Name & Address:	_
Aaron Rasty	500
23751 Hoover Rd.	<sub>\$</sub> 500
Warren, MI 48089	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide:	Click Fiele to Memo Remization
Occupation Owner Employer Sozo Companies	
Business Address 23751 Hoover Rd, Warren, MI 48089	
Type of Contribution: Direct Loan from a person Fund Raiser	
3. Contribution # 4 PAC Receipt? YES 4. Date of Receipt 09/21/21 Name & Address	_
Nicolas Taylor	4000
52440 Cheswick Ct.	<sub>\$</sub> 1000
Shelby Twp, MI 48315	· · · · · · · · · · · · · · · · · · ·
5. If over \$100.00 cumulative, please provide:  Occupation Accountant Employer KPMG	Click Here for Memo Itemization
	_
Business Address 150 W. Jefferson Ave., #1900, Detroit, MI 48226	
Type of Contribution: Oirect Loan from a person Fund Raiser	
Page Subto	s2,500.00
Grand Total of All Schedules (Complete on last page of Schedu	
, , , , , ,	Enter this total on line 3a of Summary
Page 2 of 3	Page.



#### **ITEMIZED CONTRIBUTIONS SCHEDULE 1A**

#### CANDIDATE COMMITTEE

2. Committee Name

Committee to Elect Michael C. Taylor

	x to indicate if contr rt <u>all</u> contributions re	ibution is from a Political C egardless of amount.		enter last name, first name, tee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
Contribution # 1  Name & Address:	PAC Receipt?	YES 4. Date of	Receip	ot 09/22/21		
Citizens for Hone 12955 23 Mile Ro Shelby Twp, MI 4 5. If over \$100.00 cumu	d. 18315				<sub>\$</sub> 500	\$
	., ,				Click Here fo	r Memo Itemization
Business Address						
Type of Contribution:	Direct	Loan from a person	П	Fund Raiser		į
3. Contribution #2 Name & Address	PAC Receipt?	YES 4. Date of F	Receip	10/05/21		
Debra O'Brien 52719 Florence I Shelby Twp., MI					<sub>\$</sub> 500	\$
5. If over \$100.00 cumu	lative, please prov	ide:			Click Here for	Memo Itemization
Occupation Retired		Employer				
Business Address				<u>.</u>		
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YES 4. Date of	Receip	ot 10/05/21		
Paul Doppke 21646 Erben St. St. Clair Shores,	MI 48081				§ 500	\$
5. If over \$100.00 cumu	ılative, please prov				Click Here for	Memo Itemization
Occupation Owner		Employer_Landscape	Sen	vices, Inc.		
Business Address 2293		Twp., MI 48035				
Type of Contribution:	/ Direct	Loan from a person		Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date of	f Recei			
					<b>\$</b>	\$
5. If over \$100.00 cum	ulative, please prov	vide:			Click Horo for	Memo Itemization
Occupation		Employer			Click Here to	Wellio itemization
Business Address						
Type of Contribution:	Direct	Loan from a person	П	Fund Raiser		
				Page Subtotal	\$1,500.00	
		(		and Total of All Schedules 1A lete on last page of Schedule)	\$5,800.00 Enter this total on	
Page 3 of 3					line 3a of Summary Page.	



### **ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE**

138477 1. Committee I. C

1. Committee I. D. Number	130477	
2. Committee Name CTE	Michael C. Taylor	

3. Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Swing Fore the Cure		08/24/21	s 500
Address	Purpose: Golf Outing Sponsorship	Date	
38180 Utica Rd	Click H	lere for Memo I	temization Type
Sterling Heights, MI 48312			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name M. Beshara, Inc.		08/27/21	\$ 935.20
Address	Purpose: Printing	Date	
10020 Capital St.	Click H	lere for Memo li	temization Type
Oak Park, MI 48237	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name City of Sterling Heights		08/27/21	<b>\$ \$33</b>
Address	Purpose: Voter Lists	Date	
40555 Utica Rd		ara for Mama II	emization Type
Sterling Heights, MI 48313	<del>  -  </del>	icic ioi imenio ii	emization Type
Fund Raiser	LICheck box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
<sup>Name</sup> Facebook		09/01/21	
. 400,000		Date	\$ <u>241.74</u>
Address	Purpose: Facebook Ads		
1 Hacker Way	Click H	ere for Memo II	temization Type
Menlo Park, CA 94025			- 71-
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name iStorage		09/02/21	
	Purpose: Storage Unit	Date	\$ <u>256</u>
Address	Purpose:	Date	
41250 Garfield Ave	l <del></del>	lere for Memo I	temization Type
Clinton Twp, MI 48038  Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
		tal this page	\$1,965.94
	Grand Total of all S (Complete on last page	1	
	, ,	٠,١	Enter this total

on line 8a of Summary Page



# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1 Committee L.D. Number 138477

1. Committee I. D. Number	
2. Committee Name CTE	Michael C. Taylor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		·	
Name Detroit Free Press		09/15/21	\$ 9.99
Address	Purpose: Newspaper Subscription	Date	
160 W. Fort St	Click I	Here for Memo	Itemization Type
Detroit, MI 48226	Objects to a select the second of the second		
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2	·		
<sup>Name</sup> M. Beshara, Inc.		09/20/21	\$ 7491.02
Address	Purpose: Printing	Date	<del></del>
10020 Capital St	Click F	lere for Memo	temization Type
Oak Park, MI 48237	Check how if this supposed horse is necessary of		
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name Amway Grand Hotel		09/22/21	s 181.16
Address	Purpose: Conference Expense - Meals	Date	
187 Monroe NW	Click H	lere for Memo I	temization Type
Grand Rapids, MI 49503	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name C&G Newspaper		09/24/21	
	Nowonanar Ad	Date	\$ <u>1525</u>
Address	Purpose: Newspaper Ad		
13650 E Eleven Mile	Click I	Here for Memo I	temization Type
Warren, MI 48089	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name CTE Maria Schmidt		09/27/21	
Address	Purpose: Fundraiser Ticket	Date	\$ <u>100</u>
35755 Woodvilla Dr	Click	Here for Memo	Itemization Type
Sterling Heights, MI 48312	Check box if this expenditure is payment of		71.
Fund Raiser	debt or obligation reported on previous statement		
	Subto	otal this page	\$9,307.17
	Grand Total of all (Complete on last pag		
		"	

Enter this total on line 8a of Summary Page

Page 2 of 4



# ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

Committee LD Number 138477

1. Committee I. D. Number	
2 Committee Name CTE	Michael C. Taylor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		•	
Name Pilot Gasoline		10/01/21	\$ 41.27
Address	Purpose: Vehicle Fuel - Travel to Conference	Date	•
1100 N. Dixie Hwy	Click H	lere for Memo I	temization Type
Monroe, MI 48162	l		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			i
Name Facebook		10/01/21	\$ 176.68
Address	Purpose: Facebook Ads	Date	
1 Hacker Way	Click H	lere for Memo I	temization Type
Menlo Park, CA 94025	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name Mass Mailing	·	10/04/21	\$ 8829.62
Address	Purpose: Postage & Mail Service	Date	
35468 Mound Rd	Click H	lere for Memo II	emization Type
Sterling Heights, MI 48310	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name C&G Newspaper		10/06/21	0050
Address	Purpose: Newspaper Ad	Date	\$ 3050
13650 E. Eleven Mile Rd	ruipose.		
Warren, MI 48089	Click H	lere for Memo I	emization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #5			
Name Facebook		10/08/21	
Address	Purpose: Facebook Ads	Date	\$ <u>250</u>
1 Hacker Way		lara for Mama I	temization Type
Menlo Park, ČA 94025	Check box if this expenditure is payment of	tere for ivierno i	ternization Type
Fund Raiser	debt or obligation reported on previous statement		
	Subto	tal this page	\$12,347.57
	Grand Total of all S (Complete on last page		
	(Complete on last page	, or concuse)	Enter this total

Enter this total on line 8a of Summary Page

Page \_\_\_\_ of \_\_\_



## SCHEDULE 1B CANDIDATE COMMITTEE

Committee L.D. Number 138477

1. Committee I. D. Number		
2. Committee Name CTE	Michael C. Taylor	

Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		•	
Name Mass Mailing		10/12/21	\$ \$5887.53
Address	Purpose: Postage & Mail Service	Date	
35468 Mound Rd	Click H	lere for Memo	temization Type
Sterling Heights, MI 48310	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name C&G Newspaper		10/14/21	\$ 1525
Address	Purpose: Newspaper Ad	Date	
13650 E. Eleven Mile Rd	Click F	lere for Memo I	temization Type
Warren, MI 48089	Charles and the same of the sa		İ
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name Facebook		10/15/21	\$ <b>2</b> 50
Address	<sub>Purpose:</sub> Facebook Ads	Date	
1 Hacker Way	Click H	lere for Memo I	temization Type
Menlo Park, CA 94025	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #4			
Name			
Address		Date	\$
Address	Purpose:		
	Click H	lere for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name			
Address	_	Date	\$
Address	Purpose:	Date	
		lere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	\$7,662.53
	Grand Total of all (Complete on last page		\$31,283.21

Enter this total on line 8a of Summary Page

Page 4 of



### DEBTS AND OBLIGATIONS 1. Committee I.D. Number 138477

SCHEDULE 1E	ATTE ALL		· <del>\                                   </del>	
CANDIDATE COMMITTEE 2.1	Committee Name CTE Mic	chael C. Taylor	<u> </u>	
This Schedule Hernizes:		······································		
a Debta and abilitations owed by or forgiven the cor (Ch	nmittee OR b. Deb	in and obligations owed <u>19</u> o	or forgiven by the co	rimities.
3. Name and Mailing Address of person, vendor or sname in initiation to whom debt is owed.  Chack box to indicate whether debt is owed to an incorporated business. If debt is a bank foan, please provide information regarding the endorsers or guerantors, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incread 6. Indicate original amount of debt	7. Date and enount of oach payment	8. Cumulative payment to date on debt	8. Cutatanding Balance at close of this period (ilem 6 minus item 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: In-Kind Loan			
Taylor, Michael C. 14076 Red Pine Dr. Sterling Heights, MI 48313	5. Date Debt Was Issurred:  O8/14/09  6. Original Amount of Debt:  \$ 75.51		\$ 0.00	# 75.51 FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	uni Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by: Taylor, Michael C. Same  If bank loss, name of endorser or guarantor:	4. Type: In-Kind Loan 5. Date Debt Wes Jacurred: 8/15/09 6. Original Amount of Debt: \$ 14.30	\$ \$ \$	ş <u>0.00</u>	\$ 14.30 FORGIVEN
Debt #3 Corp? Yes	4. Typo: In-Kind Loan	An	ount Endorsed: \$	
Owed to or by: Taylor, Michael C. Same	5. Date Debt Was Incurred: 8/16/09 6. Original Amount of Debt: \$ 115.60		ş_0.00	\$_115.80_ FORGIVEN
If bank loan, name of endorser or guaranter:		Am	ount Endorsed: \$	
(Co	implete on last page of Schedule st	• • • • • • • • • • • • • • • • • • • •	Outstanding debt)	\$205.41  Enter titls total on line 12a "owed by" or line 12b

A debt or obligation must be shown on this Schodule 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

"owed to" of the Summary Page

Page 1 of 5



DEBTS AND OBLIGATIONS 1,1	Committee I.D. Number 138	3477			
SCHEDULE 1F				<del></del>	
CANDIDATE COMMITTEE 2. Committee Name CTE Michael C. Taylor					
This Schedule Itemizee:					
a / Dabts and obligations owed by or forgiven the con (Che	nmittee OR b. Deb	is and obligations owed <u>to</u> o Urpose checked.)	or forgiven <u>by</u> litte co	mmittee.	
Name and Mailing Address of person, vendor or financial institution to whom debt is ewed.  Check box to indicate whether debt is ewed 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) 6. Indicate date debt was becurred 6. Indicate original amount of debt	7. Date and spount of each payment	8. Comutative payment to date on debt	9. Outstanding Balance at close of this period (from 6 minus item 8)	
Debt #1 Corp? Yes Owed to or by:	4. Type: In-Kind Loan	\$			
Taylor, Michael C. 14076 Red Pine Dr. Sterling Helghis, MI 48313	5. Date Debt Wee Incurred: 09/08/09 8. Original Amount of Debt: \$ 550.00		s <u>0.00</u>	\$ 550.00 FORGIVEN	
If bank loan, name of endorser or guarantor:		Amo	unt Endorsed: \$		
Debt #2 Corp? Yes Owed to a by:	4. Type: In-Kind Loan	\$	CHR 22 IOURSGU. 4		
Taylor, Michael C. Same	5. Date Debt Was Incurred: 10/2/09 6. Original Amount of Dabt: 5. 1107.82	\$\$	\$ <u>0.00</u>	\$_1107.82	
If bank loss, name of endorser or guarantor:		Am	ount Endorsed: S		
Oebt#3 Corp? Yes Owed to or by:	4. Type: in-Kind Loan				
Taylor, Michael C. Same	5. Pate Debt Was Incurred: 10/1/09 6. Original Amount of Debt: \$ 62.97		s_0.00	• 62.97	
If bank loan name of enderser or guarantor:		An	ount Endorsed: \$_		
(Co	mplete on last page of Schedule at	Grant Total o	Cultisanoung dept)	\$1,720.79	
A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on hat the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.  Enter this total on line 12b "owed to "Inter 12b					



DEBTS AND OBLIGATIONS	1. Committee I.D. Number	138477	
SCHEDULE 1E	СТ	F Michael C	

SCHEDULE 1E	CONTENIALES Name CTE Mic	had C Taylor		
CANDIDATE COMMITTEE 2.0	Constitute Name	ilaci O. Taylor		·····
This Schedule itemizes:				
e Debts and obligations awad by ar forgiven the con (Che	nmittee DR b. Dobi ock either a or b. Use only for the pu	s and obligations owed <u>to</u> o spose checked.)	r forgiven <u>by</u> the co	
3. Name and Meiling Address of person, vendor or financial institution to whom debt is owned.	4. Type of Obligation (Description) 5. Indicate date debt was	7. Date and amount of each payment	8. Cumulative payment to dele on debt	9. Outstanding Balance at close of this period
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 guaranton, if any.	incurred 6. Indicate original amount of debt			(Hem 6 minus Hem 8)
Debt #1 Corp? Yes Owed to or by:	4. Type: In-Kind Loan			•
Taylor, Michael C.	5. Date Debt Was Incorred:			
14076 Red Pine Dr.	07/08/11	<u> </u>	0.00	- 556.5
Sterling Heights, MI 48313	6. Original Amount of Debt	2	\$ <u>0.00</u>	*
	\$ 558.60			FORGIVEN
if bank losn, name ofersderser or guarantor:		Arno	ount Endorsed: \$ -	
Debt #2 Corp? Yes Owed to or by:	4. Type: In-Kind Loan	\$		
Taylor, Michael C.	S. Date Debt Was Insurred:	s		
Same	9-7-11	4		. 1533.82
	6. Original Amount of Debt:	\$	\$ 0.00	3 1000.02
	s 1533.82	•		FORGIVEN
18. 1.4		A	ount Endorsed: <b>5</b> _	_
If bank toan, name of endorser or guarantor:  Debt #3 Com? Yes	In March 1 con		lowii Elidoised: 4-	
Owed loor by:	4. Type: In-Kind Loan	\$		i
laylor, Michael C.	5. Date Debt Was Incurred:			
Same	9-29-11		0.00	130
	6. Orloinal Amount of Dobt:	<b>S</b>	\$ 0.00	T
	\$_130			FORGIVEN
If bank loss, name of endorser or guarantor:		A	mount Endorsed: \$	
		Page Subjota	(Outstanding debt)	\$2,220.32
(C	Complete on last page of Schedule	Grand Total showing amounts owed by	of all Schadules 18 or to the committee	Enter this total on line 12a 'owa
A debt or obligation must be shown on this School this Compains Retenant or it was forciven during	tule if there was an outstanding a sithe period covered by this Cam	mount owed on It al the c palgn Statement,	losing date of	try" or line 12b "awad to" of the Summary Page

Page 3 d 5



1. Committee I.D. Number 138477

SCHEDULE 1E

CANDIDATE COMMITTEE 2. C	Committee Name CIE VIIC	illaci U. Taylor		
This Schedule liernizes:	······································			
Debts and obligations owed by or forgiven the com (Che	mittee OR b. Debt ck either a or b. Use only for the pu	s and obligations owed <u>to</u> our	forgiven <u>by</u> the co	mmittee.
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is cwed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guaranton, 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	Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 6)
Debt #1 Corp? Yes Owed to or by:	4. Type: In-Kind Loan			
Taylor, Michael C. 14076 Red Pine Dr.	5. Date Debt Was Incurred: 09/07/11			
Sterling Heights, MI 48313	6. Original Amount of Debt:		\$ 0.00	\$ 159.00 FORGIVEN
M 1 h	\$ 158,00		<b>i</b>	I
If bank loan, name of endorser of guarantor.		Ame	uni Endorsed: \$ _	
Debt #2 Corp? Yes Owed to or by:	4. Type: In-Kind Loan			1
Taylor, Michael C. Same	5. Date Debt Was Incarred: 0-7-11			
	6. Original Amount of Debt:	\$	\$ 0.00	3 23.30
	<u> 20.00</u>			FORGIVEN
If benk loan, name of endorser or guarantor.		Arr	ount Endorsed: \$_	
Debt #3 Corp7 Yes Owed to or by:	4. Type: In-Kind Loan	<u> </u>		
Taylor, Michael C.	5. Date Debt Was Incurred: 9-7-11			
Same ·	6. Original Amount of Deht:	\$	s_0.00	s 103.68
	\$ 103.68			FORGIVEN
If bank loss, name of andorser or guaranter:		A	nount Endorsed: \$_	
		Page Subjula	(Outstanding debt)	\$285.98
tr.	omplete on last page of Schedule	. •	,	
A debt or obligation must be shown on this School this Campuign Statement or it was forgiven during	de W there were an outstanding a	mount owed on R at the c		Enter this total on line 12a "owe by" or line 12b "owed to" of the Summery Page

Page 4 o 5



DEBTS	AND	OBL	GAT	enoi
c		N #1 E	46	

1. Committee I.D. Number

CTE Michael C Toylor

ANIAMA AAMMINITIES	committee Name	maero. Taylor		
This Schedule itemizes:			***************************************	
	mittee OR b. Deb ck either a or b. Use only for the p	is and obligations owed <u>io</u> o Prose checked.)	r lorgiven <u>by</u> the co	meritice.
Name and Mailing Address of passen, 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 guaranters, 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	Currulative     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:	4. Type: In Kind Loan			
Michael C. Taylor 14076 Red Pine Dr. Sterling Heights, MI 48313	5. Date Debt Was Incurred:  09/29/11  6. Original Amount of Debt:  94.34		\$	\$_94.34 FORGIVEN
If bank loan, name of endorser or guaranton		Amo	runt Endorsed: 5	
Debt #2 Corp? Yes  Owed to or by:  If bank toan, name of endorser or guarantor:	4. Type: 5. Date Debt Was Incurred: 6. Original Amount of Debt: 8	\$\$ Am	ount Endorsed: \$_	\$FORGIVEN
Debt #3 Corp? Yes Owed to or by:	4. Type:	<u> </u>		
	6. Original Amount of Debt:	<u> </u>	\$	\$FORGIVEN
If bank loan, name of endorser or guaranton		Arr	nount Endorzed: \$_	
		Page Subtotal	(Outstanding debi)	\$94.34
(Ga	mplete on last page of Schedule a	Grand Total of howing amounts owed by o	of all Schedules 15 r to the committee)	\$4,526.84

A data or obligation must be shown on this Schedule II 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.

Enter this total on line 12a "awed by" or line 12b "owed to" of the Summary Page