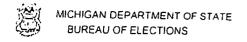
CANDIDATE COMMITTEE

FOR OFFICIAL USE ONLY

COVER PAGE		
Report must be legible, typed or printed in ink the treasurer (or designated record keeper) an	and signed by d candidate. 3. This Statement covers F	From: 10-18-21 to 11-22-21
1. Committee I.D. Number 69954 - 50	4. Candidate Last Name OSKI 4a. Office Sought Including	
2. Committee Name, LEE TORE & DEANNA KOSKI	Let city	LOUNCIL
5.0	To the state of th	MACOMB
5. Committee's Mailing Address 15079 HARVEST ME STERLING HTS M Area Code and Phone 586 S6633	15079	A KOSKI HARVEST MEADOWS NG HTS M, 48313
If the address in this box is different from the commailing address on the Statement of Organization be sent to this address by the filing official.	mittee	36 566 2388
7 Tanana da 0	· · · · · · · · · · · · · · · · · · ·	
15079 HARVEST MEN STERLING HTS M	Designated Record keeper 148313	er's Name and Mailing Address (If the committee has a)
Area Code and Phone 586 566 23		9e.
9a. Pre-Election OR 9b. Post-Election Pre-Election or Post-Election Statement relates to: Primary	Required ONLY if candidate is not on the ballot for the current year: July Quarterly	By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is he 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.
General V Convention	October Quarterly	Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.
Special School Caucus	9c. Annual Statement () Coverage Year 9d. Amendment to Campaign Statement	Effective date of dissolution
Date of Election, Convention or Caucus	(Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)	Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.
11-2-21		
10. Verification: I/We certify that all reasonable diliger	nce was used in the preparation of this stateme	ent and attached schedules (if any) and to the best of
·	25K1 Signature	//
Candidate DEANNA KOSK'	Vanna Pal	Date 12/2/21
Type or Print Name Authority granted under P.A. 388 of 1976	Signature	Date / W/ W/ A
, 5 = = = -1.00. 1 JA 500 OF 1370		

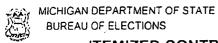


1. Committee I.D. Number 69954-50

SUMMA	۱RY	PAG	Ē
CANDIDATE	CON	TIMN	TEE

2. Committee to REELECT DEANNA KOSKI

RECEIPTS		
3. Contributions	Column I This Period	Column II Cumulative this election cycle
a. Ilemized (Schedule 1A - Column 6)	(3a.) \$	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$	(18.) \$ 14655, 00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ 1000 , 00	(20.) \$ 14655,09
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	(21.) \$
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	(22.) \$
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>689</u> , 44	·
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.) \$ 689, 44.	(23.) s 13810, 42
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		(10),0
Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$	
b. Uniternized (less than \$50.01 each - no Schedule)		
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(10b.) \$	> 2
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11.) \$	(24.) \$
a. Owed by the Committee (Schedule 1E)	(12a.)\$ 6248, 20	
b. Owed to the Committee (Schedule 1E)	(12b.)\$	
	BALANCE STATEMENT	
Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) s 3466. 31	
4. Amount received during reporting period (Line 5. Total Contributions & Other Receipts)	(14.)+8 1000, 00	
5. SUBTOTAL Add lines 13 and 14	(15.) = \$_ 4466. 31	
Amount expended during reporting period (Add lines 9 and 11)	180 1111	
7. ENDING BALANCE (Subtract line 16 from line 15)	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	
		İ



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

1. Committee I.D. Number 69954-50

Committee Name 1)=ANNA KOSKI

C	ANDIDATE (COMMIT	IEE	2. Committee Name	ANNIT NO	3N
Enter contributor's nammiddle initial. Check b Committee (PAC) Rep	ox to indicate if cont	ribution is fro	m a Political Committe	ter last name, first name, ee or an Independent	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name & Address: VA W 8000 DETR 5. If over \$100.00 cum	PAC Receipt? MI CHIG E JE OIT M Julative, please pro	YES AN FFEK Y80 vide:	4. Date of Receipt V-PAC SON Z14	11-4-21	s /, 000.4	3500,00
		_ Employer				
Business Address Type of Contribution: 1	Direct	Loan from	n a person	Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	YES	4. Date of Receipt			
			•		\$. \$
5. If over \$100.00 cum	ulative, please prov	/ide:				
Occupation		Employer				
Business Address				·		
Type of Contribution:	Direct		a person	Fund Raiser	<i>i.</i> .	
3. Contribution # 3 Name & Address:	PAC Receipt?	YES	4. Date of Receipt			
					\$	\$
5. If over \$100.00 cums	ılative, please prov	ilde:				÷
Occupation		Employer_		· ·		
Business Address Type of Contribution:	Direct	Loan from	a person	Fund Daine		
3. Contribution # 4 Name & Address	PAC Receipt?	YES	4. Date of Receipt	Fund Raiser		
					\$	\$
5. If over \$100.00 cumu	ılative, please prov	ide:				
Occupation		Employe	er			
Business Address						
Type of Contribution:	Direct	Loan from	a person F	fund Raiser	·	
,	<u></u>			Page Subtotal	1,000,00	<u> </u>
				Total of All Schedules 1A on last page of Schedule)	Enter this total on line 3a of Summary	f

Page.

Page _____ of ____



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee I. D. Number 69954-50

2. Committee Name Cammittee Toke Elect DEANNA KOSKI.

	THE TONE OF C		
Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name MASS MAILING Address 35468 MOUND Rd StERLING HTS MI 48510	Purpose: MAILING	10/26/21 Date	s <u>5</u> 5,
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Name AMERICAN GRAPHICS Address 348 95 GROES BECK Clinton Twp, Mi 48035	Purpose: PRINTING	1 <u>0/26/2</u> / Date	s <u>113.</u> 8
Fund Raiser Expenditure #3	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Name			
Address	Purpose:	Date	\$
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name /		Date	\$
	Purpose:	55.0	
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
xpenditure #5			
lame			
ddress	Purpose:	Date	\$
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subtotal	this page	689.44
	Grand Total of all Sch (Complete on last page of	1	687.44

Enter this total on line 8a of Summary Page



Page _____ of ____

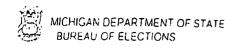
GATIONS 1. Committee I.D. Number 69954-50

1 1E

MMITTEE 2. Committee Name Committee to REELECT DEANNA KOSKI

Summary Page

CANDIDATE COMMITTEE		- 10 110-1	<u> </u>	
This Schedule itemizes:				
a. Debts and obligations owed by or forgiven the con (Che	nmittee OR b. Deb eck either a or b. Use only for the p	ts and obligations owed <u>to</u> ourpose checked)	or forgiven <u>by</u> the co	ommittee.
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 quarantors, 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)
Debi #1 Corp? Yes Owed to or by:	4. Type: NLC	s		
DEANNA KOSKY 15079 HARVEST MEADOWS	5. Date Debt Was Incurred:			
STERLING HTS, MI 48313	6. Original Amount of Debt:	.\$	\$	s 24/1.
 	s 24/, 00	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Arno	ount Endorsed: \$ _	
Owed to or by:	4. Type: NLC	\$		
DEANNA KOSKI 15079 HARVEST MEADOWS	5. Date Debt Was Incurred:	\$, , , , , , , , , , , , , , , , , , , ,
STERLING HTS M. 48313	6. Original Amount of Debt:	<u> </u>	\$	\$ 664 3
	300/11/	\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by:	4. Type: FO	s		
DEANNA KOSKI 15079 HARVEST MEADOWS	5. Date Debt Was Incurred: 2-16-99			
Sterling Hts Mi 48313	6. Original Amount of Debt	\$\$	\$	s 595.
		\$		FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$	
	-	Page Subtotal (0	Outstanding debt)	1500,13
(Con	nplete on last page of Schedule sho	Grand Total of owing amounts owed by or	all Schedules 1E to the committee)	
A debt or obligation must be shown on this Sabada	***		_	Enter this total on line 12a "owed by"" or line 12b
this Campaign Statement or it was forgiven during the	e period covered by this Campai	ount owed on it at the clos gn Statement.		"owed to" of the

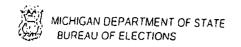


1. Committee I.D. Number 69954-50

CHEDULE 1E

2. Committee Name COMM, HEE to REELECT DEARING KING KING

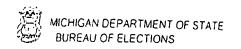
CANDIDATE COMMITTEE	Continue Name Campin ne	I TO NECTECT	JETNAH	170511
This Schedule itemizes:				
β X Debts and obligations owed by or forgiven the com-	nmittee OR b. De eck either a or b. Use only for the	bts and obligations owed to o	or forgiven <u>by</u> the co	mmillee.
3. Name and Mailing Address 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)
Debi #1 Owed to or by: DEANNA KOSKI 15079 HARVEST MEADOWS STERLING HTS, MI 48313	4. Type: FO 5. Date Debt Was Incurred: 4-6-99 6. Original Amount of Debt: 5.337.00		\$	s <u>337.99</u>
If bank loan, name of endorser or guarantor:		\$	ĺ	FORGIVEN
Debt #2 Corp? Yes		Amoi	unt Endorsed: \$	
Owed to or by: DEANNA KOSKI ISO 79 HARVEST MEADOWS SHERING HTS M, 48313 If bank loan, name of endorser or guarantor: Debt #3 Corp? Yes Owed to or by:	4. Type: FO 5. Dute Debt Was Incurred: N-19-79 6. Original Amount of Debt: 8.85, 81	\$\$\$\$\$\$\$	\$unt Endorsed: \$	\$ 885, 81 FORGIVEN
DEANNA KOSKI 15079 HARVEST MEADOWS	5. Date Debt Was Incurred: 6. 16-00 6. Original Amount of Debt: 900	\$ \$ \$ \$	5	900 00 FORGIVEN
and or chadiser or guarantor:		Amou	int Endorsed: \$	
A debt or obligation must be shown on this Schedule if this Campaign Statement or it was forgiven during the p	lete on last page of Schedule sho there was an outstanding amor period covered by this Campaig	Page Subtotal (Ou Grand Total of al wing amounts owed by or to	Il Schedules 1E the committee) Entire on by on by on the confidence of the confiden	ter this total line 12a "owed " or line 12b ved to" of the mmany Page
Page of				



1. Committee I.D. Number 69954-50

2. Committee Name COMM, HEE to REELEAT DEADLA KASK.

CANDIDATE COMMITTEE 2.1	Committee Name CAMINITIE	E 10 NECIEU	DEMNUH	
This Schedule itemizes:				
a. Debts and obligations owed by or forgiven the com		ots and obligations owed to c	or lorgiven <u>by</u> the co	mmittee.
Name and Mailing Address of person, vendor or	ck either a or b. Use only for the p	ourpose checked.)		
financial institution to whom debt is owed.	Type of Obligation (Description)	7. Date and amount of	8. Cumulative	9. Outstanding
Check box to indicate whether debt is owed to an	5. Indicate date debt was	each payment	payment to date on debt	Balance at close of this period
incorporated business. If debt is a bank loan, please	incurred 6. Indicate original amount			(Item 6 minus
provide information regarding the endorsers or guarantors, if any	of debt			llem 8)
Debt #1 Corp? Yes	***			
Owed to or by:	4. Type: 1	S		
DEANNA KOSKY 15079 HARVEST MEADOWS	5. Date Debt Was Incurred:			
15079 HARVEST MEADOWS	1 17 - O.A.	<u> </u>		
Sterling Hts, MI 48313	7-1-0-	\$		74958
3/2/0	6. Original Amount of Debt:	. \$	\$	5 / /it
	5 / 4 9		!	FORGIVEN
If bank toan, name of endorser or guarantor;		\$'	t	
Debt #2 Corp? Yes	^	Amou	uni Endorsed: \$	
Owed to or by:	4. Type: <u>H</u> \$5	\$		
DEANNA, KOSKI	S. Dute Debt Was Incurred:			
15079 HARVEST MEADOWS	10-11-09	\$		
StERLING Hts M. 48313	6. Original Amount of Debt:	\$	1	48600
SPERITAS 1112 PILL 1-	s 486.00	\$	\$	s 100,
		\$		FORGIVEN
If bank loan, name of endorser or guarantor;				
Debt #3 Corp? Yes Owed to gr by	Cauta Tan D	Amou	int Endorsed: \$	
·	Type-ANDY-TREAT	\$	1	
	Date Debt Was Incurred:	\$		
15019 HARVEST MEADOWS	3-31-10/10-19-10	3.		مم د
StERING Hts MI 48313	Original Amount of Debt	\$		10961
STERING FITS MI TOUS	109,67	\$!\$	10/0
		•		FORGIVEN
If bank loan, name of endorser or guarantor;	_			
		Amou	nt Endorsed: \$	
			1.	YUM DE
		Page Subtotal (Out	standing debt)	373,~
(Comple	ele on last page of Schedule show	Grand Total of all	Schedules 1E	
			Ent	er this total
A debt or obligation must be shown on this Schedule it	Na		on :	line 12a 'owed
A debt or obligation must be shown on this Schedule if this Campaign Statement or it was forgiven during the p	eriod covered by this Cameric	nt owed on it at the closing	date of by"	" or line 12b
	oy una campaign	Statement.		red to" of the nmary Page
Page of				• •



1. Committee I.D. Number 69954-50

CANDIDATE COMMITTEE	2. Committee Name Committee	E 10 (EC/ECT	DEANNA	Koski
This Schedule itemizes:		· · · · · · · · · · · · · · · · · · ·		
a. Debts and obligations owed by or forgiven	(Check either a or b. Use only for the pu	is and obligations owed <u>to</u> c prose checked.)	r forgiven by the co	mmillee.
3. Name and Mailing Address of person, vendo financial institution to whom debt is owed. Check box to indicate whether debt is owed to a incorporated business. If debt is a bank loan, p provide information regarding the endorsers or quarantors, if any.	or or 4. Type of Obligation (Description) 5. Indicate date debt was	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)
DEANNA KOSKY 15079 HARVEST MEADO STERLING HTS, MI 483	4. Type OST FR. 5. Date Debt Was Incurred: 5. J.		\$	\$337.00 FORGIVEN
If bank loan, name of endorser or guarantor: Debt #2 Corp? Yes		Amou	nt Endorsed: \$	
OWED TO OT BY: DEANNA KOSKI 15079 HARVEST MEADOU STERLING HTS M. 4831	4. Type: Cost FR 5. Dute Debt Was Incurred: 9-9-15 6. Original Amount of Debt: 8 92, 96	\$ \$ \$	s s	692
if bank loan, name of endorser or guarantor:		\$		FORGIVEN
Debt #3 Corp? Yes		Amou	nt Endorsed: \$	
Owed to or by DEANNA KOSKI SD'79 HARVEST MEADOU STERING HTS MI 4831	4. Type: COST FR 5. Date Debt Was Incurred: 10:24-19 6. Original Amount of Debt: \$ 250	\$ \$ \$ \$		250,00
bank loan, name of endorser or guarantor:		<u> </u>		FORGIVEN
		Amour	I Endarsed: \$	
		Page Subtotal (Out	standing debt)	180.01
(Complete on last page of Schedule showing	Grand Total of all ng amounts owed by or to the grand of all grand of all grand of all grand of all grand of all grand Total of all grand gran	Schedules 1E	248.20
debt or obligation must be shown on this Scheo s Campaign Statement or it was forgiven during	dule if there was an outstanding amoun	Lawad to	on l	er this total ine 12a "owed or line 12b

as forgiven during the period covered by this Campaign Statement.

"owed to" of the Summary Page

Page _____ of ____