



FILED 2021 OCT 22 PM 2:38
MACOMB COUNTY CLERK
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**CANDIDATE COMMITTEE
COVER PAGE**

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

<p>1. Committee I.D. Number <u>137189</u></p> <p>2. Committee Name <u>CTE Maria Gr. Schmidt</u></p> <p>5. Committee's Mailing Address <u>35755 Woodville Dr</u> <u>Sterling Hgts, MI 48312</u></p> <p>Area Code and Phone <u>586 264-9242</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.</p>		<p>3. This Statement covers From: <u>8/24/2021</u> to <u>10/17/2021</u></p> <p>4. Candidate Last Name <u>Schmidt</u> First Name <u>Maria</u> M.I. <u>Gr.</u></p> <p>4a. Office Sought Including District # or Community Served (If applicable) <u>Boardmember - local</u></p> <p>4b. County of Residence <u>Macomb</u></p> <p>6. Treasurer's Name & Residential Address <u>Robert J. Schmidt</u> <u>SAME</u></p> <p>Area Code & Phone _____</p>	
<p>7. Treasurer's Business Address <u>SAME</u></p> <p>Area Code and Phone _____</p>		<p>8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)</p> <p>Area Code and Phone _____</p>	
<p>9. TYPE OF STATEMENT</p> <p>9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election</p> <p>Pre-Election or Post-Election Statement relates to:</p> <p><input type="checkbox"/> Primary</p> <p><input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Convention</p> <p><input type="checkbox"/> Special</p> <p><input type="checkbox"/> School</p> <p><input type="checkbox"/> Caucus</p> <p>Date of Election, Convention or Caucus <u>11/2/2021</u></p>		<p>Required ONLY if candidate is not on the ballot for the current year:</p> <p><input type="checkbox"/> July Quarterly</p> <p><input type="checkbox"/> October Quarterly</p> <p>9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year</p> <p>9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)</p>	
		<p>9e. Dissolution of Candidate Committee</p> <p><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 here by 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.</p> <p>Further, if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.</p> <p>Effective date of dissolution _____</p> <p>Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.</p>	
<p>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.</p>			
<p>Current Treasurer or Designated Record Keeper <u>Robert J. Schmidt</u></p> <p>Type or Print Name</p>		<p><u>[Signature]</u> Date <u>10/21/2021</u></p> <p>Signature</p>	
<p>Candidate <u>Maria Gr. Schmidt</u></p> <p>Type or Print Name</p>		<p><u>[Signature]</u> Date <u>10/21/2021</u></p> <p>Signature</p>	



1. Committee I.D. Number 137189

2. Committee Name CTE Maria G. Schmidt

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>5900.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>5900.00</u>	(18.) \$ <u>11,880.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ <u>Ø</u>	(19.) \$ <u>Ø</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ <u>5900.00</u>	(20.) \$ <u>11,880.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>Ø</u>	(21.) \$ <u>850.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>Ø</u>	(22.) \$ <u>Ø</u>
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B. Column 6)	(8a.) \$ <u>7226.48</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ <u>Ø</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ <u>Ø</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <u>7226.48</u>	(23.) \$ <u>9396.47</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>Ø</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>Ø</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>Ø</u>	(24.) \$ <u>Ø</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>2180.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>Ø</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>5649.00</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>5900.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>11,549.00</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>7226.48</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>4322.52</u>	



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 137189
2. Committee Name CTE Maria G. Schmidt

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>8/25/2021</u> Name & Address: <u>Dan Likowski</u> <u>400 Shortridge</u> <u>Rochester Hills, MI 48307</u>		<u>\$ 100.00</u> \$	Click Here for Memo Itemization
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			
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/25/2021</u> Name & Address: <u>Stephan Pangori</u> <u>8106 Rosebud Ln</u> <u>Clarkston, MI 48348</u>		<u>\$ 200.00</u> \$	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>Civil Engineer</u> Employer <u>AEW</u> Business Address <u>51301 Schoenherr Shelby Twp 48315</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/25/2021</u> Name & Address: <u>Luke Bonner</u> <u>4875 Sawgrass W</u> <u>Ann Arbor, MI 48108</u>		<u>\$ 200.00</u> \$	Click Here for Memo Itemization
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>Bonner Adv. Group</u> Business Address <u>4875 Sawgrass W Ann Arbor, 48108</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser			
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/25/2021</u> Name & Address: <u>Kevin Denha</u> <u>700 N. Old Woodward #300</u> <u>Birmingham, MI 48009</u>		<u>\$ 100.00</u> \$	Click Here for Memo Itemization
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			

Page Subtotal

600.00

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 137189
2. Committee Name CTE Maria Gr. Schmidt

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)
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3. Contribution #1 Name & Address: <u>Robert Abretowski</u> <u>30406 Westmore</u> <u>Madison Hgts, MI 48071</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/25/2021</u>	6. Amount <u>\$ 100.00</u>	7. Cumulative \$ _____
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				

3. Contribution #2 Name & Address: <u>Tony Gallo</u> <u>6303 26 mile rd</u> <u>Washington, MI 48094</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/26/2021</u>	6. Amount <u>\$ 500.00</u>	7. Cumulative \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Self</u> Employer <u>Gallo Co.</u>				
Business Address <u>6303 26 mile rd Washington MI 48094</u>				
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				

3. Contribution #3 Name & Address: <u>Michael Gilson</u> <u>37378 Vandyke</u> <u>Sterling Hgts, MI 48312</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/27/2021</u>	6. Amount <u>\$ 250.00</u>	7. Cumulative \$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Executive</u> Employer <u>Crossroads Plaza</u>				
Business Address <u>37378 Vandyke Sterling Hgts 48312</u>				
Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser				

3. Contribution #4 Name & Address: <u>Thomas Slowik</u> <u>15201 Peggy Ct</u> <u>Sterling Hgts, MI 48312</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/27/2021</u>	6. Amount <u>\$ 100.00</u>	7. Cumulative \$ _____
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				

Page Subtotal

950.00

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 137189
2. Committee Name CTE Maria Gr. Schmidt

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)
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3. Contribution # 1 Name & Address: <u>Rajeev Patel</u> <u>2810 Burning Bush</u> <u>Sterling Hts, 48314</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/30/2021</u>	6. Amount <u>\$ 100.00</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 # 2 Name & Address: <u>P.D. Dandniak</u> <u>24300 50th rd</u> <u>35427 Dodge Park</u> <u>Sterling Hts, 48312</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/30/2021</u>	6. Amount <u>\$ 100.00</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 Name & Address: <u>Piyush Anam</u> <u>5361 Livernois</u> <u>Troy, MI 48098</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/30/2021</u>	6. Amount <u>\$ 100.00</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 # 4 Name & Address: <u>Frances Parker</u> <u>13899 Brougham</u> <u>Sterling Hts 48312</u>	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>8/30/2021</u>	6. Amount <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

Page Subtotal

350.00

Grand Total of All Schedules 1A
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3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>8/30/2021</u> Name & Address: <u>Robert Burns</u> <u>35740 Georgetown</u> <u>Sterling Hgts, MI 48312</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	\$ <u>25.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/9/2021</u> Name & Address: <u>Gerald Potapa</u> <u>35411 Kensington</u> <u>Sterling Hgts, MI 48312</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	\$ <u>100.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/9/2021</u> Name & Address: <u>Chris Fudala</u> <u>15769 Aspen</u> <u>Macomb, MI 48044</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	\$ <u>100.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/9/2021</u> Name & Address: <u>Marlene Verhelst</u> <u>55754 Shelby Rd #9300</u> <u>Shelby Twp, MI 48316</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>25.00</u>	\$ _____
Click Here for Memo Itemization		

Page Subtotal

250.00

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

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**ITEMIZED CONTRIBUTIONS
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CANDIDATE COMMITTEE**

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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 <u> </u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/9/2021</u> Name & Address: <u>CTE Joe Romano</u> <u>12236 Brindley</u> <u>Sterling Hgts, MI 48312</u> 5. If over \$100.00 cumulative, please provide: Occupation <u> </u> Employer <u> </u> Business Address <u> </u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>100.00</u>	\$ <u> </u>
Click Here for Memo Itemization		
3. Contribution #2 <u> </u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>9/9/2021</u> Name & Address: <u>Pashko Ujic</u> <u>38346 Phyllis Ct</u> <u>Sterling Hgts, MI 48312</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Self</u> Employer <u>Dodge Park Convey Island</u> Business Address <u>35252 Dodge Park Sterling Hgts MI 48312</u> Type of Contribution: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ <u>200.00</u>	\$ <u> </u>
Click Here for Memo Itemization		
3. Contribution #3 <u> </u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u> </u> Name & Address: <u>Beth Lewis</u> <u>11149 Fairway Dr</u> <u>Sterling Hgts, MI 48312</u> 5. If over \$100.00 cumulative, please provide: Occupation <u> </u> Employer <u> </u> Business Address <u> </u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>50.00</u>	\$ <u> </u>
Click Here for Memo Itemization		
3. Contribution #4 <u> </u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u> </u> Name & Address: <u>Debra Steffen</u> <u>19240 Woodmont</u> <u>Harper Woods, MI 48225</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer <u> </u> Business Address <u> </u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	\$ <u>200.00</u>	\$ <u> </u>
Click Here for Memo Itemization		

Page Subtotal

550.00

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

Enter this total on
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Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 137189
2. Committee Name CTE Maria Gr. Schmidt

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 9/9/2021
Name & Address:

Lisa Harness
14143 Brandywine
Sterling Hgts MI 48312

\$ 100.00 \$

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

Occupation _____ Employer _____

Business Address _____

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

[Click Here for Memo Itemization](#)

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt _____
Name & Address:

Heather Pastorino
35105 Wellston
Sterling Hgts, MI 48312

\$ 100.00 \$

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

Occupation _____ Employer _____

Business Address _____

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

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3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt _____
Name & Address:

CTE Michael C. Taylor
14076 Red Pine
Sterling Hgts, MI 48313

\$ 100.00 \$

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

Occupation _____ Employer _____

Business Address _____

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

[Click Here for Memo Itemization](#)

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt _____
Name & Address:

Phillip Ruggeri
55744 St. Regis
Shelby Twp, MI 48315

\$ 500.00 \$

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

Occupation Self-Attorney Employer Self

Business Address 43231 Schoenherr Sterling Hgts, MI 48313

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

[Click Here for Memo Itemization](#)

Page Subtotal

800.00

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 137189
2. Committee Name CTE Maria G. Schmidt

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 9/9/2021
Name & Address:

SHPOA

P.O. Box 546
Sterling Hts, MI 48311

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

Occupation _____ Employer _____

Business Address _____

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

\$ 250.00 \$ _____

[Click Here for Memo Itemization](#)

3. Contribution #2 PAC Receipt? ☒ YES 4. Date of Receipt 9/9/2021
Name & Address:

SHFFU Local 1557

38911 Van Dyke

Sterling Hts, MI 48312

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

Occupation _____ Employer _____

Business Address _____

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

\$ 1,000.00 \$ _____

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3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 9/9/2021
Name & Address:

Janel Mariani

35384 Wellston

Sterling Hts, MI 48312

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

Occupation _____ Employer _____

Business Address _____

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

\$ 50.00 \$ _____

[Click Here for Memo Itemization](#)

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 9/9/2021
Name & Address:

Carolyn Szczepanski

1422 Edshire

Sterling Hts, MI 48312

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

Occupation _____ Employer _____

Business Address _____

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

\$ 50.00 \$ _____

[Click Here for Memo Itemization](#)

Page Subtotal

1350.00

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

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 137189
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6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☒ YES 4. Date of Receipt 9/24/2021
Name & Address:

Citizens for honest Government
12955 23 mile rd
Shelby Twp, MI 48315

\$ 500.00 \$

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

Occupation _____ Employer _____

[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 10/2/2021
Name & Address:

Gulio Russo
6137 Catalpa
Sterling Hgts, MI 48314

\$ 300.00 \$

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

Occupation Retired Employer _____

[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 9/9/2021
Name & Address:

Xavier Corpeil
34843 Eason Dr
Sterling Hgts, MI 48312

\$ 200.00 \$

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

Occupation Auto worker Employer Chrysler

[Click Here for Memo Itemization](#)

Business Address 35777 Van Dyke Sterling Hgts, MI 48312

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

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 10/14/2021
Name & Address:

Jeanne Schabath
11101 18 mile rd
Sterling Hgts, MI 48313

\$ 50.00 \$

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

Occupation _____ Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

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

Page Subtotal

1050.00

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

5900.00

Enter this total on
line 3a of Summary
Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 137189
2. Committee Name CTE Maria Gr. Schmidt

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Whitlock Business Systems</u> Address <u>275 E. 12 mile rd</u> <u>Madison Hgts, MI 48071</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>labels</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>8/31/21</u> Date	\$ <u>63.60</u> Click Here for Memo Itemization Type
Expenditure #2 Name <u>C+G Newspaper</u> Address <u>13650 H mile</u> <u>Warren, MI 48089</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>ADS - Sentry</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>9/22/21</u> Date	\$ <u>744.14</u> Click Here for Memo Itemization Type
Expenditure #3 Name <u>C+G Newspaper</u> Address <u>13650 11 mile</u> <u>Warren, MI 48089</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>ADS - Sentry</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/13/21</u> Date	\$ <u>410.04</u> Click Here for Memo Itemization Type
Expenditure #4 Name <u>Mass Mailing</u> Address <u>35468 mound</u> <u>Sterling Hgts, MI 48310</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>lit - Mailing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/11/21</u> Date	\$ <u>1304.31</u> Click Here for Memo Itemization Type
Expenditure #5 Name <u>Mass Mailing</u> Address <u>35468 mound</u> <u>Sterling Hgts, MI 48310</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>lit - Mailing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/2/21</u> Date	\$ <u>1655.00</u> Click Here for Memo Itemization Type

Subtotal this page

4177.11

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 137189
2. Committee Name CTE Maria G. Schmidt

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>CTE Henry Yanez</u> Address _____ <input type="checkbox"/> Fund Raiser	Purpose: <u>Reimburse for Signs</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/6/21</u> Date	\$ <u>310.00</u>
Click Here for Memo Itemization Type			
Expenditure #2 Name <u>American Graphics</u> Address <u>34895 Groesbeck Hwy</u> <u>Clinton Twp, MI 48035</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>lit. Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/7/21</u> Date	\$ <u>1345.81</u>
Click Here for Memo Itemization Type			
Expenditure #3 Name <u>American Graphics</u> Address <u>34895 Groesbeck Hwy</u> <u>Clinton twp. MI 48035</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>slate Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/7/21</u> Date	\$ <u>525.60</u>
Click Here for Memo Itemization Type			
Expenditure #4 Name <u>Century Banquet</u> Address <u>33204 maple lane</u> <u>Sterling Hts, MI 48312</u> <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>10/9/21</u> Date	\$ <u>867.96</u>
Click Here for Memo Itemization Type			
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	\$ _____
Click Here for Memo Itemization Type			

Subtotal this page

3049.37

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

7226.48

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS

SCHEDULE 1E

CANDIDATE COMMITTEE

1. Committee I.D. Number 137189

2. Committee Name CTE MARIA G. SCHMIDT

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: ROBERT J. SCHMIDT 35755 WOODVILLA DR STERLING HGTS, MI.48312	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>01/24/03</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1,600.00</u>	<u>12/17/07</u> \$ <u>720.00</u> \$ \$ \$ \$	\$ <u>720.00</u>	\$ <u>880.00</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: ROBERT J. SCHMIDT 35755 WOODVILLA DR STERLING HGTS, MI 48312	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>5/30/03</u> 6. <u>Original Amount of Debt:</u> <u>\$ 300.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>300.00</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: ROBERT J. SCHMIDT 35755 WOODVILLA DR. STERLING HGTS, MI 48312	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>2/23/05</u> 6. <u>Original Amount of Debt:</u> <u>\$ 1,000.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>1,000.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) **\$2,180.00**

Grand Total of all Schedules 1E **\$2,180.00**
(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 137189

2. Committee Name CTE Maria Gr. Schmidt

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>9/9/21</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>40</u>	5. Type of Fund Raising Activity <u>Pasta Dinner</u>	6. Address and Name (If any) of the place where the activity was held. <u>Century Banquet</u> <u>33204 maple lane</u> <u>Sterling Heights MI</u> <input type="checkbox"/> Private Residence <u>48312</u>
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7. Total Contributions 6630.00

8. Other Receipts 0

9. Gross Receipts (Add lines 7 and 8) 6630.00

10. Total Cost of Event 1071.82
(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.