



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

FILED 2021 OCT 22 AM 10:23  
MACOMB COUNTY CLERK

**CANDIDATE COMMITTEE  
COVER PAGE**

FOR OFFICIAL USE ONLY

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

3. This Statement covers From: 08/24/2021 to 10/17/2021

1. Committee I.D. Number

139348

4. Candidate Last Name

Sierawski

First Name

Elisabeth

M.I.

M

4a. Office Sought Including District # or Community Served (If applicable)

**Sterling Heights City Council**

4b. County of Residence **MACOMB**

2. Committee Name

**CTE Liz Sierawski**

5. Committee's Mailing Address

40426 William Dr.  
Sterling Heights, MI 48313

6. Treasurer's Name & Residential Address

Elisabeth M. Sierawski  
40426 William Dr.  
Sterling Heights, MI 48313

Area Code and Phone (586) 977-0143

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.

Area Code & Phone (586) 977-0143

7. Treasurer's Business Address

40426 William Dr.  
Sterling Heights, MI 48313

8. Designated Record Keeper's Name and Address (If the committee has a  
Designated Record Keeper)

Area Code and Phone (586) 977-0143

Area Code and Phone \_\_\_\_\_

**9. TYPE OF STATEMENT**

9a. ☒ Pre-Election OR 9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

☐ Primary

☒ General

☐ Convention

☐ Special

☐ School

☐ Caucus

Required ONLY if candidate  
is not on the ballot for the  
current year:

☐ July Quarterly

☐ October Quarterly

9c. ☐ Annual Statement (\_\_\_\_\_) Coverage Year

9d. ☐ Amendment to Campaign Statement  
(Complete Item 9a, 9b, 9c or 9e to  
indicate which Statement is being  
amended.)

Date of Election, Convention or Caucus

11/02/2021

**9e. Dissolution of Candidate Committee**

☐ 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.

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 Elisabeth M. Sierawski

Type or Print Name

Signature

Date 10/21/2021

Candidate Elisabeth M. Sierawski

Type or Print Name

Signature

Date 10/21/2021



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 139348

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name CTE Liz Sierawski

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>19,150.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$19,150.00</u>	(18.) \$ <u>\$51,900.00</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>\$19,150.00</u>	(20.) \$ <u>\$51,900.00</u>
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <u>\$0.00</u>	(21.) \$ <u>\$0.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ <u>\$0.00</u>	(22.) \$ <u>\$0.00</u>
<b>EXPENDITURES</b>		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$5,407.88</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>\$5,407.88</u>	(23.) \$ <u>\$33,633.74</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)</b>		
10. Disbursements		
a. Itemized (Schedule 1C, Column 6)	(10a.) \$ <u>\$0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ <u>\$0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ <u>\$0.00</u>	(24.) \$ <u>\$0.00</u>
<b>DEBTS AND OBLIGATIONS</b>		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>\$0.00</u>	
<b>BALANCE STATEMENT</b>		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>\$35,796.99</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$19,150.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$ <u>\$54,946.99</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$ <u>\$5,407.88</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>\$49,539.11</u>	*



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139348  
2. Committee Name CTE Liz Sierawski

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)
<p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/25/2021</u></p> <p>Name &amp; Address: <u>Kimberley Belcastro</u> <u>11427 Heatherwood Ct</u> <u>Shelby Twp, MI 48315</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u>      Employer <u>Da Franciscos</u> Business Address <u>49521 Van Dyke Ave, Shelby Twp, MI 48317</u> Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>500</u>	\$ <u>500</u>
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/25/2021</u></p> <p>Name &amp; Address: <u>Gordon B. Wilson</u> <u>49572 Compass Point Dr.</u> <u>Chesterfield, MI 48047</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Contractor</u>      Employer <u>AEW Inc.</u> Business Address <u>51301 Schoenherr Rd, Shelby Twp, MI 48315</u> Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>200</u>
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/25/2021</u></p> <p>Name &amp; Address: <u>Stephen Pangori</u> <u>8106 Rosebud Lane</u> <u>Clarkson, MI 48348</u></p> <p>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</p>		\$ <u>100</u>	\$ <u>100</u>
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/25/2021</u></p> <p>Name &amp; Address: <u>Gary Novara</u> <u>888 W Big Beaver Ste 600</u> <u>Troy, MI 48084</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u>      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input type="checkbox"/> Fund Raiser</p>		\$ <u>1000</u>	\$ <u>1500</u>

Page Subtotal \$1,700.00

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 139348

2. Committee Name CTE Liz Sierawski

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)
<p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2021</u></p> <p>Name &amp; Address: <u>Lukas Bonner</u> <u>4875 Sawgrass W</u> <u>Ann Arbor, MI 48108</u></p> <p>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</p>		\$ <u>100</u>	\$ <u>100</u>
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2021</u></p> <p>Name &amp; Address: <u>Sarah Bonner</u> <u>4875 Sawgrass W</u> <u>Ann Arbor, MI 48108</u></p> <p>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</p>		\$ <u>100</u>	\$ <u>100</u>
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2021</u></p> <p>Name &amp; Address: <u>John Elkhoury</u> <u>44530 Apple Blossom Dr.</u> <u>Sterling Heights, MI 48314</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u>      Employer <u>Self</u> Business Address <u>44530 Apple Blossom Dr, Sterling Heights, MI 48314</u> Type of Contribution: <input checked="" type="checkbox"/> Direct    <input type="checkbox"/> Loan from a person    <input type="checkbox"/> Fund Raiser</p>		\$ <u>200</u>	\$ <u>200</u>
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2021</u></p> <p>Name &amp; Address: <u>Tom Parker</u> <u>356 North Clifton</u> <u>Bloomfield Hills, MI 48301</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u>      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct    <input type="checkbox"/> Loan from a person    <input type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>600</u>

Page Subtotal \$500.00

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

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Page.





**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139348  
2. Committee Name CTE Liz Sierawski

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)
<p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2021</u></p> <p>Name &amp; Address: Jeffery Cojocar 51663 Eva Drive Macomb, MI 48042</p> <p>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</p>		\$ <u>100</u>	\$ <u>100</u>
		<a href="#">Click Here for Memo Itemization</a> <input type="button" value="v"/>	
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2021</u></p> <p>Name &amp; Address: Kimberly Cojocar 51663 Eva Drive Macomb, MI 48042</p> <p>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</p>		\$ <u>100</u>	\$ <u>100</u>
		<a href="#">Click Here for Memo Itemization</a> <input type="button" value="v"/>	
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>08/29/2021</u></p> <p>Name &amp; Address: James Rossman 14836 Park Drive Shelby Twp, MI 48315</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u>      Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct    <input type="checkbox"/> Loan from a person    <input type="checkbox"/> Fund Raiser</p>		\$ <u>250</u>	\$ <u>250</u>
		<a href="#">Click Here for Memo Itemization</a> <input type="button" value="v"/>	
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/01/2021</u></p> <p>Name &amp; Address: Guy Rizzo 65 Macomb Place STE F Mount Clemens, MI 48043</p> <p>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</p>		\$ <u>100</u>	\$ <u>100</u>
		<a href="#">Click Here for Memo Itemization</a> <input type="button" value="v"/>	

Page Subtotal \$550.00

Grand Total of All Schedules 1A  
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**ITEMIZED CONTRIBUTIONS**  
**SCHEDULE 1A**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139348  
2. Committee Name CTE Liz Sierawski

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>09/01/2021</u> Name & Address: <u>Michael I Gilson</u> <u>37308 Van Dyke Ave</u> <u>Sterling Heights, MI 48312</u>		\$ <u>250</u>	\$ <u>250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate</u> Employer <u>Gilson Corporation</u> Business Address <u>37308 Van Dyke Ave, Sterling Heights, MI 48312</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 <input type="button" value="v"/>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u> Name & Address: <u>Michael Macherzak</u> <u>57067 Covington</u> <u>Washington Twp, MI 48094</u>		\$ <u>200</u>	\$ <u>200</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Self</u> Business Address <u>57067 Covington, Washington Twp, MI 48094</u> 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 <input type="button" value="v"/>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u> Name & Address: <u>Herbert L. Gilbert</u> <u>1038 Pelham Blvd.</u> <u>Waterford, MI 48328</u>		\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Psychologist</u> Employer <u>Self</u> Business Address <u>1038 Pelham Blvd, Waterford, MI 48328</u> 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 <input type="button" value="v"/>	
3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u> Name & Address: <u>Jonathan Ugval</u> <u>30 Harbor Hill Rd</u> <u>Grosse Pte Farms, MI 48326</u>		\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u> Employer <u>House Arrest Services</u> Business Address <u>16039 E 9 Mile Rd, Eastpointe, MI48021</u> 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 <input type="button" value="v"/>	

Page Subtotal \$1,450.00

Grand Total of All Schedules 1A  
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Page.





**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139348

2. Committee Name CTE Liz Sierawski

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>09/08/2021</u> Name & Address: <u>John S. Ange</u> <u>3031 Alden Ct.</u> <u>Port Huron, MI 48060</u>		\$ <u>100</u>	\$ <u>100</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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value="v"/>	
3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u> Name & Address: <u>Ernest L. Robinette</u> <u>38600 Van Dyke Ave.</u> <u>Sterling Heights, MI 48312</u>		\$ <u>300</u>	\$ <u>300</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Self</u> Business Address <u>38600 Van Dyke Ave, Sterling Heights, MI 48312</u> 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 <input type="button" value="v"/>	
3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u> Name & Address: <u>Raymond A. Confer</u> <u>12119 Forest Glen Lane</u> <u>Shelby Twp, MI 48315</u>		\$ <u>500</u>	\$ <u>500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ 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 <input type="button" value="v"/>	
3. Contribution # 4      PAC Receipt? <input checked="" type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u> Name & Address: <u>Sterling Heights Fire Fighters Union/ Local 1557</u> <u>38911 Van Dyke Ave.</u> <u>Sterling Heights, MI 48313</u>		\$ <u>1000</u>	\$ <u>1000</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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value="v"/>	

Page Subtotal \$1,900.00

Grand Total of All Schedules 1A  
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Page.



**ITEMIZED CONTRIBUTIONS**  
**SCHEDULE 1A**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139348  
2. Committee Name CTE Liz Sierawski

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)
<p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: Robert Huth 19500 Hall Rd., #100 Clinton Twp, MI 48038</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u>      Employer <u>Self</u> Business Address <u>19500 Hall Rd, #100, Clinton Twp, MI 48038</u> Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>500</u>	\$ <u>500</u>
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: Robert Kirk 19500 Hall Rd., #100 Clinton Twp, MI 48038</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u>      Employer <u>Self</u> Business Address <u>19500 Hall Rd, #100, Clinton Twp, MI 48038</u> Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>500</u>	\$ <u>500</u>
<p>3. Contribution # 3      PAC Receipt? <input checked="" type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: Operating Engineers Local 324 PAC 500 Hulet Drive Bloomfield Twp, MI 48302</p> <p>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 checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>1000</u>	\$ <u>1000</u>
<p>3. Contribution # 4      PAC Receipt? <input checked="" type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: Sheet Metal Workers Local 80 PAC 17100 W. 12 Mile Rd, 2nd Floor Southfield, MI 48076</p> <p>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 checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>250</u>	\$ <u>250</u>

Page Subtotal **\$2,250.00**

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 139348  
2. Committee Name CTE Liz Sierawski

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)
<p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: David Griem 14 First Street Mount Clemens, MI 48043</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u>      Employer <u>Self</u> Business Address <u>14 First St, Mount Clemens, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>500</u>	\$ <u>500</u>
<p>3. Contribution #2      PAC Receipt? <input checked="" type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: Sterling Heights POA PAC PO Box 546 Sterling Heights, MI 48311</p> <p>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 checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>250</u>	\$ <u>250</u>
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: Ron Marsh 43550 Elizabeth Rd. Ste 200 Clinton Twp, MI 48036</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u>      Employer <u>Self</u> Business Address <u>43550 Elizabeth Rd, Ste 200, Clinton Twp, MI 48036</u> Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>350</u>
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: Lisa Amat 44012 Basswood Dr. Sterling Heights, MI 48314</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Housewife</u>      Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>1000</u>	\$ <u>1000</u>

Page Subtotal \$1,850.00

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 139348  
2. Committee Name CTE Liz Sierawski

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 09/08/2021  
Name & Address:  
Thomas R. Everett  
2241 Woodward Hts Apt 202  
Ferndale, MI 48220

\$ 600

\$ 600

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

Occupation Attorney Employer Self

Click Here for Memo Itemization

Business Address 2241 Woodward Hts Apt 202, Ferndale, MI 48220

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

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 09/08/2021  
Name & Address:  
Michael Diamond  
636 Island Dr.  
White Lake, MI 48386

\$ 250

\$ 250

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 09/08/2021  
Name & Address:  
Jan Lee  
15355 32 Mile Rd.  
Ray, MI 48096

\$ 150

\$ 150

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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt 09/08/2021  
Name & Address:  
Eugene Dagostini  
38700 Van Dyke Ave. Suite 200  
Sterling Heights, MI 48312

\$ 200

\$ 200

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

Occupation Attorney Employer Self

Click Here for Memo Itemization

Business Address 38700 Van Dyke Ave. Suite 200, Sterling Heights, MI 48312

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

Page Subtotal \$1,200.00

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 139348

2. Committee Name CTE Liz Sierawski

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)
<p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: <u>Theodore A. McGregor</u> <u>38419 Wooster St.</u> <u>Clinton Twp, MI 48036</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u>      Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>300</u>	\$ <u>300</u>
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: <u>Pashko Ujkic</u> <u>38346 Phyllis Ct.</u> <u>Sterling Heights, MI 48312</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u>      Employer <u>Dodge Park Coney</u> Business Address <u>35252 Dodge Park Rd, Sterling Heights, MI 48312</u> Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>500</u>	\$ <u>700</u>
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: <u>Cynthia Simone</u> <u>71256 Cedar Bend Lane</u> <u>Romeo, MI 48065</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Housewife</u>      Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>250</u>	\$ <u>250</u>
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: <u>Stavros Toma</u> <u>47677 Milonas Rd.</u> <u>Shelby Twp, MI 48315</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Home Care Owner</u>      Employer <u>Self</u> Business Address <u>19500 Hall Rd, Clinto Twp, MI 48038</u> Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>250</u>	\$ <u>250</u>

Page Subtotal \$1,300.00

Grand Total of All Schedules 1A  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139348  
2. Committee Name CTE Liz Sierawski

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)
<p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: Jon Novak 22611 Oconner St. St Clair Shores, MI 48080</p> <p>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 checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>100</u>
		<a href="#">Click Here for Memo Itemization</a> <input type="button" value="v"/>	
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: Peter Webster 14584 Sundew Lane Sterling Heights, MI 48312</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u>      Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>200</u>
		<a href="#">Click Here for Memo Itemization</a> <input type="button" value="v"/>	
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: Theresa Aubrey 1853 Rochester Rd. Leonard, MI 48367</p> <p>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 checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>100</u>
		<a href="#">Click Here for Memo Itemization</a> <input type="button" value="v"/>	
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: Anthony Aubrey 1853 Rochester Rd. Leonard, MI 48367</p> <p>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 checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>100</u>
		<a href="#">Click Here for Memo Itemization</a> <input type="button" value="v"/>	

Page Subtotal \$400.00

Grand Total of All Schedules 1A  
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**ITEMIZED CONTRIBUTIONS**  
**SCHEDULE 1A**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139348  
2. Committee Name CTE Liz Sierawski

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)
<p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: Raymond Debuck 67587 Hidden Oak Lane Washington Twp, MI 48095</p> <p>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 checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>100</u>
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: Jeremy Figg Fisher 31428 Saratoga Ave. Warren, MI 48093</p> <p>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 checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>100</u>
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: Paul Jewell 14599 Lynhurst Washington Twp, MI 48094</p> <p>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 checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>100</u>
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: Thomas Wickersham 14863 Towering Oaks Dr. Shelby Twp, MI 48315</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>President</u>      Employer <u>Roncelli, Inc.</u> Business Address <u>6471 Metro Parkway, Sterling Heights, MI 48312</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>500</u>	\$ <u>500</u>

Page Subtotal \$800.00

Grand Total of All Schedules 1A  
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**ITEMIZED CONTRIBUTIONS**  
**SCHEDULE 1A**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139348  
2. Committee Name CTE Liz Sierawski

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)
<p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: <u>Jean Cloud</u> <u>53219 Kentland Street</u> <u>Macomb, MI 48042</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u>      Employer <u>Macomb County</u> Business Address <u>One South Main St, Mount Clemens, MI 48043</u> Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>300</u>	\$ <u>300</u>
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: <u>CTE Derek Miller</u> <u>PO Box 143</u> <u>Warren, MI 48090</u></p> <p>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 checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>100</u>
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: <u>Suzanne Faunce</u> <u>8300 Common Rd.</u> <u>Warren, MI 48093</u></p> <p>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 checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>100</u>
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: <u>Mark Savaya</u> <u>477 North Oak Dr.</u> <u>Commerce Twp, MI 48390</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Entrepreneur</u>      Employer <u>Self</u> Business Address <u>477 N. Oak Dr, Commerce Twp, MI 48390</u> Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>1000</u>	\$ <u>1000</u>

Page Subtotal \$1,500.00

Grand Total of All Schedules 1A  
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**ITEMIZED CONTRIBUTIONS**  
**SCHEDULE 1A**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139348  
2. Committee Name CTE Liz Sierawski

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)
<p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: Nathan Inks 11848 Angus Circle Sterling Heights, MI 48312</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Law Clerk</u>      Employer <u>Michigan Supreme Court</u> Business Address <u>3034 W. Grand Blvd, Detroit, MI 48202</u> Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>500</u>	\$ <u>1500</u>
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: Harold Fried 150 W. 2nd St. Suite 250 Royal Oak, MI 48067</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u>      Employer <u>Self</u> Business Address <u>150 W. 2nd St, Royal Oak, MI 48067</u> Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>500</u>	\$ <u>500</u>
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: Joseph Oram PO Box 252755 West Bloomfield, MI 48325</p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u>      Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct      <input type="checkbox"/> Loan from a person      <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>300</u>	\$ <u>300</u>
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: Richard Tabbi 52568 Royal Forest Dr. Shelby Twp, MI 48315</p> <p>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 checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>100</u>

Page Subtotal \$1,400.00

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**ITEMIZED CONTRIBUTIONS**  
**SCHEDULE 1A**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139348  
2. Committee Name CTE Liz Sierawski

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>09/08/2021</u>	
Name & Address: Mark Mileski 52833 Winsome Lane Chesterfield Twp, MI 48051		\$ <u>100</u>	\$ <u>100</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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value="v"/>	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/08/2021</u>	
Name & Address: Vincent Lepore 18819 Newport St. Macomb Twp, MI 48042		\$ <u>75</u>	\$ <u>75</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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value="v"/>	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/08/2021</u>	
Name & Address: Ann Marie Lepore 18819 Newport St. Macomb Twp, MI 48042		\$ <u>75</u>	\$ <u>75</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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value="v"/>	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/08/2021</u>	
Name & Address: Carol Froling 5440 Brookdale Rd. Bloomfield Hills, MI 48304		\$ <u>100</u>	\$ <u>100</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 checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization <input type="button" value="v"/>	

Page Subtotal \$350.00

Grand Total of All Schedules 1A  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139348

2. Committee Name CTE Liz Sierawski

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)
<p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: <u>William J. Froling</u> <u>5440 Brookdale Rd.</u> <u>Bloomfield Hills, MI 48304</u></p> <p>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 checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>100</u>
<p>3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: <u>Ronald Fenton</u> <u>3583 Port Cove Dr.</u> <u>Waterford, MI 48328</u></p> <p>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 checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>100</u>
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: <u>Robert Hindman</u> <u>49522 Keycove St.</u> <u>Chesterfield Twp. MI 48047</u></p> <p>5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u>      Employer <u>American Graphics</u> Business Address <u>34895 Groesbeck Hwy, Clinto Twp, MI 48035</u> Type of Contribution: <input type="checkbox"/> Direct    <input type="checkbox"/> Loan from a person    <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>200</u>	\$ <u>400</u>
<p>3. Contribution # 4      PAC Receipt? <input checked="" type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: <u>Michigan Regional Council of Carpenters PAC</u> <u>400 Tower Ren Cen, Suite 1010</u> <u>Detroit, MI 48243</u></p> <p>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 checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>1000</u>	\$ <u>1000</u>

Page Subtotal \$1,400.00

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139348

2. Committee Name CTE Liz Sierawski

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)
<p>3. Contribution # 1      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: <b>William Cataldo</b> 1157 Sandy Ridge Dr. Rochester Hills, MI 48306</p> <p>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 checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100</u>	\$ <u>100</u>
<p>3. Contribution #2      PAC Receipt? <input checked="" type="checkbox"/> YES      4. Date of Receipt <u>09/08/2021</u></p> <p>Name &amp; Address: <b>Citizens For Honest Government</b> 12955 23 Mile Rd Shelby Twp, MI 48315</p> <p>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 checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>500</u>	\$ <u>500</u>
<p>3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____</p> <p>Name &amp; Address: _____</p> <p>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</p>		\$ _____	\$ _____
<p>3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt _____</p> <p>Name &amp; Address: _____</p> <p>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</p>		\$ _____	\$ _____

Page Subtotal

\$600.00

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

\$19,150.00

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED EXPENDITURES  
SCHEDULE 1B  
CANDIDATE COMMITTEE**

1. Committee I. D. Number 139348  
2. Committee Name CTE Liz Sierawski

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>City of Sterling Heights</u> Address <u>40333 Dodge Park</u> <u>Sterling Heights, MI 48313</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Voter List</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/08/2021</u> Date	\$ <u>33</u>
Expenditure #2 Name <u>Office Max</u> Address <u>37600 VanDyke Ave.</u> <u>Sterling Heights, MI 48312</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Office Goods</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/08/2021</u> Date	\$ <u>67.35</u>
Expenditure #3 Name <u>C and G Newspaper</u> Address <u>13650 11 Mile Rd.</u> <u>Warren, MI 48089</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertisement</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/21/2021</u> Date	\$ <u>744.16</u>
Expenditure #4 Name <u>Penna's of Sterling</u> Address <u>38400 Van Dyke Ave.</u> <u>Sterling Heights, 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>09/22/2021</u> Date	\$ <u>1000</u>
Expenditure #5 Name <u>American Graphics</u> Address <u>34895 Groesbeck Hwy</u> <u>Clinto Twp, MI 48035</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/29/2021</u> Date	\$ <u>439.90</u>

Subtotal this page **\$2,284.41**

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 139348  
2. Committee Name CTE Liz Sierawski

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <b>C and G Newspaper</b>  Address 13650 11 Mile Road Warren, MI 48089  <input type="checkbox"/> Fund Raiser	Purpose: <u>Advertisement</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/07/2021</u> Date	\$ <u>410.04</u>  Click Here for Memo Itemization Type <input type="button" value="v"/>
Expenditure #2 Name <b>Mass Mailing Inc.</b>  Address 35468 Mound Road Sterling Heights, MI 48310  <input type="checkbox"/> Fund Raiser	Purpose: <u>Mailing</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/09/2021</u> Date	\$ <u>1304.21</u>  Click Here for Memo Itemization Type <input type="button" value="v"/>
Expenditure #3 Name <b>Home Depot</b>  Address 3700 Van Dyke Ave. Sterling Heights, MI 48312  <input type="checkbox"/> Fund Raiser	Purpose: <u>Sign Supplies</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/12/2021</u> Date	\$ <u>443.72</u>  Click Here for Memo Itemization Type <input type="button" value="v"/>
Expenditure #4 Name <b>American Graphics</b>  Address 34895 Groesbeck Hwy Clinton Twp, MI 48035  <input type="checkbox"/> Fund Raiser	Purpose: <u>Printing/Signs</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/13/2021</u> Date	\$ <u>965.50</u>  Click Here for Memo Itemization Type <input type="button" value="v"/>
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 <input type="button" value="v"/>

Subtotal this page **\$3,123.47**

Grand Total of all Schedules 1B  
(Complete on last page of Schedule) **\$5,407.88**

Enter this total  
on line 8a of  
Summary Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139348  
2. Committee Name CTE Liz Sierawski

**- USE A SEPARATE SHEET FOR EACH EVENT -**

3. Date Event Was Held  <u>09/08</u>	4. Number of Individuals Attending or Participating (whichever is greater)  <u>100</u>	5. Type of Fund Raising Activity  <u>Dinner</u>	6. Address and Name (If any) of the place where the activity was held. <u>Penna's of Sterling</u> <u>38400 Van Dyke</u> <u>Sterling Heights, MI 48312</u> <input type="checkbox"/> Private Residence
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7. Total Contributions \$16,150.00  
8. Other Receipts \_\_\_\_\_  
9. Gross Receipts (Add lines 7 and 8) \$16,150.00  
10. Total Cost of Event \$1,000.00  
(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.