



**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: <u>08/24/2021</u> to <u>10/17/2021</u>	
1. Committee I.D. Number 140074	4. Candidate Last Name <u>Nelson</u> First Name <u>Ken</u> M.I. <u>R</u>
2. Committee Name CTE Ken Nelson Mayor	4a. Office Sought Including District # or Community Served (If applicable) Mayor, Sterling Heights
5. Committee's Mailing Address 40862 Firesteel Dr. Sterling Heights, MI 48313	4b. County of Residence MACOMB
Area Code and Phone <u>(586) 419-0701</u> If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	6. Treasurer's Name & Residential Address Ken Nelson 40862 Firesteel Dr. Sterling Heights, MI 48313
7. Treasurer's Business Address	Area Code & Phone <u>(586) 419-0701</u>
Area Code and Phone _____	8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)
Area Code and Phone _____	Area Code and Phone _____
9. TYPE OF STATEMENT	
9a. <input checked="" type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election	Required ONLY if candidate is not on the ballot for the current year:
Pre-Election or Post-Election Statement relates to:	<input type="checkbox"/> July Quarterly
<input type="checkbox"/> Primary	<input type="checkbox"/> October Quarterly
<input checked="" type="checkbox"/> General	9c. <input type="checkbox"/> Annual Statement (_____) Coverage Year
<input type="checkbox"/> Convention	9d. <input checked="" type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)
<input type="checkbox"/> Special	
<input type="checkbox"/> School	
<input type="checkbox"/> Caucus	
Date of Election, Convention or Caucus <u>11/02/2021</u>	
9e. Dissolution of Candidate Committee.	
<input type="checkbox"/> By checking this item I/We certify any outstanding debt by the committee to the candidate or his or her spouse is 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 <u>Kenneth R. Nelson</u>	<u>Kenneth R. Nelson</u> Date <u>11/12/2021</u>
Type or Print Name	Signature
Candidate <u>Ken Nelson</u>	<u>Ken Nelson</u> Date <u>11/12/2021</u>
Type or Print Name	Signature



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 140074

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name CTE Ken Nelson Mayor

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>2,816.10</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>\$2,816.10</u>	(18.) \$ <u>\$23,133.25</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u>\$0.00</u>	(19.) \$ <u></u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>\$2,816.10</u>	(20.) \$ <u>\$23,133.25</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u></u>	(21.) \$ <u></u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u></u>	(22.) \$ <u></u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>\$2,881.58</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>\$2,881.58</u>	(23.) \$ <u>\$20,480.58</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u></u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u></u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	<u></u>	(24.) \$ <u></u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>\$13,839.25</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u></u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>\$2,718.15</u>	
14. Amount received during reporting period (Line 5; Total Contributions & Other Receipts)	(14.) + \$	<u>\$2,816.10</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>\$5,534.25</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>\$2,881.58</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>\$2,652.67</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 140074

2. Committee Name CTE Ken Nelson Mayor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>08/30/2021</u>	
Name & Address: Michael Moreau 12758 DeCook Dr. Sterling Heights, MI 48313		\$ <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 type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/08/2021</u>	
Name & Address: Kara Calandrucci 40646 Chardon Dr. Sterling Heights, MI 48313		\$ <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 type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/29/2021</u>	
Name & Address: John Lehman 43452 Leelanau Dr. Sterling Heights, MI 48314		\$ <u>120.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Contract Analyst</u> Employer <u>Defense Logistics Agency</u> Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/30/21</u>	
Name & Address: Donna Hirmiz 33353 Stoner Dr. Sterling Heights		\$ <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 type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$420.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

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

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/05/2021</u>	
Name & Address: William Yerabek Marc Dr. (3302) Sterling Heights, MI 48310		\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution #2	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt _____	
Name & Address: Joseph Valentic 43719 Saint Julian Ct. Sterling Heights, MI 48314		\$ <u>250.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>The Growth Advocate</u> Business Address <u>Same as Above</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		Click Here for Memo Itemization	
3. Contribution # 3	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>10/06/2021</u>	
Name & Address: James Sliwinski 8737 Lozen Dr. Sterling Heights, MI 48313		\$ <u>100.00</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	
3. Contribution # 4	PAC Receipt? <input type="checkbox"/> YES	4. Date of Receipt <u>09/17/2021</u>	
Name & Address: Paul Smith 41280 Utica Rd. Sterling Heights, MI 48313		\$ <u>496.10</u>	\$ _____
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		Click Here for Memo Itemization	

Page Subtotal **\$896.10**

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number 140074

2. Committee Name CTE Ken Nelson Mayor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name & Address: Geryl Walker 54643 Shelby Rd. Shelby Township, MI 48316	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/06/2021</u>	\$ <u>50.00</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	
3. Contribution #2 Name & Address: Brent Odell 13795 Graham Dr. Shelby Township, MI 48315	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/06/2021</u>	\$ <u>50.00</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	
3. Contribution #3 Name & Address: Paul Illich 34285 Groesbeck Hwy. Clinton Twp, MI 48035	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/06/2021</u>	\$ <u>100.00</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	
3. Contribution #4 Name & Address: David Vinson 39344 Early Dr. Sterling Heights, MI 48313	PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/06/2021</u>	\$ <u>100.00</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	

Page Subtotal \$300.00

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 140074

2. Committee Name CTE Ken Nelson Mayor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/06/2021</u></p> <p>Name & Address:</p> <p>Kathy Schneider 37869 Erna Dr. Sterling Heights, MI 48312</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>50.00</u>	\$ _____
		Click Here for Memo Itemization	
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/06/2021</u></p> <p>Name & Address:</p> <p>Nancy Tiseo 16155 Vista Woods Ct. Clinton Twp, MI 48038</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation <u>Housewife</u> Employer <u>None</u></p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>150.00</u>	\$ _____
		Click Here for Memo Itemization	
<p>3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/06/2021</u></p> <p>Name & Address:</p> <p>Gail Vinson 39344 Early Dr. Sterling Heights, MI 48313</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ _____
		Click Here for Memo Itemization	
<p>3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/06/2021</u></p> <p>Name & Address:</p> <p>Robert Mott 13849 Nowak Sterling Heights, MI 48310</p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ <u>100.00</u>	\$ _____
		Click Here for Memo Itemization	

Page Subtotal \$400.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

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

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/06/2021</u> Name & Address: Frederick Coveau 12755 Partridge Run Shelby Twp, MI 48315 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		\$ <u>300.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/06/2021</u> Name & Address: Barbara Coveau 12755 Partridge Run Shelby Twp, MI 48315 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		\$ <u>100.00</u>	\$ _____
		Click Here for Memo Itemization	
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/06/2021</u> Name & Address: Kenneth Immier 14023 Pernell Dr. Sterling Heights, MI 48313 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Hawk Industrial RE Services</u> Business Address <u>Fraser MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ <u>200.00</u>	\$ <u>500.00</u>
		Click Here for Memo Itemization	
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/06/2021</u> Name & Address: Roy Wilson 34733 Fargo Dr. Sterling Heights, MI 48312 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		\$ <u>100.00</u>	\$ _____
		Click Here for Memo Itemization	

Page Subtotal **\$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 140074

2. Committee Name CTE Ken Nelson Mayor

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/06/2021</u> Name & Address: <u>Michelle Smith</u> <u>11461 Peyton Dr.</u> <u>Sterling Heights, MI 48312</u>		\$ <u>100.00</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	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address _____		\$ _____	\$ _____
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		Click Here for Memo Itemization	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address _____		\$ _____	\$ _____
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		Click Here for Memo Itemization	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name & Address _____		\$ _____	\$ _____
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		Click Here for Memo Itemization	

Page Subtotal \$100.00

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

\$2,816.10

Enter this total on
line 3a of Summary
Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

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

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Facebook Address 1 Hacker Way Menlo Park, CA 94025 <input type="checkbox"/> Fund Raiser	Purpose: <u>Political Ad</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>08/31/2021</u> Date	<u>\$ 100.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name Wild Bill and Associates Address 40207 Moravian Dr. Clinton Twp, MI 48036 <input type="checkbox"/> Fund Raiser	Purpose: <u>Yard Signs & Stakes</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/02/2021</u> Date	<u>\$ 991.37</u> Click Here for Memo Itemization Type
Expenditure #3 Name Macomb County Clerk Elections Address 32 MARKET Street Mt. Clemens, MI 48043 <input type="checkbox"/> Fund Raiser	Purpose: <u>Fine</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/17/2021</u> Date	<u>\$ 25.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name CTE Russell Cleary Address 14242 Wedgewood Rd STERLING Heights, MI 48312 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser Ticket</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/19/2021</u> Date	<u>\$ 50.00</u> Click Here for Memo Itemization Type
Expenditure #5 Name Wild Bills and Associates Address 40207 Moravian Dr. Clinton Twp, MI 48036 <input type="checkbox"/> Fund Raiser	Purpose: <u>HD Yard Sign Stakes</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/24/2021</u> Date	<u>\$ 50.00</u> Click Here for Memo Itemization Type

Subtotal this page **\$1,216.37**

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

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

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

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Facebook Address 1 Hacker Way Menlo Park, CA 94025 <input type="checkbox"/> Fund Raiser	Purpose: <u>Political Ad</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>09/30/2021</u> Date	\$ <u>40.71</u> Click Here for Memo Itemization Type
Expenditure #2 Name Macomb County Republican Party Address 39099 Garfield Rd. Clinton Twp, MI 48038 <input type="checkbox"/> Fund Raiser	Purpose: <u>Political Dinner Ticket</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/01/2021</u> Date	\$ <u>70.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name Macomb County Republican Party Address 39099 Garfield Rd. Clinton Twp, MI 48038 <input type="checkbox"/> Fund Raiser	Purpose: <u>Ad in Dinner Book</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>10/01/2021</u> Date	\$ <u>150.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name Villa Penna Address 43985 Hayes Rd. Sterling Heights, MI 48313 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser Venue</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>1404.50</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 **\$1,665.21**
Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$2,881.58**

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 140074

2. Committee Name CTE Ken Nelson Mayor

This Schedule itemizes:

a. ☐ Debts and obligations owed by or forgiven the committee OR b. ☐ Debts and obligations owed to or forgiven by the committee.
(Check either a or b. Use only for the purpose checked.)

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the 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)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: Ken Nelson 40862 Firesteel Dr. Sterling Heights, MI 48313	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>06/03/2021</u> 6. <u>Original Amount of Debt:</u> \$ <u>0.00</u>	\$ \$ \$ \$ \$	\$	\$ <u>10,000.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Corp? <input type="checkbox"/> Yes Owed to or by: Ken Nelson 40862 Firesteel Dr. Sterling Heights, MI 48313	4. Type: <u>Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>06/23/2021</u> 6. <u>Original Amount of Debt:</u> \$ <u>0.00</u>	\$ \$ \$ \$ \$	\$	\$ <u>2,600.00</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by: Ken Nelson 40862 Firesteel Dr. Sterling Heights, MI 48313	4. Type: <u>In Kind Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>06/27/2021</u> 6. <u>Original Amount of Debt:</u> \$ <u>0.00</u>	\$ \$ \$ \$ \$	\$	\$ <u>1,239.25</u> <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt) **\$13,839.25**

Grand Total of all Schedules 1E **\$13,839.25**
(Complete on last page of Schedule showing amounts owed by or to the committee)

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

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

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

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>10/06/21</u>	4. Number of Individuals Attending or Participating (whichever is greater) 35	5. Type of Fund Raising Activity Buffet Dinner	6. Address and Name (if any) of the place where the activity was held. Villa Penna 43985 Hayes Rd. Sterling Heights, MI 48313 <input type="checkbox"/> Private Residence
---	--	---	---

7. Total Contributions \$1,500.00
8. Other Receipts \$0.00
9. Gross Receipts (Add lines 7 and 8) \$1,500.00
10. Total Cost of Event \$1,404.50
(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.