



**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.

<p>1. Committee I.D. Number 139377</p> <p>2. Committee Name Citizens for Michael Radtke</p> <p>3. Committee's Mailing Address 34205 Barrett Dr. Sterling Heights, MI 48312</p> <p>Area Code and Phone (586) 873-8427 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: 08/24/21 to 10/17/21</p> <p>4. Candidate Last Name Radtke First Name Michael S.I. 4a. Office Sought Including District # or Community Served (If applicable) Sterling Heights City Council 4b. County of Residence MACOMB</p> <p>5. Treasurer's Name & Residential Address Virginia La Rosa 13515 Parkridge Dr. Shelby Township, MI 48315</p> <p>Area Code & Phone (586) 739-8885</p>	
<p>7. Treasurer's Business Address Virginia La Rosa 13515 Parkridge Dr. Shelby Township, MI 48315</p> <p>Area Code and Phone (586) 739-8885</p>		<p>8. Designated Record keeper's Name and Mailing 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 <input checked="" type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus</p> <p>Date of Election, Convention or Caucus 11/02/21</p>		<p>Required ONLY if candidate is not on the ballot for the current year:</p> <p><input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly</p> <p>9c. <input type="checkbox"/> Annual Statement () Coverage Year</p> <p>9d. <input checked="" 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 hereby 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 Virginia La Rosa Type or Print Name</p>		<p><i>Virginia La Rosa</i> Signature Date 11/10/21</p>	
<p>Candidate Michael Radtke Type or Print Name</p>		<p><i>Michael V. Radtke</i> Signature Date 11/10/21</p>	



**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139377
2. Committee Name Citizens for Michael Radtke

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>FUTURE FUNDRAISER</u> <u>10/27/21</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>17</u>	5. Type of Fund Raising Activity <u>36th Birthday Bash</u>	6. Address and Name (If any) of the place where the activity was held. <u>Century Banquet Center</u> <u>33204 Maple Lane</u> <u>Sterling Heights, MI 48312</u> <input type="checkbox"/> Private Residence
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7. Total Contributions \$3,250.00

8. Other Receipts _____

9. Gross Receipts (Add lines 7 and 8) \$3,250.00

10. Total Cost of Event \$300.00

(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.