



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**INDEPENDENT/POLITICAL
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

3. This Statement covers From: 1/1/21 To 12/31/21

1. Committee I.D. Number

139111

2. Committee Name

Macomb's Families & Business
Coalition

4. Committee's Mailing Address

13883 Timberland Dr.

Shelby Twp. MI 48315

Area Code and Phone 586-282-4500

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.

5. Treasurer's Name and Residential Address

Vincent Viviano

6905 St. Andrews Dr.

Shelby Twp. MI 48315

Area Code and Phone 586-599-4754

6. Treasurer's Business Address

N/A

Area Code and Phone

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

N/A

Area Code and Phone

8. TYPE OF STATEMENT:

APPLICABLE TO INDEPENDENT AND POLITICAL
COMMITTEES REGISTERED ON STATE LEVEL

8a. QUARTERLY STATEMENTS

☐ January 31

☐ April 25

☐ July 25

☐ October 25

8b. ☐ SPECIAL ELECTION INDEPENDENT
EXPENDITURE REPORT

APPLICABLE TO INDEPENDENT AND
POLITICAL COMMITTEES REGISTERED
ON COUNTY LEVEL

8c. ☒ ANNUAL STATEMENT
(2021 Coverage Year) Local
Candidates Exempted

8d. ☐ PRE-ELECTION OR

8e. ☐ POST-ELECTION

Pre-Election or Post-Election
Statement relates to:

☐ PRIMARY ☐ GENERAL

☐ CONVENTION ☐ SCHOOL

☐ SPECIAL ☐ CAUCUS

Date of Election, Convention or Caucus:

☐ July 25 Quarterly

☐ October 25 Quarterly

APPLICABLE TO INDEPENDENT AND
POLITICAL COMMITTEES REGISTERED
ON

STATE AND COUNTY LEVEL

8f. ☐ AMENDMENT TO CAMPAIGN
STATEMENT
(Complete Item 8a, 8b, 8c 8d, 8e, 8f or 8h
to indicate which Statement is being
amended)

8g. ☐ DISSOLUTION OF COMMITTEE

Effective Date of Dissolution

By checking this item, I/We certify that
the committee has no asset or outstanding
debts, including late filing fees. Further, I
request that if the dissolution cannot be
granted, that this be considered a request for
the Reporting Waiver.

Note: The disposition of residual funds must
be reported on Schedule 2B and the
Summary Page.

9. Verification: I certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my knowledge and belief the contents are true, accurate and complete.

Current Treasurer or
Designated Record Keeper

Type or Print Name

Signature

Date

Vince Viviano Vince Viviano

1-28-22



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 139111

2. Committee Name Macomb Families & Business Coalition

SUMMARY PAGE
INDEPENDENT OR POLITICAL COMMITTEE

RECEIPTS	Column I This Period	Column II Cumulative for Calendar Year
3. Contributions		
a. Itemized Contributions (Schedule 2A, Column 6 + Schedule 2A-2, Column 8)	(3a.) \$ <u>19,775</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of "Contributions"	(3c.) \$ <u>19,775</u>	(18.) \$ <u>19,775</u>
4. Other Receipts (Schedule 2A-1, Column 6)	(4.) \$ <u>0</u>	(19.) \$ <u>0</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add line 3c + Line 4)	(5.) \$ <u>19,775</u>	(20.) \$ <u>19,775</u>
IN-KIND CONTRIBUTIONS		
6. In-Kind Contributions		
a. Itemized (Schedule 2-1K, Column 7)	(6a.) \$ <u>0</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(6b.) \$ NOT APPLICABLE	
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7.) \$ <u>0</u>	(21.) \$ <u>0</u>
EXPENDITURES		
8. Expenditures		
a. Itemized Direct (Schedule 2B, Column 7)	(8a.) \$ <u>18,986.92</u>	
b. Itemized Get-Out-the-Vote (Schedule B-G, Column 6)	(8b.) \$ <u>0</u>	
c. In-Kind Expenditures- Purchase of Goods or Services (Schedule 2B-2, Column 7)	(8c.) \$ <u>0</u>	
d. Unitemized (less than \$50.01 each - no Schedule)	(8d.) \$ <u>31.74</u>	
e. Subtotal of Expenditures	(8e.) \$ <u>19,018.66</u>	(22.) \$ <u>19,018.66</u>
9. Independent Expenditures (Schedule 2B-1, Column 7)	(9.) \$ <u>0</u>	(23.) \$ <u>0</u>
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$ <u>19,018.66</u>	(24.) \$ <u>19,018.66</u>
IN-KIND EXPENDITURES		
11. In-Kind Expenditures- Endorsements, Donations or Loans of Goods or Services (Schedule 2B-2, Column 8)	(11.) \$ <u>0</u>	(25.) \$ <u>0</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 2E)	(12a.) \$ <u>150</u>	
b. Owed to the Committee (Schedule 2E)	(12b.) \$ <u>0</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>328.19</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts - Column I)	(14.) + <u>19,775</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = <u>20,103.19</u>	
16. Amount expended during reporting period (Line 10, Total Expenditures - Column I)	(16.) - <u>19,018.66</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>1,084.53</u>	

*If your ending balance is negative, please recheck your math.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 139111

2. Committee Name Maconb Families + Business Coalition

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for
Calendar Year for Each
Contributor (Through
date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 7/8/21

Name & Address:

Rick Stathakis
13983 Timbercreek Dr.
Shelby Twp. MI 48316

\$ 75

\$ 75

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

[Click Here for Memo Itemization Type](#)

Occupation _____ Employer _____

Business Address _____

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

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 8/19/21

Name & Address:

J. Adam Behrendt
7794 Sandy Creek Ln
Bloomfield Hills, MI 48301

\$ 250

\$ 250

[Click Here for Memo Itemization Type](#)

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

Occupation Lawyer Employer Bodman PLLC

Business Address 201 W. Big Beaver Rd, Suite 500, Troy, MI 48064

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

3. Contribution # 3

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 8/20/21

Name & Address:

Stevens Mancini
37352 Hidden Valley Ct.
Clinton Twp. MI 48036

\$ 250

\$ 250

[Click Here for Memo Itemization Type](#)

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

Occupation owner Employer Mancini Holdings LLC

Business Address 7472 19 Mile Rd, Sterling Heights, MI 48314

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

3. Contribution # 4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 8/20/21

Name & Address:

Darren Dabish
55127 Breton Woods Dr.
Maconb, MI 48042

\$ 2,100

\$ 2,100

[Click Here for Memo Itemization Type](#)

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

Occupation CEO Employer MedForms LLC

Business Address 2401 S. Huron Rd. Kawkawish, MI 48631

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

Page Subtotal

2,675

Grand Total of All Schedules 2A
(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 2A
INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 139111

2. Committee Name Macomb Families + Business Coalition

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)

3. Contribution #1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 8/20/21

Name & Address:

Rami Yousif
55575 Timbers Edge
Shelby Twp. MI 48316

\$ 2,100

\$ 2,100

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

[Click Here for Memo Itemization Type](#)

Occupation owner Employer ROZET, INC

Business Address 2735 Cedar Dr, Shelby Twp. MI 48317

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

3. Contribution #2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 8/20/21

Name & Address:

James Sarkis
609 Yarbuck Dr.
Bloomfield Hills, MI 48304

\$ 500

\$ 500

[Click Here for Memo Itemization Type](#)

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

Occupation owner Employer Palazzo Grande

Business Address 54660 Van Dyke, Shelby Twp. MI 48316

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

3. Contribution #3

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 8/20/21

Name & Address:

Joseph Caradonna
2145 Crooks Rd. Ste 210
Troy, MI 48064

\$ 500

\$ 500

[Click Here for Memo Itemization Type](#)

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

Occupation Managing Director Employer Koucor Management

Business Address " "

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

3. Contribution #4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 8/20/21

Name & Address:

Tony Gallo
6303 26 Mile Rd, Ste 200
Washington, MI 48094

\$ 500

\$ 500

[Click Here for Memo Itemization Type](#)

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

Occupation owner Employer Gallo Companies

Business Address " "

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

Page Subtotal

3,600

Grand Total of All Schedules 2A
(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 2A
INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 139111
2. Committee Name Macomb Families + Business Coalition

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).		6. Amount	7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)
3. Contribution # 1 Is this contribution from a PAC? ☐ YES Name & Address: <u>Jeffrey Schroder</u> <u>39505 Woodward Ave.</u> <u>Bloomfield Hills, MI 48314</u>		\$ <u>250</u>	\$ <u>250</u>
4. Date of Receipt <u>8/20/21</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Att</u> Employer <u>Private - Concept</u> Business Address " " Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization Type	
3. Contribution # 2 Is this contribution from a PAC? ☐ YES Name & Address: <u>Paul Manni</u> <u>42778 Flis Dr.</u> <u>Steering Heights, MI 48314</u>		\$ <u>250</u>	\$ <u>250</u>
4. Date of Receipt <u>8/20/21</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>owner</u> Employer <u>All Phones Wholesale</u> Business Address <u>22858 Deguindie Warren, MI 48091</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization Type	
3. Contribution # 3 Is this contribution from a PAC? ☐ YES Name & Address: <u>John Dishow</u> <u>49433 Hayes Rd.</u> <u>Shelby Twp. MI 48315</u>		\$ <u>500</u>	\$ <u>500</u>
4. Date of Receipt <u>8/20/21</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Agent</u> Employer <u>John Dishow's Real Estate</u> Business Address " " Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization Type	
3. Contribution # 4 Is this contribution from a PAC? ☐ YES Name & Address: <u>Kristopher Nafso</u> <u>1392 Tracey</u> <u>Rochester Hills, MI 48306</u>		\$ <u>2,000</u>	\$ <u>2,000</u>
4. Date of Receipt <u>8/20/21</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Agent</u> Employer <u>Nafso Wireless Inc.</u> Business Address " " Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization Type	

Page Subtotal 3,000
Grand Total of All Schedules 2A
(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 2A
INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 139111

2. Committee Name Macomb Families + Business Coalition

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).		6. Amount	7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)
3. Contribution # 1 Is this contribution from a PAC? ☐ YES Name & Address: <u>Joseph Shaba</u> <u>48259 Elmwood</u> <u>Shelby Twp. MI 48315</u>	4. Date of Receipt <u>8/20/21</u>	<u>\$ 2,000</u>	<u>\$ 2,000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Acct. Exec</u> Employer <u>Locus Logistics</u> Business Address <u>2931 E Dublin, Columbus OH 43231</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization Type	
3. Contribution # 2 Is this contribution from a PAC? ☐ YES Name & Address: <u>Paul Marni</u> <u>42778 Eli's Dr.</u> <u>Stearling Heights, MI 48314</u>	4. Date of Receipt <u>8/21/21</u>	<u>\$ 250</u>	<u>\$ 500</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>All Phones Wholesale</u> Business Address <u>22850 Degumdis, Warren, MI 48091</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization Type	
3. Contribution # 3 Is this contribution from a PAC? ☐ YES Name & Address: <u>Stephen Pangori</u> <u>8106 Rosebud Ln.</u> <u>Clarkston, MI 48348</u>	4. Date of Receipt <u>8/20/21</u>	<u>\$ 250</u>	<u>\$ 250</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>AEW Inc.</u> Business Address <u>51301 Schoenherr Rd., Shelby Twp. MI 48315</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization Type	
3. Contribution # 4 Is this contribution from a PAC? ☐ YES Name & Address: <u>P. Eugene Dagostini</u> <u>38700 Van Dyke, St. 200</u> <u>Stearling Heights MI 48312</u>	4. Date of Receipt <u>8/20/21</u>	<u>\$ 1,000</u>	<u>\$ 1,000</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Dagostini Land Company</u> Business Address <u>13425 19 Mile Rd. Stearling Heights MI 48313</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization Type	

Page Subtotal 3,500

Grand Total of All Schedules 2A
(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 2A
INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 139111

2. Committee Name Meacham Families + Business Coalition

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for
Calendar Year for Each
Contributor (Through
date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 8/20/21

Name & Address:

Jason Arlow
5709 Arnold Dr.
Cottleville, MI 48039

\$ 250

\$ 250

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

Click Here for Memo Itemization Type

Occupation VP Employer AEW Inc.

Business Address 51301 Schoenherr Rd, Shelby Twp. MI 48315

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

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 8/20/21

Name & Address:

Paul Borg
4211 Briar Dr.
Shelby Twp. MI 48316

\$ 500

\$ 500

Click Here for Memo Itemization Type

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

Occupation owner Employer B+B Maintenance

Business Address 21550 Ryan Rd, Warren, MI 48091

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

3. Contribution # 3

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 8/20/21

Name & Address:

Phil Ruggieri
55764 St Regis Dr.
Shelby Twp MI 48315

\$ 2000

\$ 2000

Click Here for Memo Itemization Type

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

Occupation Atty Employer Philip Ruggieri + Assoc.

Business Address 43231 Schoenherr Rd, Sterling Heights, MI 48313

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

3. Contribution # 4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 8/20/21

Name & Address:

Justin Elias
4330 S. Lake Ln.
Shelby Twp. MI 48316

\$ 2000

\$ 2000

Click Here for Memo Itemization Type

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

Occupation President Employer Puff Cannabis Co.

Business Address 11941 Joseph Campus, Hamtramck, MI 48212

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

Page Subtotal

4,750

Grand Total of All Schedules 2A
(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 2A
INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 139111

2. Committee Name Macomb Families + Business Coalition

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for
Calendar Year for Each
Contributor (Through
date of receipt)

3. Contribution #1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 8/20/21

Name & Address:

SAM SHAMOON
2046 Pandora Dr.

Stirling Heights MI 48310

\$ 1500

\$ 1500

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

[Click Here for Memo Itemization Type](#)

Occupation CEO Employer Gig Electric

Business Address 3244 Cera Dr. Stirling Heights MI 48310

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

3. Contribution #2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 8/20/21

Name & Address:

Gordon Wilson
49572 Compass Point Dr.

Chesterville MI 48047

\$ 250

\$ 250

[Click Here for Memo Itemization Type](#)

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

Occupation Principal Employer AEW Inc.

Business Address 51301 Schoenherr Rd, Shelby Twp. MI 48315

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

3. Contribution #3

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 8/20/21

Name & Address:

Gregory Gagnon
52690 Blueridge Dr.

Shelby Twp MI 48316

\$ 250

\$ 250

[Click Here for Memo Itemization Type](#)

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

Occupation Broker Employer Self

Business Address 55274 Van Dyke, Shelby Twp MI 48316

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

3. Contribution #4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 8/20/21

Name & Address:

John Kapousis
4893 Crystal Creek Lane

Washington, MI 48094

\$ 250

\$ 250

[Click Here for Memo Itemization Type](#)

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

Occupation owner Employer G+T Auto Parts

Business Address 54525 Gratiot Ave, New Baltimore, MI 48051

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

Page Subtotal

2250

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

19,775

Enter this total
on line 3a of
Summary Page

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 2B
INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 139111

2. Committee Name Macomb Families & Business Coalition

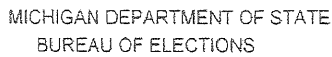
3. Name and address of person or vendor to whom the expenditure was made	5. Candidate or Ballot Question Information	6. Date	7. Amount	8. Cumulative for Election or Election Cycle
Expenditure #1 Name & Address: <u>Joe Rozell</u> <u>10785 KINGSTON AVE</u> <u>HUNTINGTON WOODS, MI 48070</u>	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County _____ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	<u>2/1/21</u> Date	<u>\$ 100</u>	<u>\$ 100</u>
4. Purpose: <u>Consulting</u> ☐ Fund Raiser (no other vendor)	Click Here for Memo Itemization Type			
Expenditure #2 Name & Address: <u>Gifts for all God's Children</u> <u>P.O. Box 71017</u> <u>Rochester Hills, MI 48307</u>	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County _____ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	<u>7/8/21</u> Date	<u>\$ 75</u>	<u>\$ 75</u>
4. Purpose: <u>Donation</u> ☐ Fund Raiser	Click Here for Memo Itemization Type			
Expenditure #3 Name & Address: <u>Republican National Committee</u> <u>310 First Street SE</u> <u>Washington DC, 20003</u>	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County _____ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	<u>7/8/21</u> Date	<u>\$ 50</u>	<u>\$ 50</u>
4. Purpose: <u>Donation</u> ☐ Fund Raiser	Click Here for Memo Itemization Type			
Expenditure #4 Name & Address: <u>CTE Sebastian Previti</u> <u>for Supervisor</u> <u>61614 Cotswold</u> <u>Washington, MI 48094</u>	5. <u>Sebastian Previti</u> Name of Candidate <u>Supervisor, Washington Twp.</u> Office Sought & District # or Jurisdiction <u>Macomb</u> County _____ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	<u>6/28/21</u> Date	<u>\$ 100</u>	<u>\$ 100</u>
4. Purpose: <u>Contribution</u> ☐ Fund Raiser	Click Here for Memo Itemization Type			

Subtotal this page

325

Grand Total of all Schedules 2B
(Complete on last page of Schedule)

Enter this total
on line 8a of the
Summary Page



1. Committee I.D. Number 139111

2. Committee Name Macon's Families & Business Coalition

3. Name and address of person or vendor to whom the expenditure was made	5. Candidate or Ballot Question Information	6. Date	7. Amount	8. Cumulative for Election or Election Cycle
Expenditure #1 Name & Address: Jingli Bell Run 52700 VAN DYKE Shelby Twp. MI 48316	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County	9/22/21 Date	\$ 400	\$ 400
4. Purpose: <u>Donation</u> ☐ Fund Raiser	☐ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	Click Here for Memo Itemization Type		
Expenditure #2 Name & Address: CTC Lisa Casali for Trustee 13860 Timberline Dr. Shelby Twp. MI 48315	5. <u>Lisa Casali</u> Name of Candidate <u>Trustee, Shelby Twp.</u> Office Sought & District # of Jurisdiction <u>Macomb</u> County	9/22/21 Date	\$ 400	\$ 400
4. Purpose: <u>Contribution</u> ☐ Fund Raiser	☐ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	Click Here for Memo Itemization Type		
Expenditure #3 Name & Address: Friends of Shelby Twp Library 52700 VAN DYKE Shelby Twp. MI 48316	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County	10/8/21 Date	\$ 250	\$ 250
4. Purpose: <u>Donation</u> ☐ Fund Raiser	☐ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	Click Here for Memo Itemization Type		
Expenditure #4 Name & Address: Friends of Shelby Twp Library 52700 VAN DYKE Shelby Twp. MI 48316	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County	10/13/21 Date	\$ 250	\$ 500
4. Purpose: <u>Donation</u> ☐ Fund Raiser	☐ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	Click Here for Memo Itemization Type		

1,300

Grand Total of all Schedules 2B
(Complete on last page of Schedule)

Enter this total
on line 8a of the
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 2B
INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 139111

2. Committee Name Macomb Families + Business Coalition

3. Name and address of person or vendor to whom the expenditure was made	5. Candidate or Ballot Question Information	6. Date	7. Amount	8. Cumulative for Election or Election Cycle
Expenditure #1 Name & Address: <u>American Speedy Printing</u> <u>46723 Van Dyke Ave</u> <u>Shelby Twp. MI 48317</u> 4. Purpose: <u>Christmas Cards</u> ☐ Fund Raiser	5. <u>Rick Stathakis</u> Name of Candidate <u>Supervisor, Shelby Twp.</u> Office Sought & District # of Jurisdiction <u>Macomb</u> County ☐ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	<u>12/10/21</u> Date	<u>\$ 414.73</u>	<u>\$ 414.73</u> Click Here for Memo Itemization Type
Expenditure #2 Name & Address: <u>USPS</u> <u>7755 22 Mile Rd.</u> <u>Shelby Twp. MI 48317</u> 4. Purpose: <u>Stamps</u> ☐ Fund Raiser	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County ☐ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	<u>12/9/21</u> Date	<u>\$ 232</u>	<u>\$ 232</u> Click Here for Memo Itemization Type
Expenditure #3 Name & Address: <u>Friends of the Library</u> <u>52700 Van Dyke</u> <u>Shelby Twp. MI 48316</u> 4. Purpose: <u>Donations</u> ☐ Fund Raiser	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County ☐ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	<u>10/12/21</u> Date	<u>\$ 250</u>	<u>\$ 750</u> Click Here for Memo Itemization Type
Expenditure #4 Name & Address: <u>Elite Photo</u> <u>58177 Van Dyke</u> <u>Washington, MI 48094</u> 4. Purpose: <u>Christmas Photo</u> ☐ Fund Raiser	5. <u>Rick Stathakis</u> Name of Candidate <u>Supervisor, Shelby Twp.</u> Office Sought & District # or Jurisdiction <u>Macomb</u> County ☐ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	<u>12/2/21</u> Date	<u>\$ 300</u>	<u>\$ 300</u> Click Here for Memo Itemization Type

Subtotal this page

1,196.73

Grand Total of all Schedules 2B
(Complete on last page of Schedule)

Enter this total
on line 8a of the
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 2B
INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 139111

2. Committee Name Macomb Families + Business Coalition

3. Name and address of person or vendor to whom the expenditure was made	5. Candidate or Ballot Question Information	6. Date	7. Amount	8. Cumulative for Election or Election Cycle
Expenditure #1 Name & Address: <u>Van Dyke SS #206</u> <u>15153 23 Mile Rd</u> <u>Shelby Twp - MI 48316</u> 4. Purpose: <u>Staff Lunch</u> ☐ Fund Raiser	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County _____ ☐ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	<u>12/21/21</u> Date	<u>\$65.19</u>	<u>\$65.19</u>
Expenditure #2 Name & Address: <u>Goodlife</u> <u>1892 E. Auburn Rd.</u> <u>Rochester Hills, MI 48307</u> 4. Purpose: <u>Donation</u> ☐ Fund Raiser	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County _____ ☐ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	<u>8/23/21</u> Date	<u>\$600</u>	<u>\$600</u>
Expenditure #3 Name & Address: <u>Joe Rozell</u> <u>10785 Kingston Ave.</u> <u>Huntington Woods, MI 48070</u> 4. Purpose: <u>Consulting</u> ☐ Fund Raiser (no other vendor)	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County _____ ☐ Ballot Proposal ☐ Check box if expenditure is payment of Debt or Obligation reported on previous statement	<u>8/21/21</u> Date	<u>\$500</u>	<u>\$600</u>
Expenditure #4 Name & Address: <u>Rick Statlakis</u> <u>13833 Timberwind Dr.</u> <u>Shelby Twp. MI 48316</u> 4. Purpose: <u>Loan Payment</u> ☐ Fund Raiser	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County _____ ☒ Ballot Proposal ☒ Check box if expenditure is payment of Debt or Obligation reported on previous statement	<u>8/20/21</u> Date	<u>\$4000</u>	<u>\$4000</u>

Subtotal this page

5,165.19

Grand Total of all Schedules 2B
(Complete on last page of Schedule)

Enter this total
on line 8a of the
Summary Page

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 2B
INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 139111

2. Committee Name Macon's Families & Business Coalition

3. Name and address of person or vendor to whom the expenditure was made	5. Candidate or Ballot Question Information	6. Date	7. Amount	8. Cumulative for Election or Election Cycle
Expenditure #1 Name & Address: Rick Statlakis 13883 Timberline Dr. Shelby Twp. MI 48316	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County	8/24/21 Date	\$ 3,850 \$ 7,850	Click Here for Memo Itemization Type
4. Purpose: <u>Loan Payment</u> ☐ Fund Raiser	☒ Ballot Proposal Check box if expenditure is payment of Debt or Obligation reported on previous statement			
Expenditure #2 Name & Address: CTE Richard Statlakis 13883 Timberline Dr. Shelby Twp. MI 48316	5. <u>Rick Statlakis</u> Name of Candidate <u>Supervisor Shelby Twp.</u> Office Sought & District # or Jurisdiction <u>Mason</u> County	8/29/21 Date	\$ 7000 \$ 7000	Click Here for Memo Itemization Type
4. Purpose: <u>Contribution</u> ☐ Fund Raiser	☐ Ballot Proposal Check box if expenditure is payment of Debt or Obligation reported on previous statement			
Expenditure #3 Name & Address: Vince Vinicio 10 S. Main St. Mt. Clemens, MI 48043	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County	8/24/21 Date	\$ 150 \$ 150	Click Here for Memo Itemization Type
4. Purpose: <u>Loan Payment</u> ☐ Fund Raiser	☒ Ballot Proposal Check box if expenditure is payment of Debt or Obligation reported on previous statement			
Expenditure #4 Name & Address:	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County	Date	\$ _____ \$ _____	Click Here for Memo Itemization Type
4. Purpose: _____ ☐ Fund Raiser	☐ Ballot Proposal Check box if expenditure is payment of Debt or Obligation reported on previous statement			

Subtotal this page

11,000

Grand Total of all Schedules 2B
(Complete on last page of Schedule)

18,986.92

Enter this total
on line 8a of the
Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 2E
TICAL OR INDEPENDENT COMMITTEE

1. Committee I.D. Number 139111
2. Committee Name MACOMB FAMILIES & BUSINESS COALITION

Schedule itemizes:

☒ 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.)

1. Name and mailing Address of person, vendor or financial institution to whom debt is owed. 2. Check box to indicate whether debt is owed to an organized business. If debt is a bank loan, please provide information regarding the endorser or endorsers, 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)
1. Rick Stathakis 883 TIMBERVIEW HELIX TWP, MI 48315 Corp? ☐ Yes	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>7/17/16</u> 6. Original Amount of Debt: <u>\$ 3000</u>	8/18 \$ 1000 9/20 \$ 2000 \$ \$ \$	\$ 3000	\$ <u>0</u> ☐ FORGIVEN

3. If loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

2. _____ to or by: _____ Corp? ☐ Yes	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>9/20/18</u> 6. Original Amount of Debt: <u>\$ 250</u>	8/20 \$ 250 \$ \$ \$ \$	\$ 250	\$ <u>0</u> ☐ FORGIVEN
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3. If loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

3. _____ to or by: _____ Corp? ☐ Yes	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>9/10/18</u> 6. Original Amount of Debt: <u>\$ 300</u>	8/20 \$ 300 \$ \$ \$ \$	\$ 300	\$ <u>0</u> ☐ FORGIVEN
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4. If loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Page Subtotal (Outstanding debt)

0

Grand Total of all Schedules 2E

(Complete on last page of Schedule showing amounts owed by or to the committee.)

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

Enter this total on line 12a "owed by", or line 1: "owed to" of Summary Page

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 2E

ITICAL OR INDEPENDENT COMMITTEE

1. Committee I.D. Number 139111
2. Committee Name MACOMB FAMILIES & BUSINESS Coalition

Schedule itemizes:

☒ 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.)

1. Name and mailing Address of person, vendor or financial institution to whom debt is owed. 2. Check box to indicate whether debt is owed to an individual or incorporated business. If debt is a bank loan, please include information regarding the endorser or endorsers, 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)
11 to or by: Rick STATHAKIS 3883 TIMBERVIEW DR. HELBY TWP, MI 48315 Corp? ☐ Yes	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>10/19/17</u> 6. <u>Original Amount of Debt</u> \$ <u>600</u>	8/20 \$ 600 \$ \$ \$ \$	\$ <u>600</u>	\$ <u>0</u> ☐ FORGIVEN

11 loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

11 to or by: 11 Corp? ☐ Yes	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>10/29/17</u> 6. <u>Original Amount of Debt</u> \$ <u>1000</u>	8/20 \$ 850 8/24 \$ 150 \$ \$ \$	\$ <u>1000</u>	\$ <u>0</u> ☐ FORGIVEN
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11 loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

11 to or by: 11 Corp? ☐ Yes	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>11/4/17</u> 6. <u>Original Amount of Debt</u> \$ <u>500</u>	8/24 \$ 500 \$ \$ \$ \$	\$ <u>500</u>	\$ <u>0</u> ☐ FORGIVEN
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11 loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Page Subtotal (Outstanding debt)

Grand Total of all Schedules 2E

(Complete on last page of Schedule showing amounts owed by or to the committee.)

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

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

2 of 4

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 2E

TICAL OR INDEPENDENT COMMITTEE

1. Committee I.D. Number 139111

2. Committee Name MACOMB FAMILIES & BUSINESS COALITION

Schedule itemizes:

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

1. Name and mailing Address of person, vendor or financial institution to whom debt is owed. 2. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please include information regarding the endorser or endorsers, 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 8)
11 Rick STATHAKIS 1883 TIMBERVIEW DR. FELBY TWP, MI 48315 Corp? ☐ Yes	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>3/22/17</u> 6. Original Amount of Debt: <u>\$ 2500</u>	8/24 \$ 2,500 \$ \$ \$ \$	\$ 2,500	\$ <u>0</u> ☐ FORGIVEN

11 loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

11 Corp? ☐ Yes	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>5/18/17</u> 6. Original Amount of Debt: <u>\$ 500</u>	8/24 \$ 500 \$ \$ \$ \$	\$ 500	\$ <u>0</u> ☐ FORGIVEN
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11 loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

11 Corp? ☐ Yes	4. Type: <u>LOAN</u> 5. Date Debt Was Incurred: <u>6/1/17</u> 6. Original Amount of Debt: <u>\$ 200</u>	8/24 \$ 200 \$ \$ \$ \$	\$ 200	\$ <u>0</u> ☐ FORGIVEN
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11 loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Page Subtotal (Outstanding debt)

0

Grand Total of all Schedules 2E

(Complete on last page of Schedule showing amounts owed by or to the committee.)

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

Enter this total on line 12a "owed by", or line 1: "owed to" of Summary Pa

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS
SCHEDULE 2E

INDIVIDUAL OR INDEPENDENT COMMITTEE

1. Committee I.D. Number 139111
2. Committee Name MACOMB FAMILIES & BUSINESS COALITION

Schedule itemizes:

☒ 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.)

1. Name and mailing Address of person, vendor or financial institution to whom debt is owed. 2. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please include 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 8)
1. to or by: <u>VINCE VIVIANO</u> <u>10 S. MAIN STREET</u> <u>MT CLEMENS, MI 48043</u> Corp? ☐ Yes	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>9/16/18</u> 6. <u>Original Amount of Debt</u> \$ <u>300</u>	8/24 \$150 \$ \$ \$ \$	\$150	\$150 ☐ FORGIVEN

3. If loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

2. to or by: _____ Corp? ☐ Yes	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt</u> \$ _____	\$ \$ \$ \$ \$	\$ _____	\$ _____ ☐ FORGIVEN
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3. If loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

3. to or by: _____ Corp? ☐ Yes	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt</u> \$ _____	\$ \$ \$ \$ \$	\$ _____	\$ _____ ☐ FORGIVEN
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3. If loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____

Page Subtotal (Outstanding debt) 150
Grand Total of all Schedules 2E (Complete on last page of Schedule showing amounts owed by or to the committee.) 150

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

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



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FUND RAISER SCHEDULE 2F
INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 139111

2. Committee Name Macomb Families + Business Coalition

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>AUG 19, 2021</u>	4. Number of Individuals Attending or Participating (whichever is greater) <u>75</u>	5. Type of Fund Raising Activity <u>Meet + Greet</u>	6. Address and Name (If any) of the place where the activity was held <u>47677 MILONAS SHELBY TWP 48315</u> ☒ Private Residence
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7. Total Contributions 19,700

8. Other Receipts 0

9. Gross Receipts (Add lines 7 and 8) 19,700

10. Total Cost of Event 0

*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 Direct Contributions Schedule (2A), Itemized In-Kind Contributions Schedule (2-1K), Itemized Expenditures Schedule (2B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.