

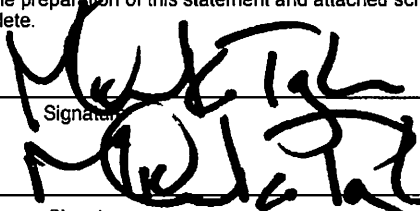
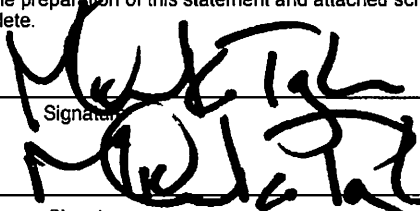


MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

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.

1. Committee I.D. Number <b>138477</b>		3. This Statement covers From: <u>11/23/21</u> to <u>12/31/21</u>	
2. Committee Name <b>Committee to Elect Michael C. Taylor</b>		4. Candidate Last Name <b>Taylor</b> First Name <b>Michael</b> M.I. <b>C.</b> 4a. Office Sought Including District # or Community Served (If applicable) <b>Mayor of Sterling Heights</b> 4b. County of Residence <b>MACOMB</b>	
5. Committee's Mailing Address <b>14076 Red Pine Dr. Sterling Heights, MI 48313</b>  Area Code and Phone <u>(586) 822-3500</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 <b>Michael C. Taylor 14076 Red Pine Dr. Sterling Heights, MI 48313</b>  Area Code & Phone <u>(586) 822-3500</u>	
7. Treasurer's Business Address     Area Code and Phone _____		8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)     Area Code and Phone _____	
9. TYPE OF STATEMENT 9a. <input type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> Special <input type="checkbox"/> School <input type="checkbox"/> Caucus  Date of Election, Convention or Caucus _____		Required ONLY if candidate is not on the ballot for the current year: <input type="checkbox"/> July Quarterly <input type="checkbox"/> October Quarterly 9c. <input checked="" type="checkbox"/> Annual Statement (2021 ) Coverage Year 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.)	
		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 <b>Michael C. Taylor</b> Type or Print Name		Signature  Date <b>January 31, 2022</b>	
Candidate <b>Michael C. Taylor</b> Type or Print Name		Signature  Date <b>January 31, 2022</b>	



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 138477

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name Committee to Elect Michael C. Taylor

RECEIPTS	Column I This Period	Column II Cumulative this election cycle
<b>3. Contributions</b>		
a. Itemized (Schedule 1A - Column 6)	(3a.) \$ <u>0.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>\$0.00</u>	(18.) \$ _____
<b>4. Other Receipts (Schedule 1A -1, Column 6)</b>	(4.) \$ _____	(19.) \$ _____
<b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b> (Add Line 3c + Line 4)	(5.) \$ <u>\$0.00</u>	(20.) \$ _____
<b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>		
<b>6. In-Kind Contributions (Schedule 1-IK, Column 7)</b>	(6.) \$ <u>\$3,161.54</u>	(21.) \$ <u>\$3,161.54</u>
<b>7. In-Kind Expenditures (Schedule 1B-IK, Column 6)</b>	(7.) \$ _____	(22.) \$ _____
<b>EXPENDITURES</b>		
<b>8. Expenditures</b>		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ <u>\$4,890.76</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ _____	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ _____	
<b>9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)</b>	(9.) \$ <u>\$4,890.76</u>	(23.) \$ <u>\$4,890.76</u>
<b>INCIDENTAL EXPENSE DISBURSEMENTS</b> (Officeholders Only)		
<b>10. Disbursements</b>		
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>	
<b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b> (Add Line 10a + Line 10b)	(11.) \$ <u>\$0.00</u>	(24.) \$ <u>\$0.00</u>
<b>DEBTS AND OBLIGATIONS</b>		
<b>12. Debts and Obligations</b>		
a. Owed by the Committee (Schedule 1E)	(12a.) \$ <u>\$4,526.84</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$ <u>\$0.00</u>	
<b>BALANCE STATEMENT</b>		
<b>13. Ending Balance of last report filed</b> (Enter zero if no previous reports have been filed.)	(13.) \$ <u>\$30,859.74</u>	
<b>14. Amount received during reporting period</b> (Line 5, Total Contributions & Other Receipts)	(14.) + \$ <u>\$0.00</u>	
<b>15. SUBTOTAL Add lines 13 and 14</b>	(15.) = \$ <u>\$30,859.74</u>	
<b>16. Amount expended during reporting period</b> (Add lines 9 and 11)	(16.) - \$ <u>\$4,890.76</u>	
<b>17. ENDING BALANCE</b> (Subtract line 16 from line 15)	(17.) \$ <u>\$25,968.98</u>	*



**ITEMIZED EXPENDITURES**  
**SCHEDULE 1B**  
**CANDIDATE COMMITTEE**

1. Committee I. D. Number 138477

2. Committee Name CTE Michael C. Taylor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Apple, Inc.</u>  Address <u>17360 Hall Rd.</u> <u>Clinton Township, MI 48038</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Phone Chargers</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>11/29/21</u> Date	\$ <u>\$152.64</u>
Expenditure #2 Name <u>Facebook</u>  Address <u>1 Hacker Way</u> <u>Menlo Park CA 94025</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Facebook Ads</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/01/21</u> Date	\$ <u>\$300</u>
Expenditure #3 Name <u>iStorage</u>  Address <u>41250 Garfield Rd</u> <u>Clinton Township, MI 48038</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Storage Unit</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/02/22</u> Date	\$ <u>\$128</u>
Expenditure #4 Name <u>Metro Airport</u>  Address <u>Romulus, MI</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Airport Parking</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/14/21</u> Date	\$ <u>\$104</u>
Expenditure #5 Name <u>Detroit Free Press</u>  Address <u>615 W. Lafayette Blvd</u> <u>Detroit, MI 48226</u>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Newspaper Subscription</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/15/21</u> Date	\$ <u>\$9.99</u>
Subtotal this page			\$ <u>\$694.63</u>
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 138477  
2. Committee Name CTE Michael C. Taylor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <b>Friends of Foster Kids</b> Address <b>39126 Van Dyke Sterling Heights, MI 48313</b> <input type="checkbox"/> Fund Raiser	Purpose: <u>Charitable Contribution</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/17/21</u> Date	\$ <u>181.08</u>
Expenditure #2 Name <b>Michael C. Taylor</b> Address <b>14076 Red Pine Dr Sterling Heights, MI 48313</b> <input type="checkbox"/> Fund Raiser	Purpose: <u>Reimbursement - In-Kind Contribution Loan</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/29/21</u> Date	\$ <u>3161.54</u>
Expenditure #3 Name <b>See Schedule 1-IK Loans from Candidate</b> Address <b>Expenditure 2 is repayment of in-kind loans made by the candidate to the committee as described on Schedule 1-IK</b> <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	\$ _____
Expenditure #4 Name <b>Delta</b> Address <b>1030 Delta Boulevard Atlanta, GA 30354-6001</b> <input type="checkbox"/> Fund Raiser	Purpose: <u>Flights - DC Mayors Conference</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/29/21</u> Date	\$ <u>\$305.20</u>
Expenditure #5 Name <b>See's Candy</b> Address <b>17420 Hall Rd Clinton Township, MI 48038</b> <input type="checkbox"/> Fund Raiser	Purpose: <u>Holiday Party</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/15/21</u> Date	\$ <u>\$416.25</u>
Subtotal this page			\$ <u>4,064.07</u>
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 138477  
2. Committee Name CTE Michael C. Taylor

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <b>Shinola Restaurant</b>  Address <b>1400 Woodward Ave Detroit, MI 48226</b>  <input type="checkbox"/> Fund Raiser	Purpose: <u>Meeting Expense</u>  <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>12/21/21</u> Date <a href="#">Click Here for Memo Itemization Type</a>	\$ <u>\$132.06</u>
Expenditure #2 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 <a href="#">Click Here for Memo Itemization Type</a>	\$ _____
Expenditure #3 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 <a href="#">Click Here for Memo Itemization Type</a>	\$ _____
Expenditure #4 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 <a href="#">Click Here for Memo Itemization Type</a>	\$ _____
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 <a href="#">Click Here for Memo Itemization Type</a>	\$ _____
Subtotal this page			\$132.06
Grand Total of all Schedules 1B (Complete on last page of Schedule)			\$4,890.76

Enter this total  
on line 8a of  
Summary Page



ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

1. Committee I. D. Number 138477

CANDIDATE COMMITTEE

2. Committee Name CTE Michael C. Taylor

3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1      PAC Receipt? <input type="checkbox"/> Yes Name & Address: Michael C. Taylor 14076 Red Pine Dr. Sterling Heights, MI 48313  If over \$100.00 cumulative, please provide: Occupation: <u>Attorney</u> Employer Name & Business Address: Kirk, Huth, Lange & Badalamenti, PLC 19500 Hall Rd., Suite 100 Clinton Township, MI 48038  <input type="checkbox"/> Fund Raiser Contribution	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Vehicle Expense - 3659 Miles on Personal Vehicle @ \$.56/mile</u> 5. Date Of Receipt: <u>12/29/21</u> 6. Vendor Name & Address: Michael C. Taylor 14076 Red Pine Dr. Sterling Heights, MI 48313	\$ <u>2,049.04</u> \$	
Contribution # 2      PAC Receipt? <input type="checkbox"/> Yes Name & Address: Michael C. Taylor 14076 Red Pine Dr. Sterling Heights, MI 48313  If over \$100.00 cumulative, please provide: Occupation: <u>Attorney</u> Employer Name & Address: Same	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Cell Phone Expense</u> 5. Date Of Receipt: <u>12/31/20</u> 6. Vendor Name & Address: Verizon Wireless 1095 Ave of Americas New York, NY 10013	\$ <u>300</u> \$	
Contribution #3      PAC Receipt? <input type="checkbox"/> Yes Name & Address: Michael C. Taylor 14076 Red Pine Dr. Sterling Heights, MI 48313  If over \$100.00 cumulative, please provide: Occupation: <u>Attorney</u> Employer Name & Address: Same	4. <input type="checkbox"/> Endorsement or Guarantee of Bank Loan <input type="checkbox"/> Goods Donated or Loaned <input type="checkbox"/> Services Donated <input type="checkbox"/> Goods or Services Purchased by Candidate or Others <input checked="" type="checkbox"/> Goods or Services Purchased by Candidate or Others- LOAN Description <u>Cable/Internet Expense</u> 5. Date Of Receipt: <u>12/31/20</u> 6. Vendor Name & Address: Comcast 1701 JFK Boulevard Philadelphia, PA 19103	\$ <u>812.50</u> \$	

Page Subtotal **\$3,161.54**

Grand Total of all Schedules 1-IK  
(Complete on last page of Schedule) **\$3,161.54**

Enter this total  
on line 6 of Summary  
Page



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS  
SCHEDULE 1E  
CANDIDATE COMMITTEE

1. Committee I.D. Number 138477  
2. Committee Name GTE Michael C. Taylor

This Schedule itemizes:				
a. <input checked="" type="checkbox"/> Debts and obligations owed by or forgiven the committee OR b. <input type="checkbox"/> Debts and obligations owed to or forgiven by the committee. (Check either a or b. Use only for the purpose checked.)				
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantor, 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 Owed to or by: <input type="checkbox"/> Corp? <input type="checkbox"/> Yes  Taylor, Michael C. 14076 Red Pine Dr. Sterling Heights, MI 48313	4. Type: <u>In-Kind Loan</u> 5. Date Debt Was Incurred: <u>08/14/09</u> 6. Original Amount of Debt: <u>\$ 75.51</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 75.51 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #2 Owed to or by: <input type="checkbox"/> Corp? <input type="checkbox"/> Yes  Taylor, Michael C. Same	4. Type: <u>In-Kind Loan</u> 5. Date Debt Was Incurred: <u>8/15/09</u> 6. Original Amount of Debt: <u>\$ 14.30</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 14.30 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Debt #3 Owed to or by: <input type="checkbox"/> Corp? <input type="checkbox"/> Yes  Taylor, Michael C. Same	4. Type: <u>In-Kind Loan</u> 5. Date Debt Was Incurred: <u>8/16/09</u> 6. Original Amount of Debt: <u>\$ 115.60</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 115.60 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				
Page Subtotal (Outstanding debt)				\$205.41
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				

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.

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



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 138477

2. Committee Name CTE Michael C. Taylor

This Schedule itemizes:

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

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantor, if any.	4. Type of Obligation (Description) 6. 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: <b>Taylor, Michael C.</b> <b>14076 Red Pine Dr.</b> <b>Sterling Heights, MI 48313</b>	4. Type: <u>In-Kind Loan</u> 5. Date Debt Was Incurred: <u>09/08/09</u> 6. Original Amount of Debt: <u>\$ 550.00</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 550.00 <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: <b>Taylor, Michael C.</b> <b>Same</b>	4. Type: <u>In-Kind Loan</u> 5. Date Debt Was Incurred: <u>10/2/09</u> 6. Original Amount of Debt: <u>\$ 1107.82</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 1107.82 <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: <b>Taylor, Michael C.</b> <b>Same</b>	4. Type: <u>In-Kind Loan</u> 5. Date Debt Was Incurred: <u>10/1/09</u> 6. Original Amount of Debt: <u>\$ 62.97</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 62.97 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____ Amount Endorsed: \$ _____				

Page Subtotal (Outstanding debt)

**\$1,720.79**

Grand Total of all Schedules 1E  
(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 last the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.





MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

DEBTS AND OBLIGATIONS  
SCHEDULE 1E  
CANDIDATE COMMITTEE

1. Committee I.D. Number 138477  
2. Committee Name CTE Michael C. Taylor

This Schedule itemizes:

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

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantor, 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: Taylor, Michael C. 14076 Red Pine Dr. Sterling Heights, MI 48313	4. Type: <u>In-Kind Loan</u> 5. Date Debt Was Incurred: <u>07/08/11</u> 6. Original Amount of Debt: <u>\$ 558.80</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 558.80 <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: Taylor, Michael C. Same	4. Type: <u>In-Kind Loan</u> 5. Date Debt Was Incurred: <u>9-7-11</u> 6. Original Amount of Debt: <u>\$ 1533.82</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 1533.82 <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: Taylor, Michael C. Same	4. Type: <u>In-Kind Loan</u> 5. Date Debt Was Incurred: <u>8-28-11</u> 6. Original Amount of Debt: <u>\$ 130</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 130 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Page Subtotal (Outstanding debt)				<b>\$2,220.32</b>
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)				

A debt 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.

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



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 138477  
2. Committee Name CTE Michael C. Taylor

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: Taylor, Michael C. 14076 Red Pine Dr. Sterling Heights, MI 48313	4. Type: <u>In-Kind Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>09/07/11</u> 6. <u>Original Amount of Debt:</u> <u>\$ 159.00</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 159.00 <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: Taylor, Michael C. Same	4. Type: <u>In-Kind Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>9-7-11</u> 6. <u>Original Amount of Debt:</u> <u>\$ 23.30</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 23.30 <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: Taylor, Michael C. Same	4. Type: <u>In-Kind Loan</u> 5. <u>Date Debt Was Incurred:</u> <u>9-7-11</u> 6. <u>Original Amount of Debt:</u> <u>\$ 103.68</u>	\$ \$ \$ \$ \$	\$ 0.00	\$ 103.68 <input type="checkbox"/> FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt)

**\$285.98**

Grand Total of all Schedules 1E  
(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.



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

**DEBTS AND OBLIGATIONS**  
**SCHEDULE 1E**  
**CANDIDATE COMMITTEE**

1. Committee I.D. Number 138477  
2. Committee Name CTE Michael C. Taylor

**This Schedule itemizes:**

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

3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed.  Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorser or guarantor, 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 8 minus item 9)
Debt #1 Corp? <input type="checkbox"/> Yes Owed to or by: <b>Michael C. Taylor</b> <b>14076 Red Pine Dr.</b> <b>Sterling Heights, MI 48313</b>	4. Type: <u>In Kind Loan</u> 5. Date Debt Was Incurred: <u>08/28/11</u> 6. Original Amount of Debt: <u>\$ 94.34</u>	\$ \$ \$ \$ \$	\$	\$ 94.34 <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:	4. Type: _____ 5. Date Debt Was Incurred: _____ 6. Original Amount of Debt: _____ \$ _____	\$ \$ \$ \$ \$	\$	\$ <input type="checkbox"/> FORGIVEN
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If bank loan, name of endorser or guarantor: \_\_\_\_\_ Amount Endorsed: \$ \_\_\_\_\_

Debt #3 Corp? <input type="checkbox"/> Yes Owed to or by:	4. Type: _____ 5. Date Debt Was Incurred: _____ 6. Original Amount of Debt: _____ \$ _____	\$ \$ \$ \$ \$	\$	\$ <input type="checkbox"/> FORGIVEN
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If bank loan, name of endorser or guarantor: \_\_\_\_\_ Amount Endorsed: \$ \_\_\_\_\_

Page Subtotal (Outstanding debt) **\$94.34**

Grand Total of all Schedules 1E **\$4,526.84**  
(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.