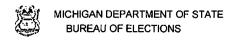


## CANDIDATE COMMITTEE COVER PAGE

#### FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and ca	signed by andidate.	3. This Statement covers From	11/23/21 <sub>to</sub> 12/31/21			
1. Committee I.D. Number		4. Candidate Last Name	First Name	M.I.		
138477		Taylor	Michael	C.		
		4a. Office Sought Including District # or Community Served (If applicable)				
2. Committee Name		Mayor of Sterling Heig	Mayor of Sterling Heights			
Committee to Elect Michael C. Taylor		4b. County of Residence MACOMB				
5. Committee's Mailing Address		6. Treasurer's Name & Reside	ntial Address			
14076 Red Pine Dr.		Michael C. Taylor				
Sterling Heights, MI 48313		14076 Red Pine Dr.	14076 Red Pine Dr.			
		Sterling Heights, MI 48313				
Area Code and Phone (586) 822-3500 If the address in this box is different from the commi	Hoo.					
mailing address on the Statement of Organization, r be sent to this address by the filing official.	nail may	Area Code & Phone (586) 82	2-3500			
7. Treasurer's Business Address			's Name and Address (If the committee has a			
7. Heasurer's Dusiness Address		Designated Record Keeper)	s Name and Address (if the committee has a			
Area Code and Phone	<del></del>	Area Code and Phone	Los Bissolution of Condition Committee			
9. TYPE OF STATEMENT	Required ON	ILY if candidate	9e. Dissolution of Candidate Committee			
9a. Pre-Election OR 9b. Post-Election	is not on the current year:	ballot for the	By checking this item I/We certify any or by the committee to the candidate or his or h			
Pre-Election or Post-Election Statement relates to:	Continue your.		by discharged and forgiven, and no longer of the committee. The committee has no ousta	ollectible from		
Primary	July Quart	erly	owes no lates fees or has any oustanding de			
General	October Q	uarterly				
		•	Further, if the dissolution cannot be granted, considered a request for the Reporting Waive	that this be er.		
Convention						
Special	9c. 🛛 Annua	Statement (2021)	Effective date of dissolution			
School		Coverage Year				
Caucus		dment to Campaign Statement blete Item 9a, 9b, 9c or 9e to				
	indica amend	te which Statement is being	Note: The disposition of residual funds must Schedule 1B and the Summary Page.	be reported on		
	amone	,				
Date of Election, Convention or Caucus						
10 Varification: INVo partife that all managehie dilica	חסס אומס אומסל	in the proporation of this statem	and attached schodules (if any) and to the	host of		
10. Verification: I\We certify that all reasonable diligenty our knowledge and belief the contents are true, a	accurate and co	omplete.	enii anu attacneu scriedules (ir any) and to the	Dest of		
Current Treasurer or Michael C. Ta	vior	11/5	la la lamuana de	1 2022		
Designated Record Reeper	iyiOi	Sign	Date January 31	I, ZUZZ		
Type or Print Name		Signater				
Candidate Michael C. Taylor		, MULL	Date January 3	1, 2022		
Type or Print Name		Signature				



1. Committee I.D. Number 138477

## SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name Committee to Elect Michael C. Taylor

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



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

1. Committee I. D. Number

138477

2. Committee Name	CTE Michael C. Taylor

Name and address of person or vendor to whom paid	Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		<u> </u>	
Name Apple, Inc.		11/29/21	\$ \$152.64
Address	Purpose: Phone Chargers	Date	
17360 Hall Rd.		oro for Momo	Itemization Type
Clinton Township, MI 48038		ere loi Mento	nemization type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name Facebook		12/01/21	s \$300
Address	Purpose: Facebook Ads	Date	
1 Hacker Way	Click H	ere for Memo	Itemization Type
Menlo Park CA 94025			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3			
Name iStorage		12/02/22	s \$128
Address	Purpose: Storage Unit	Date	Ψ Ψ120
41250 Garfield Rd	Click He	ere for Memo	temization Type
Clinton Township, MI 48038		SIC IOI MICINO	icinization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
<sup>Name</sup> Metro Airport		12/14/21	. 0404
Address	Purpose: Airport Parking	Date	\$ <u>\$104</u>
Romulus, MI			
·	Click He	ere for Memo I	temization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name Detroit Free Press			
Delion Flee Fless		12/15/21	\$ \$9.99
Address	Purpose: Newspaper Subscription	Date	Ψ ΨΘ.ΘΘ
615 W. Lafayette Blvd	Click He	ere for Memo	temization Type
Detroit, MI 48226	Check box if this expenditure is payment of		ionization Type
Fund Raiser	debt or obligation reported on previous statement		
	Subtota	al this page	\$694.63
	Grand Total of all So (Complete on last page of		
		΄ι	Entor this total

Enter this total on line 8a of Summary Page

Page \_\_\_\_ of \_\_3



### **ITEMIZED EXPENDITURES SCHEDULE 1B** CANDIDAT

1. Committee I. D. Number

138477

CANDIDATE COMMITTEE	2. Committee Name CTE Michael C. T		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1			
Name Friends of Foster Kids		12/17/21	

Expenditure #1		
Name Friends of Foster Kids	12/17/2	2 <u>1</u> \$ 181.08
Address	Purpose: Charitable Contribution Date	* 101.00
39126 Van Dyke		
Sterling Heights, MI 48313	Click Here for M	emo Itemization Type
	Check box if this expenditure is payment of	
Fund Raiser	debt or obligation reported on previous statement	
Expenditure #2		
Name Michael C. Taylor	12/29/2	21
•		\$ <u>3161.54</u>
Address	Purpose: Reimbursement - In-Kind Contribution Loan Date	
14076 Red Pine Dr	Click Here for M	emo Itemization Type
Sterling Heights, MI 48313		ome nemization Type
Division Paince	Check box if this expenditure is payment of debt or obligation reported on previous	
Fund Raiser Expenditure #3	statement	
Name See Schedule 1-IK Loans from Candidate		
Address	Date	\$
Expenditure 2 is repayment of in-kind loans made by the	Purpose:	
candidate to the committee as described on Schedule	Click Here for Me	emo Itemization Type
1-IK	Check box if this expenditure is payment of	
Fund Raiser	debt or obligation reported on previous	
Expenditure #4	statement	
<sup>Name</sup> Delta		
Della	12/29/2	1 * \$305.20
Address	Purpose: Flights - DC Mayors Conference Date	- Ψ ΨΟΟΟ.20
1030 Delta Boulevard		
Atlanta, GA 30354-6001	Click Here for Me	mo Itemization Type
	Check box if this expenditure is payment of	
Fund Raiser	debt or obligation reported on previous statement	
Expenditure #5		
Name See's Candy		
Oce's Carloy	12/15/2	1
Address	Purpose: Holiday Party Date	- \$ <u>\$416.25</u>
17420 Hall Rd	Clink Horn for Ma	mo Itamization Ton-
Clinton Township, MI 48038	Check box if this expenditure is payment of	mo Itemization Type
Fund Raiser	debt or obligation reported on previous	
	statement	<del>"                                     </del>
	Subtotal this pag	e \$4,064.07
	Grand Total of all Schedules	
	(Complete on last page of Schedu	ile)
		Enter this total

on line 8a of Summary Page

Page 2 of 3



# 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		1	
Name Shinola Restaurant		12/21/21	s \$132.06
Address	Purpose: Meeting Expense	Date	<del></del>
1400 Woodward Ave		6 11	
Detroit, MI 48226	<sub> </sub>	ere for Memo	Itemization Type
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name			\$
Address	Burnaga	Date	<u> </u>
Address	Purpose:		
	Click H	ere for Memo	temization Type
	Check box if this expenditure is payment of		:
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #3			
Name			
Address		Date	\$
Address	Purpose:		
	Click H	ere for Memo I	temization Type
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
Expenditure #4			
Name			
Address	Burnan	Date	*
, 144,1550	Purpose:		
	Click He	ere for Memo I	temization Type
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name			
Address	Burnana	Date	\$
	Purpose:		
	l <del></del>	ere for Memo	temization Type
Curd Daines	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
	Subtot	al this page	\$132.06
	Grand Total of all S (Complete on last page		\$4,890.76
		•	Enter this total

enter this total on line 8a of Summary Page

Page 3 of 3



### ITEMIZED IN-KIND CONTRIBUTIONS

**SCHEDULE 1-IK** 

1. Committee I. D. Number <u>1384</u>77

CANDID	ATE C	MMO:	TTEE
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2. Committee Name CTE Michael C. Taylor

CANDIDATE CONIN	II I I I I I I I I I I I I I I I I I I	
<ol> <li>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 all in-kind contributions.</li> </ol>	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services we purchased	7. Amount or Fair Market Value Series 8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address:	4. Endorsement or Guarantee of Bank Loan	
Michael C. Taylor 14076 Red Pine Dr. Sterling Heights, MI 48313	Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others-LOA	<sub>\$</sub> 2,049.04 N
If over \$100.00 cumulative, please provide:  Occupation: Attorney	Description Vehicle Expense - 3659 Miles on Personal Vehicle @ \$0.56/mile	-
Employer Name & Business Address:	5. Date Of Receipt: 12/29/21	
Kirk, Huth, Lange & Badalamenti, PLC 19500 Hall Rd., Suite 100 Clinton Township, MI 48038	6. Vendor Name & Address: Michael C. Taylor 14076 Red Pine Dr. Sterling Heights, MI 48313	Click for Memo Itemization Type
Fund Raiser Contribution		
Contribution # 2 PAC Receipt? Yes Name & Address  Michael C. Taylor 14076 Red Pine Dr.	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Coods or Services Purchased by Candidate or Others	\$ 300         \$
Sterling Heights, MI 48313	Goods or Services Purchased by Candidate or Others- LO	AN
If over \$100.00 cumulative, please provide: Occupation: Attorney Employer Name & Address:	Description Cell Phone Expense  5. Date Of Receipt: 12/31/20	_
Same	6. Vendor Name & Address:	
Fund Raiser Contribution	Verizon Wireless 1095 Ave of Americas New York, NY 10013	Click Here for Memo Itemization
	, <del></del>	
Contribution #3 PAC Receipt? Yes Name & Address:	4. Endorsement or Guarantee of Bank Loan  Goods Donated or Loaned Services Donated	812.50 <sub>\$</sub>
Michael C. Taylor 14076 Red Pine Dr.	Goods or Services Purchased by Candidate or Others	
Sterling Heights, MI 48313	✓ Goods or Services Purchased by Candidate or Others- LOA	.N
If over \$100.00 cumulative, please provide:	Description Cable/Internet Expense	
Occupation: Attorney	5. Date Of Receipt: 12/31/20	_
Employer Name & Address:	6. Vendor Name & Address:	
Same	Comcast	Click Here for Memo Itemization
	1701 JFK Boulevard Philadelphia, PA 19103	
Fund Raiser Contribution		
	Page Sub	total \$3,161.54
	Grand Total of all Schedules (Complete on last page of Sche	1.0.3 1(3) [.344]
	· · · · · · · ·	Enter this total

on line 6 of Summary Page

Page 1 of 1



## DEBTS AND OBLIGATIONS 1. Committee I.D. Number 138477

SCHEDULE 1E	ATT 441			
CANDIDATE COMMITTEE 2. C	COmmittee Name CTE Mic	chael C. Taylor	·	
This Schedule itemizes:			<del></del>	
a Debts and abligations awad by or forgiven the com (Che	unitioo OR b. Dob ck olther a or b. Use only for the p	its and obligations owed <u>iq</u> o urpose chacked.)	r forgiven by the co	mmillos.
Name and Mailing Address of person, vander 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 form, 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 enount of each payment	8. Cumulative payment to date on dabt	8, Custanding Balance et close of this period (liem 6 minus flom 8)
Debt #1 Carp? Yes Owed to or by:	4. Type: In-Kind Loan			
Taylor, Michael C. 14076 Red Pine Dr. Sterling Helghts, MI 48313	5. Date Debt Was Incurred: 08/14/09 6. Original Amount of Daba  75.51		\$ 0.00	\$ 75.51
If benk loan, nome of endorser or guerantor:		Amo	uni Endorsed: \$	
Debt #2 Corp? Yes Ownd to or by: Taylor, Michael C. Same	4. Type: In-Kind Loan 5. Date Debt Was Incurred: 8/15/09	\$		
	8. <u>Oribinal Amount of Dept</u> : \$ 14.30		ş <u>0.00</u>	\$ 14.30
If benk loss, name of endorser or guarantor.			ount Endorsed: \$_	
Debt #3 Corp? Yes Owed to or by: Taylor, Michael C. Same	4. Typo: In-Kind Loan  5. Date Debt Was Incurred:  8/16/09  6. Original Amount of Debt:  \$ 115.60	\$\$\$\$	ş_0.00	s_115.60FORGIVEN
If bank loan, name of endorser or guarantor:		An	ount Endorsed: \$_	
Page Subtotal (Outstanding debt)  Grand Total of all Schedules 15  (Complete on test page of Schedule showing amounts owed by or to the committee)  Enter this total on line 12a howed				
A debt crobligation must be shown on this Schedule if there was an outstanding amount owed only at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.  by or into 12b wood to of the Summary Page				

Page 1 of 5



## DEBTS AND OBLIGATIONS 1. Committee I.D. Number 138477

SCHEDULE 1E  CANDIDATE COMMITTEE 2.1	COMMITTEE NAME CTE MI	chael C. Taylor	•	
This Schedule Remixes:		·		
a Debts and obligations awad by or forgiven the con (Che	nmittee OR b. Deb	ois and obligations owed <u>to</u> o surpose checked.)	ır forgiven <u>by</u> line co	mmittae.
3. Name and Mailing Address of person, vendor or financial institution to wham debt is owed.  Check box to indicate whether debt is ewed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guaranton, 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 Cap? Yes Owed to or by: Taylor, Michael C. 14078 Red Pine Dr. Sterling Helghts, MI 48313	4. Type: In-Kind Loan 5. Date Debt Wes Incurred: 09/08/09 8. Original Amount of Debt: \$ 550.00	\$ \$ \$	\$ <u>0.00</u>	\$ 550.00
If bank fost, name of endorser or guaranton		S	unt Endorsed: 5	,
Debt #2 Cop? Yes Owed to or by: Taylor, Michael C. Same	4. Type: In-Kind Loan  5. Date Diebt Was Incurred: 10/2/09  6. Original Amount of Debt: 5 1107.82	\$ \$	\$ 0.00	\$ 1107.82
If bank loss, name of endorser or quarantor:  Debt #3 Corp?! Yes		Am	ount Endorsed: S_	
Owed to arby: Taylor, Michael C. Same	4. Type: In-Kind Loan  5. Date Debt Was Incurred: 10/1/09  6. Original Amount of Debt: 3 62.97	\$\$\$	s_0.00	• 62.97
If bank loan, name of endorser or guarantor:		An	ount Endonsed: \$	
	mplete on last page of Schedule a	Grand Total o howing amounts owed by or	oustancing deal) fall Schedules 15 to the committee)	\$1,720.79 Enter this total on line 12a lowed by or line 12b
A debt or obligation must be shown on this Schedul this Campaign Statement or R was forgiven during the			eing date of	"owed to" of the Summary Page

Page 2 of 5



DEBTS AND OBLIGATIONS 1	Committee LD. Number 138	477				
ROUETINE 45						
CANDIDATE COMMITTEE 2.0	2. Committee Name CTE Michael C. Taylor					
This Schedule itemizes:						
a Debts and obligations awad by ar forgiven the con (Cha	nmittee OR b. Deb ack either a or b. Use only for the p	is and obägallons owed <u>to</u> o prose checked.)	r forgiven <u>by</u> the con	milia.		
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 guaranton, if any.	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt	7. Date and another of each payment	8. Cumulative payment to dele on debt	9. Outstanding Balance at close of this period (item 6 minus item 8)		
Debt #1 Com? Yes Owed to or by:	4. Type: In-Kind Loan			•		
Taylor, Michael C. 14076 Red Pine Dr. Sterling Heighls, MI 48313	5. Date Debt Was Incorred: 07/08/11 6. Original Amount of Debt		s <u>0.00</u>	\$ 556,5 FORGIVEN		
If bank loan, name of endorser or guarantor.		Am	ount Endorsed: \$			
Debt #2 Corp? Yes	4. Type: in-Kind Loan	\$				
Taylor, Michael C. Same	5. Date Debt Was Incurred: 9-7-11 6. Original Amount of Debt: \$ 1533.62	\$\$\$	ş <u>0.00</u>	\$ 1533.82 FORGIVEN		
If bank toan, name of endorser or guaranter:		An	nount Endorsed: \$_			
Debt #3 Corp? Yes Owed to or by: Taylor, Michael C. Same	4. Type: In-Kind Loan 5. Date Debt Was Insurred: 8-29-11 6. Orleinal Amount of Debt: § 130	\$	ş_0.00	\$_130 FORGIVEN		
If bank tom, name of endorser or guerantor.		A	mount Endorsed: \$_	•		
		Page Subtotal	(Outstanding debi)	\$2,220.32		
Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee)						
	the state of the s	manufactured as the of the s	lasten deto af	Enter this total on line 12a "owed by" or line 12b		

A disbt or obligation must be shown on this Schedule II 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.

try" or line 12b "owed to" of the Summary Page

Page 3 d 5



DEBTS AND OBLIGATIONS	1. Committee I.D. Number 138	4//					
SCHEDULE 1E CANDIDATE COMMITTEE	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 by or forgiven by the committee.  (Check either a or b. Use only for the purpose checked.)							
3. Name and Mailing Address of person, vendor of 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 guarantion, if any.	(Description)  5. Indicate date debt was incurred	7. Date and amount of each payment	8. Cumulative payment to date on debt	Cuistanding Belgnce at clease of this period (item 8 minus tem 8)			
Debt#1 Corp? Yes Owed to or by: Taylor, Michael C. 14076 Red Pine Dr. Sterling Heights, MI 48313	4. Type: In-Kind Loan 5. Data Debt Was Insurred: 09/07/11 6. Original Amount of Debt: \$ 159,00	\$ \$ \$	\$ <u>0.00</u>	\$_159.00 FORGIVEN			
If bank loan, name of endorser or guaranter: Amount Endorsed; \$							
Owed to or by:  Taylor, Michael C.  Same  If benk loan, name of endorser or guarantor:	4. Type: In-Kind Loan  5. Date Debt Was Incerced: 9-7-11  6. Original Amount of Debt: 23.30	\$\$\$	\$ 0.00	3_23.30 FORGIVEN			
Dabl #3 Copp? Yes Owed to or by: Taylor, Michael C. Same	4. Type: In-Kind Loan 5. Data Daht Was Incurred: 9-7-11 6. Original Amount of Daht: 8 103.68	\$\$\$\$\$	\$ 0.00	\$_103.68 FORGIVEN			
If bank loan, name of endorser or quaranter:  Page Subtolal (Outstanding dabt)  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.							

Page 4 d 5



DEBTS AND OBLIGATIONS 1. Committee I.D. Number 138477							
SCHEDULE 1E							
CANDIDATE COMMITTEE 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.)							
Name and Mailing Address of person, vender or financial instation 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 guaranters, if any.	4. Type of Obligation (Description) 5. Indicate date debt was Incurred 6. Indicate original amount of debt	7. Date and amount of exchpayment	Currutative payment to date on debt	8. Outstanding Balance at close of this period (Item 8 minus Item 8)			
Debt#1 Corp? Yes Owed to or by: Michael C. Taylor	4. Type: In Kind Loan						
14076 Red Pine Dr.	5. Date Debt Was Incurred:						
Sterling Heights, Mi 48313	09/29/11			s 94.34			
	8. Original Amount of Debt:	\$	•				
	8	ls		FORGIVEN			
If bank loan, name of endorser or guarantor:  Amount Endorsed: \$							
Owed to or by:	4. Type:	\$ \$ \$		\$			
Mhaalaan aan ad aad aan aan aan aan a		<u> </u>					
tribanktoan, name of endorser or guaranter:  Debt #3 Coro? Yes		Am	ount Endorsed: \$				
Owed to or by:	4. Type:	<u> </u>					
	6. Original Amount of Debt:		<b>5</b>	\$			
	\$			FORGIVEN			
If bank loan, name of endorser or guarantor:		Am	ount Endorsed: \$				
Page Sublotal (Outstanding debt)							
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 Campeign Statement or it was forgiven during the period covered by this Campaign Statement.							

Summary Page

Page **5** of **5**