

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.3. This Statement covers From: 04/26/2022 to 07/17/2022

1. Committee I.D. Number

140177

4. Candidate Last Name First Name M.I.

STEVENSON DENNIS W

2. Committee Name

CTE DENNIS STEVENSON

4a. Office Sought Including District # or Community Served (If applicable)

TRUSTEE - WASHINGTON TOWNSHIP

4b. County of Residence **MACOMB**

5. Committee's Mailing Address

59837 Glacier Springs Drive
Washington, MI 48094

6. Treasurer's Name & Residential Address

SEBASTIAN 'SAM' PREVITI
61614 COTSWOLD DRIVE
WASHINGTON, MI 48094

Area Code and Phone (586) 255-0120

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.

Area Code & Phone (586) 206-5185

7. Treasurer's Business Address

SEBASTIAN 'SAM' PREVITI
61614 COTSWOLD DRIVE
WASHINGTON, MI 480948. Designated Record Keeper's Name and Address (If the committee has a
Designated Record Keeper)SEBASTIAN 'SAM' PREVITI
61614 COTSWOLD DRIVE
WASHINGTON, MI 48094

Area Code and Phone (586) 206-5185

Area Code and Phone (586) 206-5185

9. TYPE OF STATEMENT9a. ☒ Pre-Election OR 9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

☒ Primary☐ General☐ Convention☐ Special☐ School☐ CaucusRequired ONLY if candidate
is not on the ballot for the
current year:☐ July Quarterly☐ October Quarterly9c. ☐ Annual Statement ()
Coverage Year9d. ☐ Amendment to Campaign Statement
(Complete Item 9a, 9b, 9c or 9e to
indicate which Statement is being
amended.)

Date of Election, Convention or Caucus

08/02/2022**9e. Dissolution of Candidate Committee**☐ 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 DENNIS STEVENSON

Type or Print Name

Signature

Date 7/19/2022Candidate SEBASTIAN 'SAM' PREVITI

Type or Print Name

Signature

Date 7/19/2022



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 140177

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name CTE DENNIS STEVENSON

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>5,226.10</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u></u>	(18.) \$ <u></u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u></u>	(19.) \$ <u></u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>\$5,226.10</u>	(20.) \$ <u></u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 6)	(6.) \$	<u></u>	(21.) \$ <u></u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u></u>	(22.) \$ <u></u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>\$4,375.10</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u></u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u></u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>\$4,375.10</u>	(23.) \$ <u></u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u></u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u></u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	<u></u>	(24.) \$ <u></u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>\$4,000.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u></u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>\$0.00</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>\$5,226.10</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>\$5,226.10</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>\$4,375.10</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>\$851.00</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 140177
2. Committee Name CTE DENNIS STEVENSON

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report <u>all</u> contributions regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/25/2022</u> Name & Address: <u>Dennis Stevenson</u> <u>59837 Glacier Springs Drive</u> <u>Washington, MI 48094</u>	<u>\$ 4,000.00</u>	<u>\$ 4,000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☒ Loan from a person ☐ Fund Raiser		
Click Here for Memo Itemization		
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/15/2022</u> Name & Address: <u>Lisa Rapp</u> <u>4203 31 Mile Road</u> <u>Washington, MI 48095</u>	<u>\$ 250.00</u>	<u>\$ 250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Account Manager</u> Employer <u>Magna International</u> Business Address <u>750 Tower Drive - Troy, MI 48083</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		
Click Here for Memo Itemization		
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/15/2022</u> Name & Address: <u>Jeff Rapp</u> <u>4203 31 Mile Road</u> <u>Washington, MI 48095</u>	<u>\$ 250.00</u>	<u>\$ 250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Rapp's Concrete</u> Business Address <u>4203 31 Mile Road - Washington, MI 48095</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		
Click Here for Memo Itemization		
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>06/16/2022</u> Name & Address: <u>Sebastian Sam Previti</u> <u>61614 Cotswold Drive</u> <u>Washington, MI 48094</u>	<u>\$ 726.10</u>	<u>\$ 726.10</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Supervisor</u> Employer <u>Washington Township</u> Business Address <u>57900 Van Dyke- Washington, MI 48094</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		
Click Here for Memo Itemization		

Page Subtotal **\$5,226.10**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 140177
2. Committee Name CTE DENNNIS STEVENSON

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name G-Tek Professional Address 42888 Mound Road Sterling Heights, MI 48314 ☐ Fund Raiser	Purpose: <u>SIGNS</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/15/2022</u> Date	\$ <u>726.10</u> Click Here for Memo Itemization Type
Expenditure #2 Name YouniqueCards.com Address 42816 Willsharon Sterling Heights, MI 48312 ☐ Fund Raiser	Purpose: <u>Mailers</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/15/2022</u> Date	\$ <u>2,634.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name Hortos Adverstising Address 6715 River Road Cottreville, MI 48039 ☐ Fund Raiser	Purpose: <u>Mailer Design</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/15/2022</u> Date	\$ <u>210.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name U.S. Post Office Address 59900 Van Dyke Ave. Washington, MI 48094 ☐ Fund Raiser	Purpose: <u>Stamps</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/15/2022</u> Date	\$ <u>580.00</u> Click Here for Memo Itemization Type
Expenditure #5 Name GoDaddy.com Address 2155 Godaddy Way Tempe, AZ 85284 ☐ Fund Raiser	Purpose: <u>Website</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/15/2022</u> Date	\$ <u>225.00</u> Click Here for Memo Itemization Type
Subtotal this page			
Grand Total of all Schedules 1B (Complete on last page of Schedule)			\$ 4,375.10

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
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DEBTS AND OBLIGATIONS
SCHEDULE 1E
CANDIDATE COMMITTEE

1. Committee I.D. Number 140177
2. Committee Name CTE DENNIS STEVENSON

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 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? ☐ Yes Owed to or by: DENNIS STEVENSON 59837 Glacier Springs Drive WASHINGTON, MI 48094	4. Type: <u>LOAN</u> 5. <u>Date Debt Was Incurred:</u> <u>04/26/2022</u> 6. <u>Original Amount of Debt:</u> <u>\$ 4,000.00</u>	\$ \$ \$ \$ \$	\$ <u>0.00</u>	\$ <u>4,000.00</u> ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #2 Corp? ☐ Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ \$ \$ \$ \$	\$ _____	\$ _____ ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		
Debt #3 Corp? ☐ Yes Owed to or by:	4. Type: _____ 5. <u>Date Debt Was Incurred:</u> _____ 6. <u>Original Amount of Debt:</u> \$ _____	\$ \$ \$ \$ \$	\$ _____	\$ _____ ☐ FORGIVEN
If bank loan, name of endorser or guarantor: _____		Amount Endorsed: \$ _____		

Page Subtotal (Outstanding debt)

Grand Total of all Schedules 1E
(Complete on last page of Schedule showing amounts owed by or to the committee)

\$4,000.00

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.