



**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 138224 2. Committee Name CTE David Joseph 5. Committee's Mailing Address 28637 Buckinghamshire Dr. Chesterfield, MI 48047 Area Code and Phone <u>(586) 212-3148</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. 7. Treasurer's Business Address 28637 Buckinghamshire Dr. Chesterfield, MI 48047 Area Code and Phone <u>(586) 980-0694</u>		3. This Statement covers From: <u>01/01/22</u> to <u>07/20/22</u> 4. Candidate Last Name Joseph First Name David M.I. M. 4a. Office Sought Including District # or Community Served (If applicable) Chesterfield Township Trustee 4b. County of Residence MACOMB 6. Treasurer's Name & Residential Address Christine Joseph 28637 Buckinghamshire Dr. Chesterfield, MI 48047 Area Code & Phone <u>(586) 980-0694</u> 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. ☒ Pre-Election OR 9b. ☐ Post-Election Pre-Election or Post-Election Statement relates to: ☒ Primary ☐ General ☐ Convention ☐ Special ☐ School ☐ Caucus Date of Election, Convention or Caucus <u>08/02/22</u>		Required ONLY if candidate is not on the ballot for the current year: ☐ July Quarterly ☐ October Quarterly 9c. ☐ Annual Statement (_____) Coverage Year 9d. ☐ Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended.) 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 Christine Joseph Type or Print Name		 Signature Date <u>7/25/22</u>	
Candidate David Joseph Type or Print Name		 Signature Date <u>7/25/22</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 138224

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name CTE David Joseph

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>18,900.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>\$18,900.00</u>	(18.) \$ <u> </u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u>\$0.00</u>	(19.) \$ <u>\$0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>\$18,900.00</u>	(20.) \$ <u> </u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>\$0.00</u>	(21.) \$ <u>\$0.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u>\$0.00</u>	(22.) \$ <u>\$0.00</u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>\$4,804.41</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>\$0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>\$0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>\$4,804.41</u>	(23.) \$ <u> </u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
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>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	<u>\$0.00</u>	(24.) \$ <u>\$0.00</u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>\$0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u>\$0.00</u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>\$1,615.00</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>\$18,900.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>\$20,515.00</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>\$4,804.41</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>\$15,710.59</u>	*



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138224
2. Committee Name CTE David Joseph

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>03/22/2022</u> Name & Address: Thomas Guastello 34120 Woodward Aveue Birmingham, MI 48009 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Center Management</u> Business Address <u>34120 Woodward Avenue, Birmingham, MI 48009</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>250.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/17/2022</u> Name & Address Nicole Davenport 50654 Woodbury Drive New Baltimore, MI 48047 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>100.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/28/2022</u> Name & Address: Vincenzo Manzella 18751 Wigeon Drive Clinton Township, MI 48038 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Lucido & Manzella</u> Business Address <u>39999 Garfield Road, Clinton Township, MI 48038</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>125.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/09/2022</u> Name & Address Henry Anderson 48553 Sugarbush Chesterfield, MI 48047 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>100.00</u>	\$ _____
Click Here for Memo Itemization		

Page Subtotal \$575.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138224
2. Committee Name CTE David Joseph

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>04/11/2022</u> Name & Address: Brandon Dabish 50858 Bredenburg Drive Macomb, MI 48044		\$ <u>1,000.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>MEDfarms</u> Business Address <u>100 Shafer Drive, Romeo, MI 48065</u> 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>04/11/2022</u> Name & Address: Stavros Toma 47677 Milonas Drive Shelby Township, MI 48315		\$ <u>500.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Self</u> Employer <u>Self-Employed</u> Business Address <u>47677 Milonas Drive, Shelby Township, MI 48315</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>04/11/2022</u> Name & Address: Bernard Kersten 80 Ottawa Ave. NW Grand Rapids, MI 49503		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Big O</u> Business Address <u>80 Ottawa Ave. NW, Grand Rapids, MI 49503</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>03/10/2022</u> Name & Address: Brian Powers 51792 Leshan Drive Chesterfield, MI 48047		\$ <u>50.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$1,650.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138224
2. Committee Name CTE David Joseph

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>03/17/2022</u> Name & Address: Susan Marie Luch 347 Pine Ridge Dr. Bloomfield Hills, MI 48304 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	\$ <u>250.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/11/2022</u> Name & Address Gary Patchak 32393 Lakepoint New Baltimore, MI 48047 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>PGA Marine Fiberglass Repairs</u> Business Address <u>32393 Lakepoint, New Baltimore, MI 48047</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>250.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/10/2022</u> Name & Address: Thomas Spagnuolo 21373 Raintree Dr. Macomb, MI 48044 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Mannino's Bakery</u> Business Address <u>4062 17 Mile Road, Sterling Heights, MI 48310</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>250.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/10/2022</u> Name & Address Tony Gallo 703 E. Gunn Rd. Oakland Township, MI 48306 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Gallo Enterprises</u> Business Address <u>6303 26 Mile Road, Suite 200, Washington, MI 48094</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>1,000.00</u>	\$ _____
Click Here for Memo Itemization		

Page Subtotal \$1,750.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138224
2. Committee Name CTE David Joseph

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>03/28/2022</u> Name & Address: Paul Manni 42778 Flis Dr. Sterling Heights, MI 48310 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>100.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>03/18/2022</u> Name & Address: Jeffrey Anderson 3825 Edwards Road, Suite 200 Cincinnati, OH 45209 5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate</u> Employer <u>The Rockwood Exchange</u> Business Address <u>34120 Woodward, Birmingham, MI 48009</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>500.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/11/2022</u> Name & Address: John Bergeski 46071 Rex Ct. Chesterfield, MI 48051 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>20.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/11/2022</u> Name & Address: Mike Stong 49784 Sussex Chesterfield, MI 48047 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>50.00</u>	\$ _____
Click Here for Memo Itemization		

Page Subtotal \$670.00

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

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Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138224
2. Committee Name CTE David Joseph

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>04/11/2022</u> Name & Address: Nicole Faulds 45645 Kennedy Ave. Shelby Township, MI 48315		\$ 50.00	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ 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>04/11/2022</u> Name & Address: Vito Delia 54680 Fairchild Rd. Macomb, MI 48042		\$ 50.00	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ 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>04/11/2022</u> Name & Address: Paul LaFata 48055 Mallard Dr. Chesterfield, MI 48047		\$ 75.00	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ 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>04/11/2022</u> Name & Address: Linda Hartman 48221 Forbes St. Chesterfield, MI 48047		\$ 100.00	\$ _____
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	

Page Subtotal **\$275.00**

Grand Total of All Schedules 1A
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138224
2. Committee Name CTE David Joseph

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3. Contribution # 1 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/11/2022</u> Name & Address: David Auwen 49820 Baker Ct. Macomb, MI 48044		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ 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>04/11/2022</u> Name & Address: Giovan Mannino 8249 Pinecreek Dr. Shelby Township, MI 48315		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ 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>04/11/2022</u> Name & Address: Max Fellsman 14612 Alpena Dr. Sterling Heights, MI 48313		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ 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>04/11/2022</u> Name & Address: Wendy Jones 50626 W. Shamrock St. New Baltimore, MI 48047		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal \$400.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138224
2. Committee Name CTE David Joseph

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>04/11/2022</u> Name & Address: Mario Yono 51715 Baker Road Chesterfield, MI 48047 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Capital Building Co.</u> Business Address <u>49926 Gratiot, Chesterfield, MI 48047</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>200.00</u>	\$ _____
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/11/2022</u> Name & Address: Michael Klieman 13400 30 Mile Road Washington, MI 48095 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	\$ <u>200.00</u>	\$ _____
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/11/2022</u> Name & Address: Lawrence Joseph 30167 Highgate Dr. Chesterfield, MI 48051 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	\$ <u>200.00</u>	\$ _____
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/11/2022</u> Name & Address: James Thomas 49544 Compass Point Drive Chesterfield, MI 48047 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>O'Reilly Rancilio, P.C.</u> Business Address <u>12900 Hall Road, Suite 350, Sterling Heights, MI 48313</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>250.00</u>	\$ _____

Page Subtotal \$850.00

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

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line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138224

2. Committee Name CTE David Joseph

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>04/11/2022</u> Name & Address: Lucido For A Brighter Tomorrow PAC 8303 26 Mile Road, Suite 203 Washington, MI 48094 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>250.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/11/2022</u> Name & Address: John Kapousis 4893 Crystal Creek Lane Washington, MI 48094 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>G&T Auto Parts</u> Business Address <u>54525 Gratiot, Chesterfield, MI 48051</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>250.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/11/2022</u> Name & Address: Mike Monicatti 55800 New Haven Road Chesterfield, MI 48051 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Monicatti Auto Sales, LLC</u> Business Address <u>55800 New Haven Road Chesterfield, MI 48051</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>250.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/11/2022</u> Name & Address: Kolby Miller 1919 Hardland Woods Dr. Howell, MI 48843 5. If over \$100.00 cumulative, please provide: Occupation <u>CEO</u> Employer <u>MedStar</u> Business Address <u>380 N. Gratiot, Clinton Township, MI 48036</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>300.00</u>	\$ _____
Click Here for Memo Itemization		

Page Subtotal \$1,050.00

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

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line 3a of Summary
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138224

2. Committee Name CTE David Joseph

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>04/11/2022</u> Name & Address: Fadi Yousif 4908 Kadena Ct. Sterling Heights, MI 48310 5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate</u> Employer <u>Self-Employed</u> Business Address <u>4908 Kadena Ct. Sterling Heights, MI 48310</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>300.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/11/2022</u> Name & Address: Marvin Kiezi 888 W. Big Beaver Troy, MI 48084 5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate</u> Employer <u>Self-Employed</u> Business Address <u>888 W. Big Beaver Troy, MI 48084</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>400.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/11/2022</u> Name & Address: Mark Marasco, Jr. 48637 Trillium Ave. Macomb, MI 48042 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Protean Corporation</u> Business Address <u>48627 Trillium Ave., Macomb, MI 48042</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>500.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/11/2022</u> Name & Address: Mark Abraham 1910 Illinois Ave. Englewood, FL 34224 5. If over \$100.00 cumulative, please provide: Occupation <u>Developer</u> Employer <u>Self-Employed</u> Business Address <u>1910 Illinois Ave. Englewood, FL 34224</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>500.00</u>	\$ _____
Click Here for Memo Itemization		

Page Subtotal \$1,700.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138224
2. Committee Name CTE David Joseph

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 all 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 04/11/2022

Name & Address:

Bryan Wickersham
42031 Ehrke Drive
Clinton Township, MI 48038

\$ 500.00

\$ _____

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

Occupation Real Estate Employer RTD 19, LLC

[Click Here for Memo Itemization](#)

Business Address 25000 N. River Road, Harrison Township, MI 48045

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

3. Contribution # 2 PAC Receipt? ☐ YES 4. Date of Receipt 04/11/2022

Name & Address:

Robert Kirk
37539 Hidden Valley Court
Clinton Township, MI 48036

\$ 500.00

\$ _____

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

Occupation Attorney Employer Kirk, Huth, Lange & Badalamenti, PLC

[Click Here for Memo Itemization](#)

Business Address 19500 Hall Road, Suite 100, Clinton Twp., MI 48038

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

3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt 04/11/2022

Name & Address:

Robert Huth
2486 Hawthorne Dr.
Sterling Heights, MI 48316

\$ 500.00

\$ _____

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

Occupation Attorney Employer Kirk, Huth, Lange & Badalamenti, PLC

[Click Here for Memo Itemization](#)

Business Address 19500 Hall Road, Suite 100, Clinton Twp., MI 48038

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

3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt 04/11/2022

Name & Address:

Kyle Anderson
6546 Briggeman Road
St. Clair, MI 48079

\$ 1,000.00

\$ _____

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

Occupation Retired Employer _____

[Click Here for Memo Itemization](#)

Business Address _____

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

Page Subtotal \$2,500.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138224

2. Committee Name CTE David Joseph

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>04/11/2022</u> Name & Address: Joseph Lucido 56276 Cannon Creek Rd. Shelby Twp., MI 48316 5. If over \$100.00 cumulative, please provide: Occupation <u>Insurance Agent</u> Employer <u>Lucido Insurance</u> Business Address <u>39999 Garfield, Clinton Township, MI 48838</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>1,000.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/11/2022</u> Name & Address: Pasquale Sciortino 28000 Manhattan St. Clair Shores, MI 48084 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	\$ <u>1,000.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/11/2022</u> Name & Address: Michael Venditti 19588 Lamplighter Trail Macomb, MI 48044 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Biggs Bar & Grill</u> Business Address <u>48265 Gratiot Avenue, Chesterfield, MI 48051</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>1,000.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/11/2022</u> Name & Address: Nicola Sciortino 50580 Ruedisale St. New Baltimore, MI 48047 5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate</u> Employer <u>Self-Employed</u> Business Address <u>50580 Ruedisale St. New Baltimore, MI 48047</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>1,000.00</u>	\$ _____
Click Here for Memo Itemization		

Page Subtotal \$4,000.00

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138224
2. Committee Name CTE David Joseph

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>04/11/2022</u> Name & Address: Ghassan Brikho 6915 Dakota Dr. Troy, MI 48098 5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate</u> Employer <u>Self-Employed</u> Business Address <u>6915 Dakota Dr. Troy, MI 48098</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>1,000.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/11/2022</u> Name & Address: Ann Maltese 20841 Frazho St. Clair Shores, MI 48081 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	\$ <u>500.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/11/2022</u> Name & Address: John Johnson 58337 Thomas Street New Haven, MI 48048 5. If over \$100.00 cumulative, please provide: Occupation <u>President</u> Employer <u>Southeastern Michigan Chamber of Commerce</u> Business Address <u>59 N. Walnut #206, Mount Clemens, MI 48043</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>1,000.00</u>	\$ _____
Click Here for Memo Itemization		
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/09/2022</u> Name & Address: Mark Forbert 50618 Martinique St. New Baltimore, MI 48047 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser	\$ <u>100.00</u>	\$ _____
Click Here for Memo Itemization		

Page Subtotal **\$2,600.00**

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

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line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138224
2. Committee Name CTE David Joseph

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>05/02/2022</u> Name & Address: Scott Perreman 28966 Oakmont Dr. Chesterfield, MI 48051		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ 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>04/11/2022</u> Name & Address: Karen Perreman 28966 Oakmont Dr. Chesterfield, MI 48051		\$ <u>100.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ 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>04/11/2022</u> Name & Address: Jason Kline 46525 Continental Dr. New Baltimore, MI 48047		\$ <u>20.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ 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>04/11/2022</u> Name & Address: Robert Fitzpatrick 46525 Continental Dr. New Baltimore, MI 48047		\$ <u>20.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$240.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138224
2. Committee Name CTE David Joseph

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>04/11/2022</u> Name & Address: Tiffany Krul 46525 Continental Dr. New Baltimore, MI 48047 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>20.00</u>	\$ _____
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/11/2022</u> Name & Address: Frank Unger 46525 Continental Dr. New Baltimore, MI 48047 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>20.00</u>	\$ _____
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/11/2022</u> Name & Address: Michelle Ogden 46525 Continental Dr. New Baltimore, MI 48047 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>20.00</u>	\$ _____
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt <u>04/11/2022</u> Name & Address: John Amore 46525 Continental Dr. New Baltimore, MI 48047 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>20.00</u>	\$ _____

Page Subtotal **\$80.00**

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

Enter this total on
line 3a of Summary
Page.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138224
2. Committee Name CTE David Joseph

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>04/11/2022</u> Name & Address: Nick Calandra 46525 Continental Dr. New Baltimore, MI 48047		\$ <u>20.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ 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 _____ Name & Address: Jacob Rhein 46525 Continental Dr. New Baltimore, MI 48047		\$ <u>20.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ 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>04/11/2022</u> Name & Address: Frank Gallo 39497 Vinnie Court Clinton Township, MI 48038		\$ <u>500.00</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 # 4 PAC Receipt? ☐ YES 4. Date of Receipt _____ Name & Address: Michael Ogden 46525 Continental Dr. New Baltimore, MI 48047		\$ <u>20.00</u>	\$ _____
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☒ Direct ☐ Loan from a person ☒ Fund Raiser		Click Here for Memo Itemization	

Page Subtotal **\$560.00**

Grand Total of All Schedules 1A
(Complete on last page of Schedule) **\$18,900.00**

Enter this total on
line 3a of Summary
Page.



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number 138224
2. Committee Name CTE David Joseph

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Friends of Chesterfield Police</u> Address <u>46525 Continental Drive</u> <u>Chesterfield, MI 48047</u> ☐ Fund Raiser	Purpose: <u>Fundraiser Donation</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>01/13/22</u> Date	\$ <u>100.00</u>
Expenditure #2 Name <u>Chase Bank</u> Address <u>27100 23 Mile Road</u> <u>Chesterfield, MI 48051</u> ☐ Fund Raiser	Purpose: <u>Service Fee</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>01/31/22</u> Date	\$ <u>15.00</u>
Expenditure #3 Name <u>Chase Bank</u> Address <u>27100 23 Mile Road</u> <u>Chesterfield, MI 48051</u> ☐ Fund Raiser	Purpose: <u>Service Fee</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>02/28/22</u> Date	\$ <u>15.00</u>
Expenditure #4 Name <u>Arctic Circle Brewing Company</u> Address <u>27663 23 Mile Road</u> <u>Chesterfield, MI 48051</u> ☒ Fund Raiser	Purpose: <u>Fundraiser Deposit</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/01/22</u> Date	\$ <u>500.00</u>
Expenditure #5 Name <u>BJ's Wholesale Club</u> Address <u>45101 Towne Center Blvd.</u> <u>Chesterfield, MI 48047</u> ☒ Fund Raiser	Purpose: <u>Fundraiser soft drinks</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/07/22</u> Date	\$ <u>120.80</u>
Subtotal this page			\$750.80
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 138224
2. Committee Name CTE David Joseph

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Staples Address 51382 Gratiot Chesterfield, MI 48051 ☐ Fund Raiser	Purpose: <u>Office Supplies</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/08/22</u> Date	\$ <u>55.11</u>
Expenditure #2 Name CTE Kraft For Macomb Address PO Box 652 New Baltimore, MI 48047 ☐ Fund Raiser	Purpose: <u>Donation</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/28/22</u> Date	\$ <u>100.00</u>
Expenditure #3 Name Macomb County Clerk Address 120 N. Main Street Mount Clemens, MI 48043 ☐ Fund Raiser	Purpose: <u>Late Fee</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/29/22</u> Date	\$ <u>500.00</u>
Expenditure #4 Name Chase Bank Address 27100 23 Mile Road Chesterfield, MI 48051 ☐ Fund Raiser	Purpose: <u>Service Fee</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/31/22</u> Date	\$ <u>15.00</u>
Expenditure #5 Name Staples Address 51382 Gratiot Chesterfield, MI 48051 ☒ Fund Raiser	Purpose: <u>Fundraiser Invitation Printing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/06/22</u> Date	\$ <u>45.53</u>
Subtotal this page			\$715.64
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 138224
2. Committee Name CTE David Joseph

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Arctic Circle Brewing Company</u> Address <u>27663 23 Mile Road</u> <u>Chesterfield, MI 48051</u> ☒ Fund Raiser	Purpose: <u>Fundraiser</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/07/22</u> Date	\$ <u>410.00</u>
Expenditure #2 Name <u>Retain Judge Teri Lynn Dennings</u> Address <u>PO Box 46528</u> <u>Mount Clemens, MI 48046</u> ☐ Fund Raiser	Purpose: <u>Donation</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/07/22</u> Date	\$ <u>50.00</u>
Expenditure #3 Name <u>Amazon</u> Address <u>www.Amazon.com</u> ☒ Fund Raiser	Purpose: <u>Fundraiser decorations</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/08/22</u> Date	\$ <u>23.84</u>
Expenditure #4 Name <u>Lowe's</u> Address <u>27990 23 Mile Road</u> <u>Chesterfield, MI 48051</u> ☐ Fund Raiser	Purpose: <u>Sign posts/hardware</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/11/22</u> Date	\$ <u>203.19</u>
Expenditure #5 Name <u>Costco Warehouse</u> Address <u>45460 Market Street</u> <u>Shelby Township, MI 48315</u> ☒ Fund Raiser	Purpose: <u>Fundraiser Cake/drinks</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/11/22</u> Date	\$ <u>115.56</u>
Subtotal this page			\$802.59
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 138224
2. Committee Name CTE David Joseph

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Home Depot Address 51315 Gratiot Chesterfield, MI 48051 ☐ Fund Raiser	Purpose: <u>Sign hardware</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/11/22</u> Date	\$ <u>48.74</u>
Expenditure #2 Name Marco's Pizza Address 48700 Gratiot Ave. Chesterfield, MI 48051 ☒ Fund Raiser	Purpose: <u>Pizza for fundraiser</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/11/22</u> Date	\$ <u>201.39</u>
Expenditure #3 Name Twisted Street BBQ Address 48712 Gratiot Chesterfield, MI 48051 ☒ Fund Raiser	Purpose: <u>Fundraiser food truck</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/11/22</u> Date	\$ <u>383.98</u>
Expenditure #4 Name Arctic Circle Brewing Company Address 27663 23 Mile Road Chesterfield, MI 48051 ☒ Fund Raiser	Purpose: <u>Fundraiser</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/11/22</u> Date	\$ <u>193.00</u>
Expenditure #5 Name Marco's Pizza Address 48700 Gratiot Ave. Chesterfield, MI 48051 ☒ Fund Raiser	Purpose: <u>Pizza for fundraiser</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/11/22</u> Date	\$ <u>66.35</u>
Subtotal this page			\$893.79
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 138224
2. Committee Name CTE David Joseph

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name <u>Amazon</u> Address <u>www.Amazon.com</u> ☒ Fund Raiser	Purpose: <u>Fundraiser supplies</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/20/22</u> Date	\$ <u>23.27</u>
Expenditure #2 Name <u>USPS</u> Address <u>PO 25641000 155</u> <u>Mount Clemens, MI 48043</u> ☐ Fund Raiser	Purpose: <u>Postage</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/25/22</u> Date	\$ <u>46.40</u>
Expenditure #3 Name <u>USPS</u> Address <u>PO 25641000 155</u> <u>Mount Clemens, MI 48043</u> ☐ Fund Raiser	Purpose: <u>Postage</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/26/22</u> Date	\$ <u>101.55</u>
Expenditure #4 Name <u>Staples</u> Address <u>51382 Gratiot</u> <u>Chesterfield, MI 48051</u> ☐ Fund Raiser	Purpose: <u>Office supplies</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/27/22</u> Date	\$ <u>49.99</u>
Expenditure #5 Name <u>Amazon</u> Address <u>www.Amazon.com</u> ☐ Fund Raiser	Purpose: <u>Stationary</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/27/22</u> Date	\$ <u>42.35</u>
Subtotal this page			\$263.56
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 138224
2. Committee Name CTE David Joseph

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Staples Address 51382 Gratiot Chesterfield, MI 48051 ☐ Fund Raiser	Purpose: <u>Printer Ink/supplies</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/28/22</u> Date	\$ <u>211.99</u>
Expenditure #2 Name Staples Address 51382 Gratiot Chesterfield, MI 48051 ☐ Fund Raiser	Purpose: <u>Paper</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/02/22</u> Date	\$ <u>59.30</u>
Expenditure #3 Name Vistaprint Address 275 Wyman Street Waltham, MA 02451 ☐ Fund Raiser	Purpose: <u>Stationary design</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/03/22</u> Date	\$ <u>5.30</u>
Expenditure #4 Name All Pro Color Address 20750 Chesley Drive Farmington, MI 48336 ☐ Fund Raiser	Purpose: <u>Stationary/cards</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/04/22</u> Date	\$ <u>337.48</u>
Expenditure #5 Name UPrinting Address 8000 Haskell Ave. Van Nuys, CA 91406 ☐ Fund Raiser	Purpose: <u>Stationary</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/04/22</u> Date	\$ <u>105.81</u>
Subtotal this page			\$719.88
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 138224
2. Committee Name CTE David Joseph

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Detroit Popcorn Company Address 14950 Telegraph Road Redford, MI 48239 ☐ Fund Raiser	Purpose: <u>Juneteenth Sno-Cone Supplies</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>05/19/22</u> Date	\$ <u>91.96</u>
Expenditure #2 Name Vistaprint Address 275 Wyman Street Waltham, MA 02451 ☐ Fund Raiser	Purpose: <u>Juneteenth Banner</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/13/22</u> Date	\$ <u>10.60</u>
Expenditure #3 Name MCNCNW Address 23125 Greater Mack Ave #805970 Saint Clair Shores, MI 48080 ☐ Fund Raiser	Purpose: <u>Juneteenth Sponsor</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/16/22</u> Date	\$ <u>50.00</u>
Expenditure #4 Name GFS Address 51630 Gratiot Chesterfield, MI 48051 ☐ Fund Raiser	Purpose: <u>Juneteenth Event/supplies</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>06/21/22</u> Date	\$ <u>94.31</u>
Expenditure #5 Name BJs Wholesale Club Address 45101 Towne Center Blvd. Chesterfield, MI 48047 ☐ Fund Raiser	Purpose: <u>Parks & Rec Movie Night/Candy</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/18/22</u> Date	\$ <u>181.34</u>
Subtotal this page			\$428.21
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 138224
2. Committee Name CTE David Joseph

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name GFS Address 51630 Gratiot Chesterfield, MI 48051 ☐ Fund Raiser	Purpose: <u>Parks & Rec Movie Night/Sno-Cone Supplies</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>07/19/22</u> Date	\$ <u>70.42</u>
Expenditure #2 Name Anedot Address 1340 Poydras St., Suite 1770 New Orleans, LA 70112 ☐ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/11/22</u> Date	\$ <u>64.90</u>
Expenditure #3 Name Anedot Address 1340 Poydras St., Suite 1770 New Orleans, LA 70112 ☐ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/11/22</u> Date	\$ <u>4.30</u>
Expenditure #4 Name Anedot Address 1340 Poydras St., Suite 1770 New Orleans, LA 70112 ☐ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>04/09/22</u> Date	\$ <u>5.30</u>
Expenditure #5 Name Anedot Address 1340 Poydras St., Suite 1770 New Orleans, LA 70112 ☐ Fund Raiser	Purpose: <u>Credit Card Processing</u> ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>03/17/22</u> Date	\$ <u>14.60</u>
Subtotal this page			\$159.52
Grand Total of all Schedules 1B (Complete on last page of Schedule)			\$4,804.41

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 138224

2. Committee Name CTE DAVID JOSEPH

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>4-11-2022</u>	4. Number of Individuals Attending or Participating (whichever is greater) 125	5. Type of Fund Raising Activity Beer, Pizza & Friends	6. Address and Name (If any) of the place where the activity was held. Arctic Circle Brewing Company 27663 23 Mile Road Chesterfield, MI 48051 ☐ Private Residence
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7. Total Contributions \$18,900.00

8. Other Receipts \$0.00

9. Gross Receipts (Add lines 7 and 8) \$18,900.00

10. Total Cost of Event \$2,083.72

(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.