

FILED 2022 JUL 21 AM8:51 MACOMB COUNTY CLERK

CANDIDATE COMMITTEE

FOR OFFICIAL USE ONLY

COVER PAGE						
Report must be legible, typed or printed in ink and the treasurer (or designated record keeper) and c	l signed by andidate.	3. This Statement covers From	11/23/2021	to 07/20/20	 22	
1. Committee I.D. Number	<u> </u>	4. Candidate Last Name	First	Name	M.I.	
139195		DeMonaco	Cardi		Α	
		4a. Office Sought Including Dis	strict # or Community	/ Served (If applical	oie)	
2. Committee Name		Eastpointe City Council				
CTE Cardi DeMonad	o Jr	4b. County of Residence MA	COMB		·	
5. Committee's Mailing Address		6. Treasurer's Name & Residential Address				
23225 Oakwood Ave		Alysa Diebolt				
Eastpointe, MI 48021		23225 Oakwood Ave				
		Eastpointe, MI 4802	1			
(500) 744 0004						
Area Code and Phone (586) 744-3864 If the address in this box is different from the comm						
mailing address on the Statement of Organization, mail may be sent to this address by the filing official.		Area Code & Phone (906) 399-9861				
7. Treasurer's Business Address		8. Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper)				
Area Code and Phone		Area Code and Phone	<u> </u>		<u> </u>	
9. TYPE OF STATEMENT	Required ON	II V if candidate	9e. Dissolution o	f Candidate Comn	rittee	
9a. Pre-Election OR 9b. Post-Election	Required ONLY if candidate is not on the ballot for the current year:		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			
³ re-Election or Post-Election Statement relates to:	July Quarterly		the committee. The	e committee has no	oustanding asse	rom ets,
Primary	[X]July Quan	erry	owes no lates fees	or has any oustand	ing debt.	
General	October Quarterly		Further, if the disso	lution cannot be an	antad that this h	_
Convention			considered a reque	st for the Reporting	Waiver.	-
Special	9c. 🗀 .					
_	Annual Statement ()		Effective date of dissolution			
School	Coverage Year					
Caucus	9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to					
	indica	te which Statement is being	Note: The disposition Schedule 1B and the			ed on
	amen	ieu.)		, 0		
Date of Election, Convention or Caucus			j			
			Ì			
			İ			
	<u> </u>	 	<u> </u>			
 Verification: I\We certify that all reasonable dilig ny\our knowledge and belief the contents are true, 			ent and attached sch	nedules (if any) and	to the best of	
Current Treasurer or Alysa Diebolt		, Alina D	1 dant	7/2	1/2022	
Designated Record keeper Type or Print Name		Signature	WOUV	—Date		-
•			\wedge /			
Candidate Cardi DeMonaco Jr		, Cuil &	\prec	Date7/2	21/2022	_
Type or Print Name	<u> </u>	Signature	1			

1. Committee I.D. Number 139195

1391	95
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SUMMARY PAGE CANDIDATE COMMITTEE

2. Committee Name CTE Cardi DeMonaco Jr

CANDIDATE COMMITTEE	2. Committee Name	
RECEIPTS	Column I This Period	Column II Cumulative this election cycle
3. Contributions		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.) \$ \$0.00
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$ \$0.00	(19.) \$ \$0.00
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ _\$0.00	(20.) \$ \$0.00
IN-KIND CONTRIBUTIONS & EXPENDITURES		
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ \$0.00	(21.) \$ \$0.00
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$ \$0.00	(22.) \$ \$0.00
EXPENDITURES		
8. Expenditures		
a. Itemized (Schedule 1B, Column 6)	(8a.) \$ \$0.00	,
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$ \$0.00	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$ \$0.00	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ \$0.00	(23.) \$ \$0.00
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)	(108.) \$ \$0.00	(24.) \$ \$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(11)	(2.7)*
a. Owed by the Committee (Schedule 1E)	(12a.) \$ \$0.00	
b. Owed to the Committee (Schedule 1E)	(12b.)\$ \$0.00	
 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15) 	(13.) \$ \$472.66 (14.) + \$ \$0.00 (15.) = \$ \$472.66 (16.) - \$ \$0.00 (17.) \$ \$472.66	