MICHIGAN D	EPARTMENT OF STAT	Ē		FILED			
BUREAU	OF ELECTIONS			25 JUL 2022 AM	10:07		
	ATE COMMITTI OVER PAGE			MACOMB COUNTY C MT. CLEMENS, MICH	IIGAN	FOR OFFICIAL L	JSE ONLY
Report must be legible, typ the treasurer (or designated	ed or printed in ink and d record keeper) and ca	signed by indidate.	3. 1	This Statement covers From	^{.:} 11/2:	3/2021 _{to} 07/2	0/2022
1. Committee I.D. Number				Candidate Last Name		First Name	M.I.
139377			R	ADTKE		MICHAEL	V
2. Committee Name				Office Sought Including Dis			plicable)
			CC	DUNCIL, STERLING	HEIGH	TS	
CITIZENS FOR	_	ADTKE		County of Residence MA			
5. Committee's Mailing Addr	ess		6.	Treasurer's Name & Reside	ntial Addr	ress	
34205 BARRETT STERLING HEIGH	TS, MI 48312		13	RGINIA LA ROSA 8515 PARKRIDGE HELBY TWP, MI 4			
Area Code and Phone (58) If the address in this box is d mailing address on the State be sent to this address by the	ifferent from the commit ement of Organization, n	ttee nail may	Are	a Code & Phone (586)	739-88	85	
7. Treasurer's Business Add	Iress		8.	Designated Record keeper signated Record keeper)	s Name a	and Mailing Address (If the	e committee has a
13515 PARKRIDG SHELBY TWP, MI			De				
Area Code and Phone (58	36) 739-8885		Are	ea Code and Phone <u>()</u> -			
9. TYPE OF STATEMENT					9e. Dis	solution of Candidate C	ommittee
9a. Pre-Election OR	9b. Post-Election	Required ON is not on the	ballo			Ū	ertify any outstanding debt
Pre-Election or Post-Election	Statement relates to:	current year:				ommittee to the candidate arged and forgiven, and r	e or his or her spouse is here no longer collectible from
		X July Quarte	erly		the com	mittee. The committee ha	as no oustanding assets,
Primary		October Q	uarte	erlv	owes no	o lates fees or has any ou	standing debt.
						if the dissolution cannot b red a request for the Repo	
Convention		_			Consider		
Special		^{9c.} 🗌 Annua	l Sta	atement (<u>2022</u>)		Effective date of dissolu	ution
School				Coverage Year			
Caucus		(Compl	ete e wh	tt to Campaign Statement Item 9a, 9b ,9c or 9e to ich Statement is being		he disposition of residual t le 1B and the Summary P	funds must be reported on Page.
Date of Election, Convent	tion or Caucus						
	hat all variations of the PP						
10. Verification: I\We certify t my\our knowledge and belief					ent and a	mached schedules (if any) and to the dest of
Current Treasurer or						Submitted electronically, signature on file	7/25/2022
Designated Record keeper	Type or Print Name		/	Signature		Date	
				č	ę	Submitted electronically,	
Candidate			/			signature on file Date	7/25/2022
	Type or Print Name			Signature			



SUMMARY PAGE 2. Committee Name CITIZENS FOR MICHAEL RADTKE **CANDIDATE COMMITTEE** RECEIPTS Column I Column II This Period Cumulative this election cycle 3. Contributions (3a.) \$ 0.00 a. Itemized (Schedule 1A - Column 6) b. Unitemized (less than \$20.01 each - no Schedule) (3b.) \$ NOT APPLICABLE (3c.) \$_0.00 (18.) \$ 25.00 c. Subtotal of "Contributions" (4.) \$_0.00 (19.) 0.004. Other Receipts (Schedule 1A -1, Column 6) (20.) \$ 25.00 (5.) \$ 0.00 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) **IN-KIND CONTRIBUTIONS & EXPENDITURES** (6.) \$ 408.79 (21.) **5731.79** 6. In-Kind Contributions (Schedule 1-IK, Column 7) (22.) \$ 0.00 0.00 (7.) \$ 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) **EXPENDITURES** 8. Expenditures (8a.) \$ 803.38 a. Itemized (Schedule 1B, Column 6) (8b.) \$ 0.00 b. Itemized Get-Out-the-Vote (Schedule 1B-G) $(8c.) \$ c. Unitemized (less than \$50.01 each - no Schedule) (9.) \$ 803.38 (23.) \$ 5,739.22 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10. Disbursements (10a.) \$_0.00 a. Itemized (Schedule 1C, Column 6) b. Unitemized (less than \$50.01 each - no Schedule) (10b.) \$ 0.00 **11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS** (Add Line 10a + Line 10b) (24.) \$_0.00 (11.) \$ 0.00 DEBTS AND OBLIGATIONS 12. Debts and Obligations (12a.) \$ 26,528.17 a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) (12b.) \$ 0.00 **BALANCE STATEMENT** \$ 7,955.20 13. Ending Balance of last report filed (13.) (Enter zero if no previous reports have been filed.) (14.) +\$ 0.00 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) (15.) = \$ 7,955.20 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (16.) - \$ 803.38 (Add lines 9 and 11) 17. ENDING BALANCE (17.) \$ 7,151.82 (Subtract line 16 from line 15)

1. Committee I.D. Number 139377

ITEMIZED IN-KIND CONTR	IBUTIONS	120	770		
SCHEDULE 1-I	1. Com	mittee I. D. Number 139			
CANDIDATE COMM	TTEE 2. Com	mittee Name CITIZE	NS FOR	MICHAE	L RADTKE
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	5. Date of Receipt	bution (Check applicable box) endor from whom goods or se		7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occuration: OCN II T ANIT	Goods Donated or Lo	Guarantee of Bank Loan baned Services Donat urchased by Candidate or Oth urchased by Candidate or Oth	s t	5.00	<u>\$</u> 6.00
Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	5. Date Of Receipt: <u>12</u> 6. Vendor Name & Add G SUITE 1600 AMPHITHI MOUNTAIN VIE	ress: EATRE PKWY,			
Contribution # 2 PAC Receipt? Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	Goods Donated or L Goods or Services F Goods or Services F	Guarantee of Bank Loan oaned Services Donate Purchased by Candidate or Ot Purchased by Candidate or Ot	thers \$ 6	.00	\$ 6.00
If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	Description <u>EMAIL</u> 5. Date Of Receipt: <u>0</u> 6. Vendor Name & Add G SUITE 1600 AMPHITHE MOUNTAIN VIEV	dress: ATRE PKWY,			
Contribution #3 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR	Goods Donated or Lo	or Guarantee of Bank Loan Daned Services Donated Urchased by Candidate or Oth		00	<u>\$</u> 6.00
STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	Goods or Services P Description EMAIL 5. Date Of Receipt: 02 6. Vendor Name & Add G SUITE 1600 AMPHITHE MOUNTAIN VIE	ress: EATRE PKWY,	ners- LOAN		
			Page Subtotal	18.00	6.00
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Page 1 of 7

Page 2 of 7

SCHEDULE 1-I	K	1. Committee I. I						
CANDIDATE COMM	IITTEE	2. Committee Na		ENS F	-OR	MICHAE	L	RADTKE
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	5. Date of Recei	nd Contribution (Ch pt ess of Vendor fron		,	were	7. Amount or Fair Market Value		8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes	4. Endorse	ment or Guarantee	e of Bank Loan			I		
Name & Address: MICHAEL RADTKE JR.	Goods Dona	ted or Loaned	Services Dor	nated	\$	37.98	\$	37.98
34205 BARRETT DR	Goods or Se	rvices Purchased	by Candidate or (Others			-	
STERLING HEIGHTS, MI 48312		rvices Purchased	•	Others- LC	DAN			
If over \$100.00 cumulative, please provide: Occupation: CONSULTANT								
Employer Name & Business Address: WOLVERINE STRATEGIES	 5. Date Of Rece 6. Vendor Nam 	eipt: 03/01/2	022					
13515 PARKRIDGE DR,		BROTHER'	S BAKERY					
SHELBY TWP, MI 48315		HOENHERR	RD,					
Fund Raiser Contribution	WARREN,	MI 48093						
Contribution # 2 PAC Receipt? Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	Goods Don Goods or Se Goods or Se Description El 5. Date Of Rec 6. Vendor Nan G SUITE 1600 AMPH	eipt: 03/03/2	Services Don by Candidate or by Candidate or 022 PKWY,	Others		.00	\$	6.00
Fund Raiser Contribution Contribution #3 PAC Receipt? Yes	4. Endor	sement or Guarar	itee of Bank Loan	1	-			0.00
Name & Address: MICHAEL RADTKE JR.	Goods Dona	ated or Loaned	Services Dona	ited	_{\$} 8.9	99	\$_	8.99
34205 BARRETT DR	Goods or Se	rvices Purchased	by Candidate or C	Others				
STERLING HEIGHTS, MI 48312	Goods or Se	rvices Purchased	by Candidate or (Others- LC	DAN			
If over \$100.00 cumulative, please provide:	Description M	EETING						
Occupation: CONSULTANT	-	ipt: 03/12/20)22					
Employer Name & Address:	6. Vendor Nam	-						
WOLVERINE STRATEGIES 13515 PARKRIDGE DR,		IRST CAFE						
SHELBY TWP, MI 48315		DGE PARK I	,					
	STERLING	i HEIGHTS,	IVII 403 12					
Fund Raiser Contribution						_	Т	
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		(Co	omplete on last pa	age of Sch	nedule)		_	
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ITEMIZED IN-KIND CONTRIBUTIONS						
SCHEDULE 1-IK						
CANDIDATE COMM	IITTEE 2. Committee Name CITIZENS FOR MIC	HAEL RADIKE				
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	 4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased 	of ournality of				
Contribution # 1 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR,	 4. ☐ Endorsement or Guarantee of Bank Loan Goods Donated or Loaned ☐ Services Donated Goods or Services Purchased by Candidate or Others ✓ Goods or Services Purchased by Candidate or Others- LOAN Description MML MEETING 5. Date Of Receipt: 03/14/2022 6. Vendor Name & Address: SPEEDWAY 	57 <u></u> \$14.57				
SHELBY TWP, MI 48315	32123 VAN DYKE AVE, Warren, MI 48093					
Contribution # 2 PAC Receipt? Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	4. ☐ Endorsement or Guarantee of Bank Loan Goods Donated or Loaned ☐ Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description ANNUAL MEMBERSHIP 5. Date Of Receipt: 03/18/2022 6. Vendor Name & Address: MI DEMOCRATIC PARTY 606 TOWNSEND ST, LANSING, MI 48933	<u>0</u> <u>\$</u> 10.00				
Fund Raiser Contribution Contribution #3 Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	 4. ☐ Endorsement or Guarantee of Bank Loan Goods Donated or Loaned ☐ Services Donated \$7.93 Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description MEETING 5. Date Of Receipt: 03/23/2022 6. Vendor Name & Address: COFFEE FIRST CAFE 38373 DODGE PARK RD, STERLING HEIGHTS, MI 48312 	<u>,</u> 7.93				
	Page Subtotal 32	.50 0.00				
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ITEMIZED IN-KIND CONTR	11	20277			
SCHEDULE 1-I	· · · · · · · · · · · · · · · · · · ·	39377			
CANDIDATE COMM	ITTEE 2. Committee Name CITIZ	ENS F	OR	MICHAE	L RADTKE
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable5. Date of Receipt6. Name & Address of Vendor from whom goods of purchased	,	ere	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes	4. Endorsement or Guarantee of Bank Loan				
Name & Address: MICHAEL RADTKE JR.	Goods Donated or Loaned Services D	onated	ډ ۷	1.05	_{4.05}
34205 BARRETT DR	Goods or Services Purchased by Candidate or	r Others	Ψ		φ <u> </u>
STERLING HEIGHTS, MI 48312	Goods or Services Purchased by Candidate or	r Others- LO	AN		
If over \$100.00 cumulative, please provide:					
Occupation: CONSULTANT Employer Name & Business Address:	5. Date Of Receipt: 03/25/2022				
WOLVERINE STRATEGIES	6. Vendor Name & Address:				
13515 PARKRIDGE DR,	TIM HORTONS				
SHELBY TWP, MI 48315	51111 VAN DYKE AVE, SHELBY TWP, MI 48316				
Fund Raiser Contribution					
Contribution # 2 PAC Receipt? Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Do Goods or Services Purchased by Candidate o		\$ 6	.00	\$ <u>6.00</u>
STERLING HEIGHTS, MI 48312	Goods or Services Purchased by Candidate o	or Others- LO	AN		
If over \$100.00 cumulative, please provide: Occupation: CONSULTANT	Description EMAIL 5. Date Of Receipt: 04/03/2022				
Employer Name & Address: WOLVERINE STRATEGIES	6. Vendor Name & Address:				
13515 PARKRIDGE DR,					
SHELBY TWP, MI 48315	1600 AMPHITHEATRE PKWY, MOUNTAIN VIEW, CA 94043				
Fund Raiser Contribution					
Contribution #3 PAC Receipt? Yes Name & Address:	4. Endorsement or Guarantee of Bank Loa		. 95	5.00	_{\$} 95.00
MICHAEL RADTKE JR.		lated	Ψ		φ
34205 BARRETT DR	Goods or Services Purchased by Candidate or Goods or Services Purchased by Candidate or		A NI		
STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide:	Description MEETING	r Others- LO	AIN		
Employer Name & Address:	5. Date Of Receipt: <u>04/05/2022</u>				
WOLVERINE STRATEGIES	6. Vendor Name & Address: JOHNNY BLACKS PUBLIC HOUS	SE			
13515 PARKRIDGE DR,	35000 MORAVIAN DR,	-			
SHELBY TWP, MI 48315	STERLING HEIGHTS, MI 48312				
Fund Raiser Contribution					
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ITEMIZED IN-KIND CONTR	RIBUTIONS			
SCHEDULE 1-I				
CANDIDATE COMM	11TTEE 2. Committee Name CITIZENS F	-OR	MICHAE	L RADIKE
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	 4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services w purchased 	were	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	 4. ☐ Endorsement or Guarantee of Bank Loan Goods Donated or Loaned ☐ Services Donated Goods or Services Purchased by Candidate or Others ✓ Goods or Services Purchased by Candidate or Others- LC Description G SUITE 5. Date Of Receipt: 05/03/2022 6. Vendor Name & Address: G SUITE 1600 AMPHITHEATRE PKWY, 		5.00	§ 6.00
Fund Raiser Contribution	MOUNTAIN VIEW, CA 94043			
Contribution # 2 PAC Receipt? Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others	\$ 5	.25	§ 5.25
STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	 Goods or Services Purchased by Candidate or Others- Le Description CITY BUSINESS 5. Date Of Receipt: 05/03/2022 6. Vendor Name & Address: STARBUCKS 36350 VAN DYKE AVE, STERLING HEIGHTS, MI 48312 	OAN		
Contribution #3 PAC Receipt? Yes Name & Address:	4. Endorsement or Guarantee of Bank Loan	₅ 6 .	00	§ 6.00
MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LC Description EMAIL 5. Date Of Receipt: 06/03/2022 6. Vendor Name & Address: G SUITE 1600 AMPHITHEATRE PKWY, MOUNTAIN VIEW, CA 94043			p
	Dass O	ubtotol	17.05	0.00
	Page Su Grand Total of all Schedul (Complete on last page of Sch	les 1-IK	Enter this total on line 6 of Sur	0.00

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Page 5 of 7

Page 6 of 7

ITEMIZED IN-KIND CONTR	RIBUTIONS 120277		
SCHEDULE 1-I			
CANDIDATE COMM	ITTEE 2. Committee Name CITIZENS FC	DR MICHAE	LRADIKE
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value e	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	 4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description MUSIC IN THE PARK 5. Date Of Receipt: 06/04/2022 6. Vendor Name & Address: STERLING HEIGHTS CHAMBER OF COMMERCE 12900 HALL RD, 	<u>\$ 28.00</u> N	<u>\$</u> 28.00
Fund Raiser Contribution Contribution # 2 PAC Receipt? Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	STERLING HEIGHTS, MI 48313 4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated	<u>≈ 10.01</u> N	\$ <u>10.01</u>
Fund Raiser Contribution Contribution #3 Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	 4. ☐ Endorsement or Guarantee of Bank Loan Goods Donated or Loaned ☐ Services Donated \$_ Goods or Services Purchased by Candidate or Others ✓ Goods or Services Purchased by Candidate or Others- LOAN Description WEBSITE 5. Date Of Receipt: 06/24/2022 6. Vendor Name & Address: GO DADDY 14455 N HAYDEN RD, SCOTTSDALE, AZ 85260 		<u>\$ 55.51</u>
	Page Subte Grand Total of all Schedules (Complete on last page of Sched	1-IK	0.00

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ITEMIZED IN-KIND CONTRIBUTIONS								
SCHEDULE 1-I	1. Committee I. D. Number 139377							
CANDIDATE COMM	CANDIDATE COMMITTEE 2. Committee Name CITIZENS FOR MICHAEL RADTKE							
3. Name and Address from whom received If contribution is from an individual, enter last name first. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs). Report <u>all</u> in-kind contributions.	4. Type of In-Kind Contribution (Check applicable box)5. Date of Receipt6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)					
Contribution # 1 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Business Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	 4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description WEBSITE 5. Date Of Receipt: 06/25/2022 6. Vendor Name & Address: GO DADDY 14455 N HAYDEN RD, SCOTTSDALE, AZ 85260 	<u>, 63.51</u>	<u>\$63.51</u>					
Fund Raiser Contribution Contribution # 2 PAC Receipt? Yes Name & Address MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315 Fund Raiser Contribution	4. Endorsement or Guarantee of Bank Loan Goods Donated or Loaned Services Donated	19.99	\$ 19.99					
Contribution #3 PAC Receipt? Yes Name & Address: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If over \$100.00 cumulative, please provide: Occupation: CONSULTANT Employer Name & Address: WOLVERINE STRATEGIES 13515 PARKRIDGE DR, SHELBY TWP, MI 48315	 4. ☐ Endorsement or Guarantee of Bank Loan Goods Donated or Loaned ☐ Services Donated Goods or Services Purchased by Candidate or Others Goods or Services Purchased by Candidate or Others- LOAN Description EMAIL 5. Date Of Receipt: 07/03/2022 6. Vendor Name & Address: G SUITE 1600 AMPHITHEATRE PKWY, MOUNTAIN VIEW, CA 94043 	5.00	\$ <u>6.00</u>					
	Page Subto	^{ial} 89.50	6.00					
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ITEMIZED EXPENDITURES					
	ommittee I. D. Number	ICHAEL	RADTKE		
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount		
Expenditure #1 Name MAILCHIMP Address 675 PONCE DE LEON AVE NE ATLANTA, GA 30308	Purpose: EMAIL SERVICE	12/02/2021 Date	\$ <u>62.99</u>		
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement				
Expenditure #2 Name AMERICAN POLISH CENTURY CLUB Address 33204 MAPLE LN DR STERLING HEIGHTS, MI 48312	Purpose: ANNUAL DUES	12/02/2021 Date	\$ <u>100.00</u>		
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement				
Expenditure #3 Name ACTBLUEDONATE Address PO BOX 441146 SOMERVILLE, MA 02144	Purpose: PROCESSING FEES	12/03/2021 Date	\$ <u>1.88</u>		
Expenditure #4	debt or obligation reported on previous statement				
Name VANTIVE ECOMMERCE Address 8500 GOVERNORS HILL DR SYMMES TWP, OH 45249	Purpose: PROCESSING FEES	12/09/2021 Date	\$ <u>5.87</u>		
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement				
Expenditure #5 Name MAILCHIMP Address 675 PONCE DE LEON AVE NE ATLANTA, GA 30308	Purpose: EMAIL SERVICE	01/03/2022 Date	\$ <u>62.99</u>		
Fund Raiser	debt or obligation reported on previous statement				
		al this page	233.73		
	Grand Total of all S (Complete on last page)				

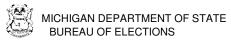
Page 1 of 3

Page 2 of 3

	139377		
			BADTKE
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1		01/11/2022	
Name VANTIVE ECOMMERCE		01/11/2022	\$ <u>3.17</u>
Address 8500 GOVERNORS HILL DR	Purpose: PROCESSING FEES	Date	
SYMMES TWP, OH 45249			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #2			
Name WARREN-STERLING HEIGHTS MI ELKS		02/08/2022	\$ 101.00
Address	Purpose: ANNUAL DUES	Date	
25950 SCHOENHERR RD			
WARREN, MI 48089			
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous		
Expenditure #3	statement		
Name VANTIVE ECOMMERCE		00/00/0000	
		02/09/2022 Date	\$ <u>0.50</u>
Address 8500 GOVERNORS HILL DR	Purpose: PROCESSING FEES	Date	
SYMMES TWP, OH 45249			
	Check box if this expenditure is payment of debt or obligation reported on previous		
Fund Raiser	statement		
		04/04/2022	\$ 69.99
	Purpose: EMAIL SERVICE	Date	
675 PONCE DE LEON AVE NE ATLANTA, GA 30308			
	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
Expenditure #5			
Name CTE PAUL WOJNO		04/05/2022	
Address	Purpose:FUNDRAISER TICKET	Date	\$ <u>25.00</u>
32025 MARGARET CT	·		
WARREN, MI 48093	Check box if this expenditure is payment of		
Fund Raiser	debt or obligation reported on previous statement		
	Subto	otal this page	199.66
	Grand Total of all	Schedules 1B	
	(Complete on last page		

	ommittee I. D. Number 139377		
		IICHAEL	RADTKE
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name MAILCHIMP Address	Purpose: EMAIL SERVICE	05/02/2022 Date	\$ <u>69.99</u>
675 PONCE DE LEON AVE NE ATLANTA, GA 30308	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #2			
Name AISHA M FAROOQI FOR STATE REPRESENTATIVE Address PO BOX #7	Purpose: FUNDRAISER TICKET	05/14/2022 Date	\$ <u>100.00</u>
STERLING HEIGHTS, MI 48311	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #3 Name FRIENDS OF NATE SHANNON Address	Purpose: FUNDRAISER TICKET	05/16/2022 Date	\$ <u>50.00</u>
43313 INTERLAKEN DR STERLING HEIGHTS, MI 48313	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4			
Name CTE KRISTINA LODOVISI Address 24106 MASCH AVE WARREN, MI 48091	Purpose: FUNDRAISER TICKET	05/22/2022 Date	\$ <u>50.00</u>
Fund Raiser	Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5			
Name AMERICAN POLISH CENTURY CLUB Address 33204 MAPLE LN DR	Purpose: FESTIVAL BANNER	05/30/2022 Date	\$ <u>100.00</u>
STERLING HEIGHTS, MI 48312	Check box if this expenditure is payment of debt or obligation reported on previous statement		
	Subto	tal this page	369.99
	Grand Total of all (Complete on last page		803.38

 $\mathsf{Page}_{\mathsf{Of}} \mathbf{3}$



34205 BARRETT DR 5. Date Debt Was Incurred: \$ </th <th colspan="7">DEBTS AND OBLIGATIONS SCHEDULE 1E CANDIDATE COMMITTEE 1. Committee I.D. Number 139377 CITIZENS FOR MICHAEL RADTKE 2. Committee Name CITIZENS FOR MICHAEL RADTKE</th>	DEBTS AND OBLIGATIONS SCHEDULE 1E CANDIDATE COMMITTEE 1. Committee I.D. Number 139377 CITIZENS FOR MICHAEL RADTKE 2. Committee Name CITIZENS FOR MICHAEL RADTKE						
Ower to or by: 4. Type: LOAN 11/22/21 § 050.99 MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 5. Date Debt Was Incurred: 5. 06/27/2018 \$ 6. original Amount of Debt: \$ \$ 700.00 \$ If bank loan, name of endorser or guarantor:	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	 (Description) 5. Indicate date debt was incurred 6. Indicate original amount 		payment to	Balance at close of this period (Item 6 minus		
Amount Endorser or guarantor: Debt #3 Corp? Yes Owed to or by: 4. Type: IN-KIND 11/20/19\$334.73 MICHAEL RADTKE JR. 5. Date Debt Was Incurred: \$ 34205 BARRETT DR 5. Date Debt Was Incurred: \$ STERLING HEIGHTS, MI 48312 6. Original Amount of Debt: \$ \$ 485.17 \$ If bank loan, name of endorser or guarantor: Amount Endorsed: \$ 0 Amount Endorsed: \$ 843.45 43.45	Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If bank loan, name of endorser or guarantor:	5. <u>Date Debt Was Incurred</u> : <u>06/27/2018</u> 6. <u>Original Amount of Debt</u> : <u>\$ 700.00</u> 4. Type: <u>IN-KIND</u> 5. <u>Date Debt Was Incurred</u> : <u>08/24/2018</u> 6. <u>Original Amount of Debt</u> :	\$Amc	ount Endorsed: \$ 0	\$_650.00		
Owed to or by: 4. Type: IN-KIND 11/20/19\$334.73 MICHAEL RADTKE JR. 5. Date Debt Was Incurred: \$ 34205 BARRETT DR 5. Date Debt Was Incurred: \$ STERLING HEIGHTS, MI 48312 6. Original Amount of Debt: \$ \$ 485.17 \$ If bank loan, name of endorser or guarantor: Amount Endorsed: \$0 843.45	If bank loan, name of endorser or guarantor:			nount Endorsed: \$)		
843.45	Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	5. <u>Date Debt Was Incurred</u> : <u>12/24/2018</u> 6. <u>Original Amount of Debt</u> :	\$ \$ \$ \$				

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.

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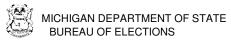


SCHEDULE 1E CANDIDATE COMMITTEE 2. This Schedule itemizes: a Debts and obligations owed by or forgiven the co	mmittee OR b. Debts neck either a or b. Use only for the pu	IS FOR MICH		
 Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any. 	 Type of Obligation (Description) Indicate date debt was incurred 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: DOMINIC LA ROSA 13515 PARKRIDGE DR SHELBY TWP, MI 48315	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : <u>01/23/2019</u> 6. <u>Original Amount of Debt</u> : <u>\$</u> 497.50	\$\$ \$ \$ \$ Am	\$ <u>0.00</u>	\$497.50 forgiven
Debt #2 Owed to or by: VIRGINIA LA ROSA 13515 PARKRIDGE DR SHELBY TWP, MI 48315	4. Type: IN-KIND 5. Date Debt Was Incurred: 01/24/2019 6. Original Amount of Debt: \$_746.25	\$ \$ \$ \$	\$ <u>0.00</u>	\$_746.25
If bank loan, name of endorser or guarantor: Debt #3 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: LOAN 5. <u>Date Debt Was Incurred</u> : 04/03/2019 6. <u>Original Amount of Debt</u> : \$ 1,000.00	\$\$ \$ \$ \$	nount Endorsed: \$ \$ mount Endorsed: \$	0 \$_1,000.00 FORGIVEN 0
			I (Outstanding debt)	2,243.75

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.

Page 2 of 6



SCHEDULE 1E CANDIDATE COMMITTEE 2. 0 This Schedule itemizes:		IS FOR MICH		
 Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any. 	 Type of Obligation (Description) Indicate date debt was incurred 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: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: <u>IN-KIND</u> 5. <u>Date Debt Was Incurred</u> : <u>09/20/2019</u> 6. <u>Original Amount of Debt</u> : <u>\$ 386.96</u>	\$\$ \$ \$ \$ Amo	\$ <u>0.00</u>	\$_ <u>386.96</u> FORGIVEN
Debt #2 Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If bank loan, name of endorser or guarantor:	4. Type: LOAN 5. <u>Date Debt Was Incurred</u> : 10/18/2019 6. <u>Original Amount of Debt</u> : \$ 2,500.00	\$ \$ \$ \$ \$	\$ 0.00	\$_2,500.00
If bank loan, name of endorser or guarantor: Debt #3 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If bank loan, name of endorser or guarantor:	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : 10/19/2019 6. <u>Original Amount of Debt</u> : § 3,473.24	\$\$ \$ \$ \$	nount Endorsed: \$ \$0.00 mount Endorsed: \$	3,473.24 FORGIVEN
			(Outstanding debt)	6,360.20

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.

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SCHEDULE 1E CANDIDATE COMMITTEE 2. C This Schedule itemizes:		IS FOR MICH		
 Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any. 	 4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt 	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : <u>11/25/2019</u> 6. <u>Original Amount of Debt</u> : <u>\$</u> 2,058.96	\$\$ \$ \$ \$ Amc	\$ <u>0.00</u>	\$
Debt #2 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. Date Debt Was Incurred: 07/20/2020 6. Original Amount of Debt: \$_836.48	\$ \$ \$ \$	\$ 0.00	\$ <u>836.48</u> Forgiven
Debt #3 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : 10/20/2020 6. <u>Original Amount of Debt</u> : §_322.97	\$\$ \$ \$ \$	s_0.00	\$ <u>322.97</u> Forgiven
			(Outstanding debt)	3,218.41

Enter this total

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.

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

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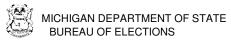


SCHEDULE 1E CANDIDATE COMMITTEE 2. (This Schedule itemizes: a Debts and obligations owed by or forgiven the cor (Chr		IS FOR MICH		
 Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or guarantors, if any. 	 4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount of debt 	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
Debt #1 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312 If bank loan, name of endorser or guarantor:	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : <u>12/31/2020</u> 6. <u>Original Amount of Debt</u> : <u>\$618.61</u>	\$ \$ \$ \$ Amc	\$ <u>0.00</u>	\$_618.61 FORGIVEN
Debt #2 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : 07/18/2021 6. <u>Original Amount of Debt</u> : \$_3,625.96	\$ \$ \$ \$ \$	\$ 0.00	\$_3,625.96 Forgiven
Debt #3 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : 08/23/2021 6. <u>Original Amount of Debt</u> : § 1,227.48	\$\$ \$ \$ \$	nount Endorsed: \$	\$_1,227.48 FORGIVEN
			(Outstanding debt)	5,472.05

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.

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DEBTS AND OBLIGATIONS 1. Committee I.D. Number 139377				
SCHEDULE 1E 2 Committee Name CITIZENS FOR MICHAEL RADTKE				
CANDIDATE COMMITTEE 2. C	committee Name			INE
This Schedule itemizes:				
a Debts and obligations owed by or forgiven the com	mittee OR b. Debte ck either a or b. Use only for the pu	s and obligations owed <u>to</u> c rpose checked.)	or forgiven <u>by</u> the cor	nmittee.
3. Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please provide information regarding the endorsers or	 Type of Obligation (Description) Indicate date debt was incurred 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)
guarantors, if any. Debt #1 Corp? Owed to or by:	4. Type: IN-KIND	\$		
MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	5. <u>Date Debt Was Incurred</u> : <u>10/17/2021</u> 6. <u>Original Amount of Debt</u> :	\$ \$ \$	\$ <u>0.00</u>	\$4,618.98
If bank loan, name of endorser or guarantor:	\$ <u>4,618.98</u>	\$	ount Endorsed: \$	FORGIVEN
Debt #2 Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: <u>IN-KIND</u> 5. <u>Date Debt Was Incurred</u> : <u>11/02/2021</u> 6. <u>Original Amount of Debt</u> : <u>\$3,362.54</u>	\$ \$ \$ \$	\$ <u>0.00</u>	\$_3,362.54
If bank loan, name of endorser or guarantor:		A	mount Endorsed: \$)
Debt #3 Corp? Yes Owed to or by: MICHAEL RADTKE JR. 34205 BARRETT DR STERLING HEIGHTS, MI 48312	4. Type: IN-KIND 5. <u>Date Debt Was Incurred</u> : 07/20/2022 6. <u>Original Amount of Debt</u> : \$_408.79	\$ \$ \$ \$	\$_0.00	\$_408.79
If bank loan, name of endorser or guarantor:		•	mount Endorsed: \$_	0
		Page Subtota	l (Outstanding debt)	8,390.31
(C	omplete on last page of Schedule s	Grand Total	of all Schedules 1E	26,528.17

Enter this total

on line 12a "owed by"" or line 12b A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of "owed to" of the Summary Page this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

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