

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by
the treasurer (or designated record keeper) and candidate.3. This Statement covers From 8/23/22 to 10/23/2022

1. Committee I.D. Number

139361

4. Candidate Last Name

Romano

First Name

Joseph

M.I.

V

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

County Commissioner - District 6

4b. County of Residence **MACOMB**

5. Committee's Mailing Address

12236 Grindley
Sterling Heights, MI 48312

6. Treasurer's Name & Residential Address

Joseph V. Romano
12236 Grindley
Sterling Heights, MI 48312

Area Code and Phone (586) 268-0967

If the address in this box is different from the committee
mailing address on the Statement of Organization, mail may
be sent to this address by the filing official.

Area Code & Phone (586) 268-0967

7. Treasurer's Business Address

12236 Grindley
Sterling Heights, MI 483128. Designated Record Keeper's Name and Address (If the committee has a
Designated Record Keeper)

Area Code and Phone (586) 268-0967

Area Code and Phone

9. TYPE OF STATEMENT9a. ☒ 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

11/08/2022

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

Joseph V. Romano

Type or Print Name

Signature

Date

10/26/22

Candidate

Joseph V. Romano

Type or Print Name

Signature

Date

10/26/22



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 139361

**SUMMARY PAGE
CANDIDATE COMMITTEE**

2. Committee Name CTE Joe Romano

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>6,800.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>\$6,800.00</u>	(18.) \$ <u>\$18,600.00</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>\$6,800.00</u>	(20.) \$ <u>\$18,600.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>\$500.00</u>	(21.) \$ <u>\$500.00</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>\$5,376.00</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>\$5,376.00</u>	(23.) \$ <u>\$12,078.00</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>\$6,682.00</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>\$6,800.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>\$13,482.00</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>\$5,376.00</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>\$8,106.00</u>	*



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139361

2. Committee Name CTE Joe Romano

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>08/02/2022</u> Name & Address: <u>Ralph Maccarone III</u> <u>13921 Basilico Dr.</u> <u>Shelby Twp, MI</u>	\$ <u>300.00</u>	\$ <u>400.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Self</u> Click Here for Memo Itemization Business Address <u>139361 Basilico Dr.; Shelby Twp, MI</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>08/02/2022</u> Name & Address: <u>Lawrence M. Scott</u> <u>12900 Hall Rd.</u> <u>Sterling Heights, MI</u>	\$ <u>500.00</u>	\$ <u>650.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>O'Rielly Rancilio</u> Click Here for Memo Itemization Business Address <u>12900 Hall Rd.; Sterling Heights, MI</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution #3 PAC Receipt? ☒ YES 4. Date of Receipt <u>09/22/2022</u> Name & Address: <u>Greater Metro Board of Realtors</u> <u>24725 W. 12 Mile Rd</u> <u>Southfield, MI</u>	\$ <u>1000.00</u>	\$ <u>1500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Click Here for Memo Itemization Business Address <u>PAC</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/02/2022</u> Name & Address: <u>Nick Najjar</u> <u>850 Stephenson Hwy</u> <u>Troy, MI</u>	\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Real Estate</u> Employer <u>Self</u> Click Here for Memo Itemization Business Address <u>850 Stephenson Hwy; Troy, MI</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		

Page Subtotal **\$1,900.00**

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139361

2. Committee Name CTE Joe Romano

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>10/02/2022</u> Name & Address: <u>Peter Lucido</u> <u>6303 - 26 Mile</u> <u>Washington, MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Prosecutor</u> Employer <u>Macomb County</u> Business Address <u>1 S Main St Ste 3, Mount Clemens, MI 48043</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>250.00</u>	\$ <u>250.00</u>
		Click Here for Memo Itemization v	
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/02/2022</u> Name & Address: <u>Philip Ruggeri</u> <u>55764 Saint Regis</u> <u>Shelby Twp, MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Self</u> Business Address <u>43231 Schoenherr Rd, Sterling Heights, MI 48313</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>700.00</u>
		Click Here for Memo Itemization v	
3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/02/2022</u> Name & Address: <u>Nathan Inks</u> <u>1050 Cloverlawn</u> <u>Lincoln Park, MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Self</u> Business Address <u>1050 Cloverlawn; Lincoln Park, MI</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
		Click Here for Memo Itemization v	
3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/02/2022</u> Name & Address: <u>Starvos Toma</u> <u>47677 Milonas Dr.</u> <u>Shelby Twp, MI</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		\$ <u>200.00</u>	\$ <u>200.00</u>
		Click Here for Memo Itemization v	

Page Subtotal \$1,450.00

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139361

2. Committee Name CTE Joe Romano

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>10/02/2022</u>	
Name & Address: Nicholas Stefani 13852 Strathmore Dr. Shelby Twp, MI		\$ <u>250.00</u>	\$ <u>250.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Supervisor</u> Employer <u>Ford Motor Co</u> Business Address <u>17 Mile and Mound; Sterling Heights</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>10/02/2022</u>	
Name & Address: Safe Yousif 5425 Clio Rd. Flint, MI		\$ <u>500.00</u>	\$ <u>500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Developer</u> Employer <u>Mt. Morris Holdings</u> Business Address <u>5425 Clio Rd.; Flint, MI</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>10/02/2022</u>	
Name & Address: Elizabeth Sierawski 40426 William Dr. Sterling Heights, MI		\$ <u>100.00</u>	\$ <u>100.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Council Person</u> Employer <u>Sterling Heights</u> Business Address <u>40555 Utica Rd, Sterling Heights, MI 48313</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>10/13/2022</u>	
Name & Address: Sterling Heights Firefighter Association Local 157 36911 Van Dyke Sterling Heights, MI		\$ <u>1000.00</u>	\$ <u>1000.00</u>
5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address <u>36911 Van Dyke; Sterling Heights, MI</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		Click Here for Memo Itemization ▼	

Page Subtotal **\$1,850.00**

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

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 139361

2. Committee Name CTE Joe Romano

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>08/02/2022</u> Name & Address: <u>Denise Trombley</u> <u>41540 Janet Cir</u> <u>Clinton Twp, MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Secretary</u> Employer <u>Trombley Excavating</u> Business Address <u>5441 Plymouth; Clinton Twp, MI</u> Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser		\$ <u>500.00</u>	\$ <u>500.00</u>
3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/02/2022</u> Name & Address: <u>Paul Slifco</u> <u>36623 Maas</u> <u>Sterling Heights, MI</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Electrical Contractor</u> Employer <u>Slifco Electrical</u> Business Address <u>6353 - 14 Mile; Sterling Heights, MI</u> Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser		\$ <u>900.00</u>	\$ <u>900.00</u>
3. Contribution # 3 PAC Receipt? ☐ YES 4. Date of Receipt <u>10/21/2022</u> Name & Address: <u>Yvonne Kniaz</u> <u>14016 Pernell</u> <u>Sterling Heights, MI</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		\$ <u>200.00</u>	\$ <u>200.00</u>
3. Contribution # 4 PAC Receipt? ☐ YES 4. Date of Receipt _____ Name & Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser		\$ _____	\$ _____

Page Subtotal \$1,600.00

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

\$6,800.00

Enter this total on
line 3a of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED IN-KIND CONTRIBUTIONS

SCHEDULE 1-IK

CANDIDATE COMMITTEE

1. Committee I. D. Number

139361

2. Committee Name

Committee To Elect Joe Romano

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 all 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	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution # 1 PAC Receipt? ☐ Yes Name & Address: Pashko Ujkic 5441 Plymouth St. Sterling Heights, MI If over \$100.00 cumulative, please provide: Occupation: Restaurant Owner Employer Name & Business Address: Dodge Park Coney Island 35252 Dodge Park Sterling Heights, MI ☒ 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 Held Fundraiser 5. Date Of Receipt: 10/02/2022 6. Vendor Name & Address: Self Click for Memo Itemization Type	\$ 500.00	\$ 1000.00
Contribution # 2 PAC Receipt? ☐ Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: ☐ 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 5. Date Of Receipt: 6. Vendor Name & Address: Click Here for Memo Itemization	\$	\$
Contribution #3 PAC Receipt? ☐ Yes Name & Address: If over \$100.00 cumulative, please provide: Occupation: Employer Name & Address: ☐ 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 5. Date Of Receipt: 6. Vendor Name & Address: Click Here for Memo Itemization	\$	\$

Page Subtotal

\$500.00

\$1,000.00

Grand Total of all Schedules 1-IK
(Complete on last page of Schedule)

\$500.00

Enter this total
on line 6 of Summary
Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I. D. Number **139361**
2. Committee Name **CTE Joe Romano**

3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date	6. Amount
Expenditure #1 Name Triangle Printing Address 30520 Gratiot Roseville, MI ☐ Fund Raiser	Purpose: AV Mailer ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	09/07/2022 Date Click Here for Memo Itemization Type	\$ 2971.00
Expenditure #2 Name Triangle Printing Address 30520 Gratiot Roseville, MI ☐ Fund Raiser	Purpose: Poll Mailer ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/04/2022 Date Click Here for Memo Itemization Type	\$ 2370.00
Expenditure #3 Name Yvonne Kniaz Address 14016 Pernell Sterling Heights, MI ☐ Fund Raiser	Purpose: Bookkeeping ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	10/20/2022 Date Click Here for Memo Itemization Type	\$ 35.00
Expenditure #4 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date Click Here for Memo Itemization Type	\$ _____
Expenditure #5 Name Address ☐ Fund Raiser	Purpose: _____ ☐ Check box if this expenditure is payment of debt or obligation reported on previous statement	_____ Date Click Here for Memo Itemization Type	\$ _____

Subtotal this page **\$5,376.00**

Grand Total of all Schedules 1B
(Complete on last page of Schedule) **\$5,376.00**

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 139361
2. Committee Name CTE Jos Romano

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>10/02/22</u>	4. Number of Individuals Attending or Participating (whichever is greater) 12	5. Type of Fund Raising Activity Party	6. Address and Name (If any) of the place where the activity was held. Dodge Park Coney Island 35252 Dodge Park Sterling Heights, MI ☒ Private Residence
---	--	---	---

7. Total Contributions \$3,300.00
8. Other Receipts \$500.00
9. Gross Receipts (Add lines 7 and 8) \$3,800.00
10. Total Cost of Event \$500.00
(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.