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08 NOV 2022 PM 04:31

MACOMB COUNTY CLERK  
MT. CLEMENS, MICHIGAN

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# CANDIDATE COMMITTEE COVER PAGE

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: 07/21/2022 to 10/20/2022

1. Committee I.D. Number

**139858**

2. Committee Name

**CTE PETER J. LUCIDO FOR PROSECUTOR**

4. Candidate Last Name First Name M.I.

**LUCIDO**

**PETER**

**J**

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

**PROSECUTING ATTORNEY, MACOMB COUNTY**

4b. County of Residence **MACOMB COUNTY**

5. Committee's Mailing Address

**6303 26-MILE RD SUITE 203  
WASHINGTON TWP, MI 48094**

Area Code and Phone (586) 206-3133  
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.

6. Treasurer's Name & Residential Address

**FRANK COPPOLA  
54620 CARNATION  
MACOMB, MI 48042**

Area Code & Phone (586) 295-375

7. Treasurer's Business Address

**54620 CARNATION  
MACOMB, MI 48042**

Area Code and Phone (586) 295-375

8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)

**SUSANNE RODZOS  
47134 MORNING DOVE  
MACOMB, MI 48044**

Area Code and Phone (586) 228-5800

## 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

Required ONLY if candidate is not on the ballot for the current year:

- ☐ July Quarterly  
☒ October Quarterly

9c. ☐ Annual Statement (2022 )  
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

Type or Print Name

Signature

Submitted electronically,  
signature on file

Date

**11/08/2022**

Candidate

Type or Print Name

Signature

Submitted electronically,  
signature on file

Date

**11/08/2022**



MICHIGAN DEPARTMENT OF STATE  
BUREAU OF ELECTIONS

1. Committee I.D. Number 139858

**SUMMARY PAGE  
CANDIDATE COMMITTEE**

2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| RECEIPTS                                                                                        | Column I<br>This Period        | Column II<br>Cumulative this election cycle |
|-------------------------------------------------------------------------------------------------|--------------------------------|---------------------------------------------|
| 3. Contributions                                                                                |                                |                                             |
| a. Itemized (Schedule 1A - Column 6)                                                            | (3a.) \$ <u>114,790.00</u>     |                                             |
| b. Unitemized (less than \$20.01 each - no Schedule)                                            | (3b.) \$ <u>NOT APPLICABLE</u> |                                             |
| c. Subtotal of "Contributions"                                                                  | (3c.) \$ <u>114,790.00</u>     | (18.) \$ <u>225,463.50</u>                  |
| 4. Other Receipts (Schedule 1A -1, Column 6)                                                    | (4.) \$ <u>0.00</u>            | (19.) \$ <u>0.00</u>                        |
| <b>5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS</b><br>(Add Line 3c + Line 4)                      | (5.) \$ <u>114,790.00</u>      | (20.) \$ <u>225,463.50</u>                  |
| <b>IN-KIND CONTRIBUTIONS &amp; EXPENDITURES</b>                                                 |                                |                                             |
| 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>                        |
| <b>EXPENDITURES</b>                                                                             |                                |                                             |
| 8. Expenditures                                                                                 |                                |                                             |
| a. Itemized (Schedule 1B, Column 6)                                                             | (8a.) \$ <u>20,459.40</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>           |                                             |
| <b>9. TOTAL EXPENDITURES</b> (Add Line 8a + Line 8b + Line 8c)                                  | (9.) \$ <u>20,459.40</u>       | (23.) \$ <u>20,459.40</u>                   |
| <b>INCIDENTAL EXPENSE DISBURSEMENTS</b><br>(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>          |                                             |
| <b>11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS</b><br>(Add Line 10a + Line 10b)                  | (11.) \$ <u>0.00</u>           | (24.) \$ <u>0.00</u>                        |
| <b>DEBTS AND OBLIGATIONS</b>                                                                    |                                |                                             |
| 12. Debts and Obligations                                                                       |                                |                                             |
| a. Owed <b>by</b> the Committee (Schedule 1E)                                                   | (12a.) \$ <u>0.00</u>          |                                             |
| b. Owed <b>to</b> the Committee (Schedule 1E)                                                   | (12b.) \$ <u>0.00</u>          |                                             |
| <b>BALANCE STATEMENT</b>                                                                        |                                |                                             |
| 13. Ending Balance of last report filed<br>(Enter zero if no previous reports have been filed.) | (13.) \$ <u>156,700.33</u>     |                                             |
| 14. Amount received during reporting period<br>(Line 5, Total Contributions & Other Receipts)   | (14.) + \$ <u>114,790.00</u>   |                                             |
| 15. SUBTOTAL Add lines 13 and 14                                                                | (15.) = \$ <u>271,490.33</u>   |                                             |
| 16. Amount expended during reporting period<br>(Add lines 9 and 11)                             | (16.) - \$ <u>20,459.40</u>    |                                             |
| 17. ENDING BALANCE<br>(Subtract line 16 from line 15)                                           | (17.) \$ <u>251,030.93</u> *   |                                             |



**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/21/2022</u> |                                                                                 |
| Name & Address:<br><b>LISA BLAZEVSKI</b><br><b>31253 GAY ST</b><br><b>ROSEVILLE, MI 48066</b>                                                                                                                                                                                         |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:                                                                                                                                                                                                                                       |                                           |                                      |                                                                                 |
| Occupation <u>ASSISTANT PROSECUTING ATTORNEY</u> Employer <u>MACOMB COUNTY</u>                                                                                                                                                                                                        |                                           |                                      |                                                                                 |
| Business Address <u>1 S MAIN ST, MT CLEMENS, MI 48043</u>                                                                                                                                                                                                                             |                                           |                                      |                                                                                 |
| Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                                                                                                     |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                    | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/21/2022</u> |                                                                                 |
| Name & Address:<br><b>RALPHE ARMSTRONG</b><br><b>1 LAFAYETTE PLAISANCE ST</b><br><b>DETROIT, MI 48207</b>                                                                                                                                                                             |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:                                                                                                                                                                                                                                       |                                           |                                      |                                                                                 |
| Occupation <u>MUSICIAN</u> Employer <u>DETROIT</u>                                                                                                                                                                                                                                    |                                           |                                      |                                                                                 |
| Business Address <u>1 LAFAYETTE PLAISANCE ST, DETROIT, MI 48207</u>                                                                                                                                                                                                                   |                                           |                                      |                                                                                 |
| Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                                                                                                     |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                   | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/21/2022</u> |                                                                                 |
| Name & Address:<br><b>BETH KIRSHNER</b><br><b>7451 INDIANWOOD TRAIL</b><br><b>WEST BLOOMFIELD TOWNSHIP, MI 48322</b>                                                                                                                                                                  |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:                                                                                                                                                                                                                                       |                                           |                                      |                                                                                 |
| Occupation <u>ATTORNEY</u> Employer <u>MACOMB COUNTY</u>                                                                                                                                                                                                                              |                                           |                                      |                                                                                 |
| Business Address <u>1 S MAIN ST, MT CLEMENS, MI 48043</u>                                                                                                                                                                                                                             |                                           |                                      |                                                                                 |
| Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                                                                                                     |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                   | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/21/2022</u> |                                                                                 |
| Name & Address:<br><b>NANCY TISEO</b><br><b>16155 VISTA WOODS CT</b><br><b>CLINTON TWP, MI 48038</b>                                                                                                                                                                                  |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:                                                                                                                                                                                                                                       |                                           |                                      |                                                                                 |
| Occupation <u>RETIRED</u> Employer _____                                                                                                                                                                                                                                              |                                           |                                      |                                                                                 |
| Business Address _____                                                                                                                                                                                                                                                                |                                           |                                      |                                                                                 |
| Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                                                                                                     |                                           |                                      |                                                                                 |

Page Subtotal 900.00

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 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES      4. Date of Receipt <u>07/21/2022</u><br>Name & Address:<br><b>JEFF STONE</b><br><b>51635 JULIES DR</b><br><b>NEW BALTIMORE, MI 48047</b>                                                                                                                                      |  | \$ <u>300.00</u>   | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ASSISTANT PROSECUTING ATTORNEY</u> Employer <u>MACOMB COUNTY</u><br>Business Address <u>1 S MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser   |  |                    |                                                                                 |
| 3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/21/2022</u><br>Name & Address:<br><b>PATRICK SIERAWSKI</b><br><b>22749 CALIFORNIA ST</b><br><b>ST CLAIR SHORES, MI 48080</b>                                                                                                                          |  | \$ <u>150.00</u>   | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ASSISTANT PROSECUTING ATTORNEY</u> Employer <u>MACOMB COUNTY</u><br>Business Address <u>1 S MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser   |  |                    |                                                                                 |
| 3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/21/2022</u><br>Name & Address:<br><b>JOSEPH A LUCIDO</b><br><b>39999 GARFIELD RD</b><br><b>CLINTON TWP, MI 48038</b>                                                                                                                                 |  | \$ <u>300.00</u>   | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>INSURANCE AGENT</u> Employer <u>LUCIDO INSURANCE AGENCY</u><br>Business Address <u>39999 GARFIELD RD, CLINTON TWP, MI 48038</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |  |                    |                                                                                 |
| 3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/21/2022</u><br>Name & Address:<br><b>TODD FLOOD</b><br><b>10555 LINCOLN DR</b><br><b>HUNTINGTON WOODS, MI 48070</b>                                                                                                                                  |  | \$ <u>1,500.00</u> | \$ <u>1,500.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>FLOOD LAW</u><br>Business Address <u>155 W CONGRESS ST, DETROIT, MI 48226</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                          |  |                    |                                                                                 |

Page Subtotal 2,250.00

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

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/21/2022</u> |                                                                                 |
| Name & Address:<br><b>MARVIN DUDLEY</b><br><b>1960 STRAWBERRY CIR</b><br><b>COMMERCE TWP, MI 48382</b>                                                                                                                                                                                                                                                       |                                           | \$ <u>250.00</u>                     | \$ <u>250.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>SALES</u> Employer <u>TEK SYSTEMS</u><br>Business Address <u>3000 TOWN CENTER, SOUTHFIELD, MI 48075</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                           | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/22/2022</u> |                                                                                 |
| Name & Address:<br><b>BOB KIRK</b><br><b>19500 HALL RD</b><br><b>CLINTON TWP, MI 48038</b>                                                                                                                                                                                                                                                                   |                                           | \$ <u>750.00</u>                     | \$ <u>750.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY/PARTNER</u> Employer <u>KIRK HUTH LANGE &amp; BADALAMENTI</u><br>Business Address <u>19500 HALL RD, CLINTON TWP, MI 48038</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                                          | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/22/2022</u> |                                                                                 |
| Name & Address:<br><b>ANGELO GRILLO</b><br><b>50775 RICHARD W BLVD</b><br><b>NEW BALTIMORE, MI 48051</b>                                                                                                                                                                                                                                                     |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>REAL ESTATE</u> Employer <u>GRILLO</u><br>Business Address <u>50775 RICHARD W BLVD, NEW BALTIMORE, MI 48051</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                        |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                                          | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/22/2022</u> |                                                                                 |
| Name & Address:<br><b>RICHARD CERBENAK</b><br><b>42870 LITTLE RD</b><br><b>CLINTON TWP, MI 48036</b>                                                                                                                                                                                                                                                         |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>CERVENAK LAW</u><br>Business Address <u>24518 HARPER, ST CLAIR SHORES, MI 48080</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                           |                                           |                                      |                                                                                 |

Page Subtotal **1,300.00**

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

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/22/2022</u> |                                                                                 |
| Name & Address:<br><b>LISA A COYLE</b><br>16128 OAKWOOD CT<br>NORTHVILLE, MI 48168                                                                                                                                                                                                                                                                           |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ASSISTANT PROSECUTOR</u> Employer <u>MACOMB COUNTY PROSECUTORS OFFICE</u><br>Business Address <u>1 S MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                           | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/22/2022</u> |                                                                                 |
| Name & Address:<br><b>CHRISTOPHER J COYLE</b><br>16128 OAKWOOD CT<br>NORTHVILLE, MI 48168                                                                                                                                                                                                                                                                    |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>LAWYER</u> Employer <u>WAYNE COUNTY PROSECUTORS OFFICE</u><br>Business Address <u>1441 ST ANTOINE, DETROIT, MI 48226</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser               |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                                          | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/22/2022</u> |                                                                                 |
| Name & Address:<br><b>TIMOTHY TOMLINSON</b><br>22600 HALL RD<br>CLINTON TWP, MI 48036                                                                                                                                                                                                                                                                        |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>YORK, DOLAN &amp; TOMLINSON, P.C.</u><br>Business Address <u>22600 HALL RD, CLINTON TWP, MI 48036</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser         |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                                          | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/22/2022</u> |                                                                                 |
| Name & Address:<br><b>ROBERT HUTH JR</b><br>19500 HALL RD<br>CLINTON TWP, MI 48038                                                                                                                                                                                                                                                                           |                                           | \$ <u>750.00</u>                     | \$ <u>750.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY/PARTNER</u> Employer <u>KIRK HUTH LANGE &amp; BADALAMENTI</u><br>Business Address <u>19500 HALL RD, CLINTON TWP, MI 48038</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |

Page Subtotal **1,200.00**

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 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/22/2022</u> |                                                                                 |
| Name & Address:<br><b>KUMAR PALEPU</b><br><b>377 HILLCREST AVE</b><br><b>GROSSE POINTE FARMS, MI 48236</b>                                                                                                                                                                                                                                                    |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>MACOMB COUNTY</u><br>Business Address <u>1 S MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                 |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                            | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/22/2022</u> |                                                                                 |
| Name & Address:<br><b>KATHLEEN BEARD</b><br><b>31674 JOAN DRIVE</b><br><b>NEW BALTIMORE, MI 48047</b>                                                                                                                                                                                                                                                         |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>MACOMB COUNTY</u><br>Business Address <u>1 S MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                 |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                                           | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/22/2022</u> |                                                                                 |
| Name & Address:<br><b>DARRYL ONDERIK</b><br><b>53245 SAMS LN</b><br><b>NEW BALTIMORE, MI 48047</b>                                                                                                                                                                                                                                                            |                                           | \$ <u>450.00</u>                     | \$ <u>450.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>COMMUNITY RELATIONS</u> Employer <u>CENTURY BANQUET CENTER</u><br>Business Address <u>33204 MAPLE LN DR, STERLING HEIGHTS, MI 48312</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                                           | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/22/2022</u> |                                                                                 |
| Name & Address:<br><b>COLLEEN O'CONNER WORDEN</b><br><b>20052 FAIRWAY DR</b><br><b>GROSSE POINTE WOODS, MI 48236</b>                                                                                                                                                                                                                                          |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>MACOMB COUNTY</u><br>Business Address <u>1 S MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                 |                                           |                                      |                                                                                 |

Page Subtotal **1,350.00**

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

Enter this total on  
line 3a of Summary  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/23/2022</u> |                                                                                 |
| Name & Address:<br><b>KENNETH J LICARI</b><br><b>52799 S WEATHERVANE DR</b><br><b>NEW BALTIMORE, MI 48047</b>                                                                                                                                                                                                                                                   |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>TRAINING CONSULTANT</u> Employer <u>GOVERNMENT CONSULTANT SERVICES</u><br>Business Address <u>6501 E ELEVEN MILE RD, WARREN, MI 48397</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                              | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/23/2022</u> |                                                                                 |
| Name & Address:<br><b>JOSEPH D MCCARTHY</b><br><b>2041 S PARKER ST</b><br><b>MARINE CITY, MI 48039</b>                                                                                                                                                                                                                                                          |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ASSISTANT PROSECUTOR</u> Employer <u>MACOMB COUNTY PROSECUTORS OFFICE</u><br>Business Address <u>1 S MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser    |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                                             | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/24/2022</u> |                                                                                 |
| Name & Address:<br><b>JENNIFER KEE</b><br><b>55837 NICKELBY S</b><br><b>SHELBY TWP, MI 48316</b>                                                                                                                                                                                                                                                                |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>REALTOR</u> Employer <u>KEE REALTY LLC</u><br>Business Address <u>55837 NICKELBY S, SHELBY TWP, MI 48316</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                              |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                                             | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/24/2022</u> |                                                                                 |
| Name & Address:<br><b>JENNIFER KEE</b><br><b>55837 NICKELBY S</b><br><b>SHELBY TWP, MI 48316</b>                                                                                                                                                                                                                                                                |                                           | \$ <u>600.00</u>                     | \$ <u>600.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>REALTOR</u> Employer <u>KEE REALTY LLC</u><br>Business Address <u>55837 NICKELBY S, SHELBY TWP, MI 48316</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                              |                                           |                                      |                                                                                 |

Page Subtotal 1,200.00

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

Enter this total on  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/24/2022</u> |                                                                                 |
| Name & Address:<br><b>JOHN POLIZZI</b><br><b>47 CRANFORD LN</b><br><b>GROSSE POINTE, MI 48230</b>                                                                                                                                                                                                                                                      |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>BUSINESS TAX CONSULTING</u> Employer <u>RYAN LLC</u><br>Business Address <u>150 W JEFFERSON AVE, STE 1400, DETROIT, MI 48226</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                     | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/24/2022</u> |                                                                                 |
| Name & Address:<br><b>GIOELE STEFANI</b><br><b>45491 MEADOW SQUARE</b><br><b>Macomb, MI 48044</b>                                                                                                                                                                                                                                                      |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>BUILDER</u> Employer <u>SELF EMPLOYED</u><br>Business Address <u>45491 MEADOW SQUARE, MACOMB, MI 48044</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                       |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                                    | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/25/2022</u> |                                                                                 |
| Name & Address:<br><b>MIKE LEWELLAN</b><br><b>17407 ROCCO DR</b><br><b>MACOMB, MI 48044</b>                                                                                                                                                                                                                                                            |                                           | \$ <u>1,000.00</u>                   | \$ <u>1,000.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>SELF EMPLOYED</u> Employer <u>SELF EMPLOYED</u><br>Business Address <u>17404 ROCCO DR, MACOMB, MI 48044</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                      |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                                    | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/25/2022</u> |                                                                                 |
| Name & Address:<br><b>PAUL MILLER</b><br><b>2071 LEEWOOD DR</b><br><b>SHELBY TWP, MI 48316</b>                                                                                                                                                                                                                                                         |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>JETS PIZZA</u><br>Business Address <u>2071 LEEWOOD DR, SHELBY TOWNSHIP, MI</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                             |                                           |                                      |                                                                                 |

Page Subtotal **1,750.00**

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

Enter this total on  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES      4. Date of Receipt <u>07/25/2022</u><br>Name & Address:<br><b>KENNETH DECOCK</b><br><b>80575 HOLMES RD</b><br><b>ARMADA, MI 48005</b>                                                                                                                                                  |  | \$ <u>150.00</u>   | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>SELF</u><br>Business Address <u>80575 HOLMES RD, ARMADA, MI 48005</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                           |  |                    |                                                                                 |
| 3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/25/2022</u><br>Name & Address:<br><b>DONN FRESARD</b><br><b>27735 JEFFERSON AVE</b><br><b>ST CLAIR SHORES, MI 48081</b>                                                                                                                                        |  | \$ <u>3,000.00</u> | \$ <u>3,000.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>MACOMB COUNTY</u><br>Business Address <u>1 S MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                  |  |                    |                                                                                 |
| 3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/25/2022</u><br>Name & Address:<br><b>HEATHER ODGERS-FECTEAU</b><br><b>45777 GLEN CT</b><br><b>MACOMB, MI 48044</b>                                                                                                                                            |  | \$ <u>150.00</u>   | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>SELF</u><br>Business Address <u>45777 GLEN CT, MACOMB, MI 48044</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                             |  |                    |                                                                                 |
| 3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/25/2022</u><br>Name & Address:<br><b>PAMEL SOSSI</b><br><b>500 GRISWOLD ST</b><br><b>STE 2320</b><br><b>DETROIT, MI 48226</b>                                                                                                                                 |  | \$ <u>150.00</u>   | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>LAW OFFICES OF PANEL M. SOSSI, PLLC</u><br>Business Address <u>500 GRISWOLD ST, STE 2320, DETROIT, MI 48226</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |  |                    |                                                                                 |

Page Subtotal **3,450.00**

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

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/25/2022</u> |                                                                                 |
| Name & Address:<br>ANTHONY DEMATTEIS<br>48639 HAYES RD<br>STE. A<br>MACOMB, MI 48044                                                                                                                                                                                                                                                                           |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>DEMATTEIS &amp; RICCIARDELLO, PLLC</u><br>Business Address <u>48639 HAYES RD, MACOMB, MI 48044</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser              |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                             | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/25/2022</u> |                                                                                 |
| Name & Address:<br>ANTHONY RUBINO<br>38880 SAHR CT<br>CLINTON TWP, MI 48038                                                                                                                                                                                                                                                                                    |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>SALES</u> Employer <u>PILOT MARKETING</u><br>Business Address <u>38880 SAHR CT, CLINTON TWP, MI 48038</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                                            | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/25/2022</u> |                                                                                 |
| Name & Address:<br>VINCENT SORRENTINO<br>14113 HIBISCUS DR<br>SHELBY TWP, MI 48315                                                                                                                                                                                                                                                                             |                                           | \$ <u>1,500.00</u>                   | \$ <u>1,500.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ENTREPRENEUR/ REAL ESTATE DEVELOPER</u> Employer <u>SELF EMPLOYED</u><br>Business Address <u>14113 HIBISCUS DR, SHELBY TWP, MI 48315</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                                            | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/26/2022</u> |                                                                                 |
| Name & Address:<br>LAGRASSO SALVATORE<br>53920 DOMINIQUE CT<br>SHELBY TWP, MI 48315                                                                                                                                                                                                                                                                            |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>LANDSCAPING</u> Employer <u>VICTORY LANDSCAPING</u><br>Business Address <u>51879 SCHOENHERR RD, SHELBY TWP, MI 48315</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                 |                                           |                                      |                                                                                 |

Page Subtotal 2,100.00

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

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES      4. Date of Receipt <u>07/26/2022</u><br>Name & Address:<br><b>SUNNY PALAJ</b><br><b>1381 VALLEYVIEW DR</b><br><b>CLARKSTON, MI 48348</b>                                                                                                                                 |  | \$ <u>300.00</u>   | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>ALFOCCINO ITALIAN RESTAURANT</u><br>Business Address <u>2225 N OPDYKE RD, AUBURN HILLS, MI 48326</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |  |                    |                                                                                 |
| 3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/26/2022</u><br>Name & Address:<br><b>DAVID JAYE</b><br><b>25810 HICKORY BLVD</b><br><b>BONITA SPRINGS, FL 34134</b>                                                                                                                              |  | \$ <u>600.00</u>   | \$ <u>600.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>RETIRED</u> Employer _____<br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                                       |  |                    |                                                                                 |
| 3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/26/2022</u><br>Name & Address:<br><b>SALVATORE MUNACO</b><br><b>15995 STURGEON ST</b><br><b>ROSEVILLE, MI 48066</b>                                                                                                                             |  | \$ <u>500.00</u>   | \$ <u>500.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>SELF EMPLOYED</u> Employer <u>SELF EMPLOYED</u><br>Business Address <u>15995 STURGEON ST, ROSEVILLE, MI 48066</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser          |  |                    |                                                                                 |
| 3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/26/2022</u><br>Name & Address:<br><b>JEREMY T STRADLEY</b><br><b>35715 KOENIG ST</b><br><b>NEW BALTIMORE, MI 48047</b>                                                                                                                          |  | \$ <u>1,000.00</u> | \$ <u>1,000.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>ELECTORIC MONITERING SYSTEMS</u><br>Business Address <u>331 E 9 MILE RD, HAZEL PARK, MI 48030</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser    |  |                    |                                                                                 |

Page Subtotal 2,400.00

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

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/26/2022</u> |                                                                                 |
| Name & Address:<br><b>SHANE GIANINO</b><br><b>38340 TRILLIUM PL</b><br><b>HARRISON TWP, MI 48045</b>                                                                                                                                                                                                                                         |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>PATHWAY STAFFING</u><br>Business Address <u>59 N WALNUT ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser             |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                           | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/26/2022</u> |                                                                                 |
| Name & Address:<br><b>DANIEL GALLI</b><br><b>54882 SHERWOOD LN</b><br><b>SHELBY TWP, MI 48315</b>                                                                                                                                                                                                                                            |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ENGINEERING MANAGER</u> Employer <u>TAPE MASTER</u><br>Business Address <u>54882 SHERWOOD LN, SHELBY TWP, MI 48315</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                          | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/26/2022</u> |                                                                                 |
| Name & Address:<br><b>MEGAN MCKEON</b><br><b>944 WHEATFIELD DR</b><br><b>ORION TWP, MI 48362</b>                                                                                                                                                                                                                                             |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>MACOMB COUNTY</u><br>Business Address <u>1 S MAIN ST, FLOOR 3, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser       |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                          | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/26/2022</u> |                                                                                 |
| Name & Address:<br><b>CORINNE CAROLLO</b><br><b>14600 BREZA DR</b><br><b>SHELBY TWP, MI 48315</b>                                                                                                                                                                                                                                            |                                           | \$ <u>500.00</u>                     | \$ <u>500.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>SELF EMPLOYED</u> Employer <u>SELF</u><br>Business Address <u>14600 BREZA DR, SHELBY TWP, MI 48315</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                 |                                           |                                      |                                                                                 |

Page Subtotal 950.00

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 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/26/2022</u> |                                                                                 |
| Name & Address:<br><b>JEFF KANSIER</b><br>11150 30 MILE RD<br>WASHINGTON, MI 48095                                                                                                                                                                                                                                                          |                                           | \$ <u>250.00</u>                     | \$ <u>250.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>VICE PRESIDENT</u> Employer <u>LEGAL INDUSTRIES</u><br>Business Address <u>1925 TAYLOR RD, AUBURN HILLS, MI 48326</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                          | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>LINDA DAVIS</b><br>39120 VENETIAN DR<br>HARRISON TWP, MI 48045                                                                                                                                                                                                                                                        |                                           | \$ <u>100.00</u>                     | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>RETIRED</u> Employer _____<br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                                  |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                         | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>JURIJ D FEDORAC</b><br>43227 WINTERFIELD DR<br>STERLING HEIGHTS, MI 48314                                                                                                                                                                                                                                             |                                           | \$ <u>1,000.00</u>                   | \$ <u>1,000.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNER</u> Employer <u>MACOMB COUNTY</u><br>Business Address <u>1 S MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser               |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                         | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>MICHAEL F MACHERZAK</b><br>57067 COVINGTON DR<br>WASHINGTON, MI 48094                                                                                                                                                                                                                                                 |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>RETIRED</u> Employer _____<br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                                  |                                           |                                      |                                                                                 |

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  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>SCOTT GREENLEE</b><br><b>1634 PEPPERTREE LN</b><br><b>LANSING, MI 48912</b>                                                                                                                                                                                                                                                    |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>SELF EMPLOYED</u> Employer _____<br>Business Address <u>1634 PEPPERTREE LN, LANSING, MI 48912</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                              |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                   | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>JOHN KAPOUSIS</b><br><b>4893 CRYSTAL CREEK LN</b><br><b>WASHINGTON, MI 48094</b>                                                                                                                                                                                                                                               |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>GENERAL MANAGER</u> Employer <u>G &amp; T AUTO PARTS</u><br>Business Address <u>54525 GRATIOT AVE, NEW BALTIMORE, MI 48051</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                                  | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>DAVID KNOTH</b><br><b>52945 CREEKSIDE DR</b><br><b>NEW BALTIMORE, MI 48047</b>                                                                                                                                                                                                                                                 |                                           | \$ <u>1,000.00</u>                   | \$ <u>1,000.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>SELF EMPLOYED</u> Employer _____<br>Business Address <u>52945 CREEKSIDE DR, NEW BALTIMORE, MI 48047</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                        |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                                  | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>PAT MASCAR</b><br><b>12246 DEMING DR</b><br><b>STERLING HEIGHTS, MI 48312</b>                                                                                                                                                                                                                                                  |                                           | \$ <u>1,000.00</u>                   | \$ <u>1,000.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>RETIRED</u> Employer _____<br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                                           |                                           |                                      |                                                                                 |

Page Subtotal 2,300.00

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

Enter this total on  
line 3a of Summary  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/2022</u><br>Name & Address:<br><b>QUIRINO DALESSANDRO</b><br><b>28117 GROESBECK HWY</b><br><b>ROSEVILLE, MI 48066</b>                                                                                                              |  | \$ <u>4,500.00</u> | \$ <u>4,500.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>LANZO CONSTRUCTION</u><br>Business Address <u>28135 GROESBECK HWY, ROSEVILLE, MI 48066</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |  |                    |                                                                                 |
| 3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/2022</u><br>Name & Address:<br><b>ANTHONY BENENATI</b><br><b>56037 ASHBROOKE DR E</b><br><b>SHELBY TWP, MI 48316</b>                                                                                                                |  | \$ <u>200.00</u>   | \$ <u>200.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>DOCTOR</u> Employer <u>OWNER</u><br>Business Address <u>46591 ROMEO PLANK RD, MACOMB, MI 48044</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser               |  |                    |                                                                                 |
| 3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/2022</u><br>Name & Address:<br><b>GREGORY IACOBELLI</b><br><b>53639 CHRISTY DR</b><br><b>NEW BALTIMORE, MI 48051</b>                                                                                                               |  | \$ <u>500.00</u>   | \$ <u>500.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ENGINEER</u> Employer <u>SELF EMPLOYED</u><br>Business Address <u>53639 CHRISTY DR, NEW BALTIMORE, MI 48051</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser  |  |                    |                                                                                 |
| 3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/2022</u><br>Name & Address:<br><b>VATE TINAJ</b><br><b>2538 RIDGECREST DR</b><br><b>SHELBY TWP, MI 48316</b>                                                                                                                       |  | \$ <u>300.00</u>   | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>BESA LLC</u><br>Business Address <u>311 E GRAND RIVER AVE, DETROIT, MI 48226</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser           |  |                    |                                                                                 |

Page Subtotal 5,500.00

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 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/2022</u><br>Name & Address:<br><b>SANDRA L HAROUTUNIAN</b><br><b>35139 BOBCEAN RD</b><br><b>CLINTON TWP, MI 48035</b>                                                                                                                     |  | \$ <u>40.00</u>  | \$ <u>40.00</u>                                                                 |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>HOUSEWIFE</u> Employer _____<br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                                  |  |                  |                                                                                 |
| 3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/2022</u><br>Name & Address:<br><b>HENRY FRENKEL</b><br><b>3062 MOON LAKE DR</b><br><b>WEST BLOOMFIELD TOWNSHIP, MI 48323</b>                                                                                                               |  | \$ <u>300.00</u> | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>SELF EMPLOYED</u> Employer <u>SELF</u><br>Business Address <u>3062 MOON LAKE DR, WEST BLOOMFIELD TOWNSHIP, MI 48323</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |  |                  |                                                                                 |
| 3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/2022</u><br>Name & Address:<br><b>EDDIE DENHA</b><br><b>6915 LAKEMONT CIR</b><br><b>WEST BLOOMFIELD TOWNSHIP, MI 48323</b>                                                                                                                |  | \$ <u>300.00</u> | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>BUSINESS</u> Employer <u>SELF</u><br>Business Address <u>6915 LAKEMONT CIR, WEST BLOOMFIELD TOWNSHIP, MI 48323</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser      |  |                  |                                                                                 |
| 3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/2022</u><br>Name & Address:<br><b>JOSEPH ARCORI</b><br><b>47507 MILONAS DR</b><br><b>SHELBY TWP, MI 48315</b>                                                                                                                             |  | \$ <u>500.00</u> | \$ <u>500.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>REAL ESTATE</u> Employer <u>OWNER</u><br>Business Address <u>47507 MILONAS DR, SHELBY TWP, MI 48315</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                 |  |                  |                                                                                 |

Page Subtotal **1,140.00**

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 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>FRANK GIANNETTI</b><br>12357 FOREST GLEN LN<br>SHELBY TWP, MI 48315                                                                                                                                                                                                                                                  |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>CONTRACTOR</u> Employer <u>SELF</u><br>Business Address <u>12357 FOREST GLEN LN, SHELBY TWP, MI 48315</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser            |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                         | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>LAWRENCE HURST</b><br>20383 SUNNINGDALE PARK<br>GROSSE POINTE WOODS, MI 48236                                                                                                                                                                                                                                        |                                           | \$ <u>200.00</u>                     | \$ <u>200.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>MR. LARRY'S CAFE</u><br>Business Address <u>1800 VERNIER RD, GROSSE POINTE WOODS, MI 48236</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                        | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>RYAN HATHAWAY</b><br>746 BALFOUR ST<br>GROSSE POINTE PARK, MI 48230                                                                                                                                                                                                                                                  |                                           | \$ <u>1,000.00</u>                   | \$ <u>1,000.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>LAWYER</u> Employer <u>GTS INC</u><br>Business Address <u>1501 SIXTH ST, DETROIT, MI 48226</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                       |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                        | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>ATHIR AMMORI</b><br>248 E GUNN RD<br>ROCHESTER, MI 48306                                                                                                                                                                                                                                                             |                                           | \$ <u>1,500.00</u>                   | \$ <u>1,500.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>BB'S LIQUOR</u><br>Business Address <u>13595 21 MILE RD, SHELBY TWP, MI 48315</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser              |                                           |                                      |                                                                                 |

Page Subtotal 2,850.00

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

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br>TIMOTHY MULLIGAN<br>17100 W 12 MILE RD<br>SOUTHFIELD, MI 48076                                                                                                                                                                                                                                                                 |                                           | \$ <u>600.00</u>                     | \$ <u>600.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>SHEET METAL WORKSERS LOCAL 80</u><br>Business Address <u>17100 W 12 MILE RD, SOUTHFIELD, MI 48076</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br>MARK HAIDAR<br>302 W MAIN ST<br>NORTHVILLE, MI 48167                                                                                                                                                                                                                                                                           |                                           | \$ <u>500.00</u>                     | \$ <u>500.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>LAWYER</u> Employer <u>SELF</u><br>Business Address <u>302 W MAIN ST, NORTHVILLE, MI 48167</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                              |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                               | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br>RAYMOND CONFER<br>12119 FOREST GLEN LN<br>SHELBY TWP, MI 48315                                                                                                                                                                                                                                                                 |                                           | \$ <u>250.00</u>                     | \$ <u>250.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>RETIRED</u> Employer _____<br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                                        |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                               | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br>RAYMOND CONTESTI<br>39209 COLUMBIA ST<br>HARRISON TWP, MI 48045                                                                                                                                                                                                                                                                |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>BUILDER</u> Employer <u>RONCELLI</u><br>Business Address <u>6471 METRO PARKWAY, STERLING HEIGHTS, MI 48312</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser              |                                           |                                      |                                                                                 |

Page Subtotal 1,650.00

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 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>THOMAS WICKERSHAM</b><br><b>14863 TOWERING OAKS DR</b><br><b>SHELBY TWP, MI 48315</b>                                                                                                                                                                                                                               |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>CONSTRUCTION</u> Employer <u>RONCELLI</u><br>Business Address <u>6471 METRO PARKWAY, STERLING HEIGHTS, MI 48312</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                        | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>JACK ODDO</b><br><b>6001 26 MILE RD</b><br><b>WASHINGTON, MI 48094</b>                                                                                                                                                                                                                                              |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>REAL ESTATE DEVELOPER</u> Employer <u>SELF</u><br>Business Address <u>6001 26 MILE RD, WASHINGTON, MI 48094</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser     |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                       | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>GEORGE SACHASH</b><br><b>53528 APPLEWOOD DR</b><br><b>SHELBY TWP, MI 48315</b>                                                                                                                                                                                                                                      |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>RETIRED</u> Employer _____<br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                                |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                       | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>FAHD ALHASSAN</b><br><b>6605 LAKE POINTE</b><br><b>SHELBY TWP, MI 48317</b>                                                                                                                                                                                                                                         |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ACCOUNTANT</u> Employer <u>SELF EMPLOYED</u><br>Business Address <u>6605 LAKE POINTE, SHELBY TWP, MI 48317</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser      |                                           |                                      |                                                                                 |

Page Subtotal 750.00

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

Enter this total on  
line 3a of Summary  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>A. JOSEPH GAROFALO</b><br>16655 MILLAR RD<br>CLINTON TWP, MI 48036                                                                                                                                                                                                                                             |                                           | \$ <u>200.00</u>                     | \$ <u>200.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>SALES</u> Employer <u>SELF EMPLOYED</u><br>Business Address <u>16655 MILLAR RD, CLINTON TWP, MI 48036</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser      |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                   | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>ANTHONY OROW</b><br>1251 ROCHESTER RD<br>TROY, MI 48083                                                                                                                                                                                                                                                        |                                           | \$ <u>1,000.00</u>                   | \$ <u>1,000.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>THE COLLISION GUYS</u><br>Business Address <u>1251 ROCHESTER RD, TROY, MI 48083</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser      |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                  | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>ANTHONY SERVITO</b><br>172 MOROSS ST<br>MT CLEMENS, MI 48043                                                                                                                                                                                                                                                   |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>MACOMB CIRCUIT COURT</u><br>Business Address <u>1 S MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                  | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>STEPHEN SWETECH</b><br>43868 SCOTER LN<br>CLINTON TWP, MI 48038                                                                                                                                                                                                                                                |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>RETIRED</u> Employer _____<br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                           |                                           |                                      |                                                                                 |

Page Subtotal **1,500.00**

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

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>JASON ABRO</b><br>55205 HEARTHSIDE DR<br>SHELBY TWP, MI 48316                                                                                                                                                                                                                                                           |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>COMMANDER OF OPS</u> Employer <u>MACOMB SHERIFF</u><br>Business Address <u>43565 ELIZABETH ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                            | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>ARMAND VELARDO</b><br>12382 FOREST GLEN LN<br>SHELBY TWP, MI 48315                                                                                                                                                                                                                                                      |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>RETIRED</u> Employer _____<br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                                    |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                           | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>RANDY LEWIS</b><br>2000 TOWN CENTER<br>SOUTHFIELD, MI 48075                                                                                                                                                                                                                                                             |                                           | \$ <u>500.00</u>                     | \$ <u>500.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>SELF EMPLOYED</u><br>Business Address <u>2000 TOWN CENTER, SOUTHFIELD, MI 48075</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser            |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                           | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>PIERRE NOFAR</b><br>2538 PORTOBELLO DR<br>TROY, MI 48083                                                                                                                                                                                                                                                                |                                           | \$ <u>250.00</u>                     | \$ <u>250.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>PK MAINTENCE</u><br>Business Address <u>2538 PORTOBELLO DR, TROY, MI 48083</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                    |                                           |                                      |                                                                                 |

Page Subtotal 1,050.00

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

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>BENEDETTO MARROCCO</b><br><b>11421 HEATHERWOOD CT</b><br><b>SHELBY TWP, MI 48315</b>                                                                                                                                                                                                                        |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>DURO CONSTRUCTION</u><br>Business Address <u>PO BOX 41, WASHINGTON, MI 48094</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser      |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>RAYMOND DEBUCK JR.</b><br><b>67587 HIDDEN OAK LN</b><br><b>WASHINGTON, MI 48095</b>                                                                                                                                                                                                                         |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>DEBUCK CONSTRUCTION</u><br>Business Address <u>6741 AUBURN RD, UTICA, MI 48317</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser    |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                               | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>ELIZABTH FORLINI</b><br><b>17064 PENROD DR</b><br><b>CLINTON TWP, MI 48035</b>                                                                                                                                                                                                                              |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>SELF EMPLOYED</u> Employer <u>SELF</u><br>Business Address <u>17064 PENROD DR, CLINTON TWP, MI 48035</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser    |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                               | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>JENNIFER KLIEMAN</b><br><b>13400 30 MILE RD</b><br><b>WASHINGTON, MI 48095</b>                                                                                                                                                                                                                              |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>JWK 2 ROMEO LLC</u><br>Business Address <u>13400 30 MILE RD, WASHINGTON, MI 48095</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |

Page Subtotal 750.00

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

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/2022</u><br>Name & Address:<br><b>JOE ORAM</b><br><b>P.O. BOX 252755</b><br><b>WEST BLOOMFIELD, MI 48325</b>                                                                                                                     |  | \$ <u>300.00</u> | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>SELF EMPLOYED</u> Employer <u>SELF</u><br>Business Address <u>P.O. BOX 252755, WEST BLOOMFIELD, 48352</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser      |  |                  |                                                                                 |
| 3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/2022</u><br>Name & Address:<br><b>SARAH P DASH</b><br><b>16632 E JEFFERSON</b><br><b>GROSSE POINTE PARK, MI 48230</b>                                                                                                             |  | \$ <u>500.00</u> | \$ <u>500.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>PRESIDENT</u> Employer <u>IHEARTMEDIA, INC</u><br>Business Address <u>100 N CENTER ST, ROYAL OAK, MI 48067</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |  |                  |                                                                                 |
| 3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/2022</u><br>Name & Address:<br><b>LAURA MOODY</b><br><b>120 MAPLETON RD</b><br><b>GROSSE POINTE FARMS, MI 48236</b>                                                                                                              |  | \$ <u>300.00</u> | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>HOUSEWIFE</u> Employer _____<br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                         |  |                  |                                                                                 |
| 3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/2022</u><br>Name & Address:<br><b>MANAF MADOUN</b><br><b>52896 SABLE CT</b><br><b>SHELBY TWP, MI 48315</b>                                                                                                                       |  | \$ <u>600.00</u> | \$ <u>600.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>PHYSICIAN</u> Employer <u>SELF</u><br>Business Address <u>52896 SABLE CT, SHELBY TWP, MI 48315</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser             |  |                  |                                                                                 |

Page Subtotal **1,700.00**

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

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>DANIEL D DEBRUIN</b><br><b>763 COACHMAN DR</b><br><b>TROY, MI 48083</b>                                                                                                                                                                                                                                             |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ASSISTANT PROSECUTOR</u> Employer <u>MACOMB COUNTY</u><br>Business Address <u>1 S MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                        | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>ROBERT A STEVENS</b><br><b>21418 RAIN TREE DR</b><br><b>MACOMB, MI 48044</b>                                                                                                                                                                                                                                        |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>SELF EMPLOYED</u><br>Business Address <u>21418 RAIN TREE DR, MACOMB, MI 48044</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser          |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                       | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>MAX FELLSMAN</b><br><b>14612 ALPENA DR</b><br><b>STERLING HEIGHTS, MI 48313</b>                                                                                                                                                                                                                                     |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>BUILDING MANAGER</u> Employer <u>CITY OF WARREN</u><br>Business Address <u>5460 ARDEN AVE, WARREN, MI 48092</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser     |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                       | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>GIOVAN B MANNINO</b><br><b>8249 PINE CREEK CT</b><br><b>SHELBY TWP, MI 48316</b>                                                                                                                                                                                                                                    |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>RETIRED</u> Employer _____<br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                                |                                           |                                      |                                                                                 |

Page Subtotal **600.00**

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

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br>LOUIS J CIOTTI<br>1315 S MAIN ST<br>ROYAL OAK, MI 48067                                                                                                                                                                                                                                                             |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>REAL ESTATE</u> Employer <u>SELF</u><br>Business Address <u>1315 S MAIN ST, ROYAL OAK, MI 48067</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser              |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                     | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br>DILJA JUNCEVIC<br>52756 BLUE RIDGE DR<br>SHELBY TWP, MI 48316                                                                                                                                                                                                                                                       |                                           | \$ <u>500.00</u>                     | \$ <u>500.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>SELF EMPLOYED</u> Employer <u>SELF</u><br>Business Address <u>52756 BLUE RIDGE DR, SHELBY TWP, MI 48316</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser      |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                    | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br>STEPHANIE STAGER<br>54821 CABRILLO DR<br>MACOMB, MI 48042                                                                                                                                                                                                                                                           |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>PROSECUTOR</u> Employer <u>MACOMB CIRCUIT COURT</u><br>Business Address <u>1 S MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                    | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br>VINCENZO CIRAULO<br>POND DR<br>CLINTON TWP, MI 48038                                                                                                                                                                                                                                                                |                                           | \$ <u>500.00</u>                     | \$ <u>500.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>RETIRED</u> Employer _____<br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                             |                                           |                                      |                                                                                 |

Page Subtotal 1,300.00

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 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>LARRY HART</b><br><b>3104 COUNTRY CLUB DR</b><br><b>ST CLAIR SHORES, MI 48082</b>                                                                                                                                                                                                                                |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>RETIRED</u> Employer _____<br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                             |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                     | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>DAVID P PICCININI</b><br><b>6101 WINDEMERE DR</b><br><b>SHELBY TWP, MI 48316</b>                                                                                                                                                                                                                                 |                                           | \$ <u>200.00</u>                     | \$ <u>200.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>LIRA TITLE AGENCY</u><br>Business Address <u>12900 HALL RD, STERLING HEIGHTS, MI 48313</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                    | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>STEPHEN T RABAUT</b><br><b>16931 19 MILE RD</b><br><b>CLINTON TWP, MI 48038</b>                                                                                                                                                                                                                                  |                                           | \$ <u>1,500.00</u>                   | \$ <u>1,500.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>SELF</u><br>Business Address <u>16931 19 MILE RD, Clinton Township, MI 48038</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser        |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                    | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>ALPHONSE M SANTINO</b><br><b>725 LAKE SHORE RD</b><br><b>GROSSE POINTE SHORES, MI 48236</b>                                                                                                                                                                                                                      |                                           | \$ <u>200.00</u>                     | \$ <u>200.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>DOCTOR</u> Employer <u>SELF EMPLOYED</u><br>Business Address <u>725 LAKE SHORE RD, GROSSE POINTE, MI 48236</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser   |                                           |                                      |                                                                                 |

Page Subtotal 2,050.00

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

Enter this total on  
line 3a of Summary  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>PAUL J TORRES</b><br><b>37230 WILLOW LN</b><br><b>CLINTON TWP, MI 48036</b>                                                                                                                                                                                                                                           |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>BUILDER DEVELOPER</u> Employer <u>SELF</u><br>Business Address <u>37230 WILLOW LN, CLINTON TWP, MI 48036</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser          |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                          | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>LAITH HANNA</b><br><b>1161 PEMBROKE DR</b><br><b>BLOOMFIELD HILLS, MI 48304</b>                                                                                                                                                                                                                                       |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>MOTOR CITY PETROLEUM</u><br>Business Address <u>15275 HALL RD, MACOMB, MI 48044</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser             |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                         | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>LISA VALERIO-NOWC</b><br><b>20761 MARVINDALE ST</b><br><b>CLINTON TWP, MI 48035</b>                                                                                                                                                                                                                                   |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>TEACHER</u> Employer <u>NATIONAL HERITAGE ACADEMIES</u><br>Business Address <u>353 CASS AVE, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                         | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>ROBERT BERG JR.</b><br><b>39850 VAN DYKE AVE</b><br><b>STERLING HEIGHTS, MI 48313</b>                                                                                                                                                                                                                                 |                                           | \$ <u>500.00</u>                     | \$ <u>500.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>SELF EMPLOYED</u><br>Business Address <u>39850 VAN DYKE AVE, STERLING HEIGHTS, MI 48313</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser  |                                           |                                      |                                                                                 |

Page Subtotal **1,250.00**

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

Enter this total on  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>JAMES BOWDEN</b><br>43833 COLUMBIA DR<br>CLINTON TWP, MI 48038                                                                                                                                                                                                                                                                   |                                           | \$ <u>500.00</u>                     | \$ <u>500.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>LAWYER</u> Employer <u>SELF</u><br>Business Address <u>120 S MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                   |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                     | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>MARK AUBREY</b><br>6200 25 MILE RD<br>SHELBY TWP, MI 48316                                                                                                                                                                                                                                                                       |                                           | \$ <u>500.00</u>                     | \$ <u>500.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>BUSINESS OWNER</u> Employer <u>MOTOR CITY PAWN</u><br>Business Address <u>26510 GRATIOT AVE, ROSEVILLE, MI 48066</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser             |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                                    | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>ROBERT A ROTONDO</b><br>4149 BERKSHIRE DR<br>STERLING HEIGHTS, MI 48314                                                                                                                                                                                                                                                          |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>CONTRACTOR</u> Employer <u>CONCORDIA CONTRACTING LLC</u><br>Business Address <u>6336 MILLETT AVE, STERLING HEIGHTS, MI 48312</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                                    | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>LOUIS ESPOSITO</b><br>33653 CLIPPER CT<br>NEW BALTIMORE, MI 48047                                                                                                                                                                                                                                                                |                                           | \$ <u>200.00</u>                     | \$ <u>200.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>RETIRED</u> Employer <u>SELF</u><br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                                       |                                           |                                      |                                                                                 |

Page Subtotal **1,350.00**

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

Enter this total on  
line 3a of Summary  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/2022</u><br>Name & Address:<br><b>NANCY SINUTKO</b><br><b>47074 WILLINGHAM WAY</b><br><b>SHELBY TWP, MI 48315</b>                                                                                                                                      |  | \$ <u>300.00</u> | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>SELF</u> Employer <u>SELF</u><br>Business Address <u>47074 WILLINGHAM WAY, SHELBY TWP, MI 48315</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                  |  |                  |                                                                                 |
| 3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/2022</u><br>Name & Address:<br><b>DARIUS DYNKOWSKI</b><br><b>19098 LIVERY CT</b><br><b>CLINTON TWP, MI 48038</b>                                                                                                                                        |  | \$ <u>150.00</u> | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>ABUTEEL</u><br>Business Address <u>150 W JEFFERSON AVE, DETROIT, MI 48226</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                               |  |                  |                                                                                 |
| 3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/2022</u><br>Name & Address:<br><b>CHRISTOPHER HOLSBEKE 11</b><br><b>66340 OMO RD</b><br><b>LENOX, MI 48050</b>                                                                                                                                         |  | \$ <u>500.00</u> | \$ <u>500.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>CONSTRUCTION</u> Employer <u>SELF</u><br>Business Address <u>231 N RIVER RD, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                |  |                  |                                                                                 |
| 3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/2022</u><br>Name & Address:<br><b>CHRISTINA MATTINEN</b><br><b>57927 EMERALD CT</b><br><b>WASHINGTON, MI 48094</b>                                                                                                                                     |  | \$ <u>150.00</u> | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>PROGRAM DIRECTOR</u> Employer <u>HENRY FORD HOSPITAL - MACOMB</u><br>Business Address <u>15855 19 MILE RD, CLINTON TWP, MI 48038</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |  |                  |                                                                                 |

Page Subtotal **1,100.00**

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 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/2022</u><br>Name & Address:<br><b>NORA FERLITO</b><br><b>37335 CASA BELLA CT</b><br><b>CLINTON TWP, MI 48036</b>                                                                                                                            |  | \$ <u>300.00</u> | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>REAL ESTATE</u> Employer <u>SELF</u><br>Business Address <u>37335 CASA BELLA CT, CLINTON TWP, MI 48036</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                |  |                  |                                                                                 |
| 3. Contribution #2      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/2022</u><br>Name & Address:<br><b>JOSEPH S PERNICANO</b><br><b>1890 KENMORE DR</b><br><b>GROSSE POINTE WOODS, MI 48236</b>                                                                                                                   |  | \$ <u>150.00</u> | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>PERNICANO LAW PLLC</u><br>Business Address <u>1890 KENMORE DR, GROSSE POINTE WOODS, MI 48236</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |  |                  |                                                                                 |
| 3. Contribution # 3      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/2022</u><br>Name & Address:<br><b>MICHELLE SMITH</b><br><b>11461 PEYTON DR</b><br><b>STERLING HEIGHTS, MI 48312</b>                                                                                                                         |  | \$ <u>100.00</u> | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>APPRAISER</u> Employer <u>SELF</u><br>Business Address <u>11461 PEYTON DR, STERLING HEIGHTS, MI 48312</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                 |  |                  |                                                                                 |
| 3. Contribution # 4      PAC Receipt? <input type="checkbox"/> YES      4. Date of Receipt <u>07/27/2022</u><br>Name & Address:<br><b>LUCIA DI CICCIO</b><br><b>6108 CENTURY CT</b><br><b>SHELBY TWP, MI 48316</b>                                                                                                                              |  | \$ <u>150.00</u> | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>HINMAN &amp; DI CICCIO PLC</u><br>Business Address <u>7755 22 MILE RD, SHELBY TWP, MI 48317</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser  |  |                  |                                                                                 |

Page Subtotal 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 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>LINDA B TORP</b><br><b>38870 RYAN CT</b><br><b>HARRISON TWP, MI 48045</b>                                                                                                                                                                                                                                      |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>RETIRED</u> Employer _____<br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                           |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                   | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>ELIZABETH A WADE</b><br><b>43438 WELLAND DR</b><br><b>CLINTON TWP, MI 48038</b>                                                                                                                                                                                                                                |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>RETIRED</u> Employer _____<br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                           |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                  | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>THOMAS J CIARAMITARO</b><br><b>42850 GARFIELD RD</b><br><b>CLINTON TWP, MI 48038</b>                                                                                                                                                                                                                           |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>SELF EMPLOYED</u><br>Business Address <u>42850 GARFIELD RD, CLINTON TWP, MI 48038</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                  | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>DOMENICO PICANO</b><br><b>44162 ASTRO DR</b><br><b>STERLING HEIGHTS, MI 48314</b>                                                                                                                                                                                                                              |                                           | \$ <u>200.00</u>                     | \$ <u>200.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWENR</u> Employer <u>PICANO'S ITALIAN GRILLE</u><br>Business Address <u>3775 ROCHESTER RD, TROY, MI 48083</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |

Page Subtotal 650.00

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 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>GIULIO FATTORE</b><br><b>52415 COVINGTON LN</b><br><b>NEW BALTIMORE, MI 48047</b>                                                                                                                                                                                                                                            |                                           | \$ <u>1,000.00</u>                   | \$ <u>1,000.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>CEO</u> Employer <u>AVI FOOD SYSTEMS</u><br>Business Address <u>2590 ELM RD NE, WARREN, OH 44483</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                         |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>PETER FUCIARELLI</b><br><b>61334 WINDWOOD CT</b><br><b>WASHINGTON, MI 48094</b>                                                                                                                                                                                                                                              |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>CEO</u> Employer <u>SEALING ENGINEERING SOLUTIONS LLC</u><br>Business Address <u>15520 19 MILE RD, CLINTON TWP, MI 48038</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                                | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>HANI KASSAB</b><br><b>812 S MAIN ST</b><br><b>ROYAL OAK, MI 48067</b>                                                                                                                                                                                                                                                        |                                           | \$ <u>1,500.00</u>                   | \$ <u>1,500.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>REAL ESTATE INVESTOR</u> Employer <u>JARS HOLDINGS LLC</u><br>Business Address <u>803 W BIG BEAVER RD, TROY, MI 48084</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser    |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                                | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>AARON GEYER</b><br><b>1722 ROSZEL ST</b><br><b>ROYAL OAK, MI 48067</b>                                                                                                                                                                                                                                                       |                                           | \$ <u>1,000.00</u>                   | \$ <u>1,000.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>SELF EMPLOYED</u> Employer _____<br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                                   |                                           |                                      |                                                                                 |

Page Subtotal **3,650.00**

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

Enter this total on  
line 3a of Summary  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>ARI ZARKIN</b><br>26478 BALLANTRAE CT<br>FARMINGTON HILLS, MI 48331                                                                                                                                                                                                                                                                |                                           | \$ <u>1,000.00</u>                   | \$ <u>1,000.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>MANAGER</u> Employer <u>LELLIS ON THE GREEN, LLC</u><br>Business Address <u>27925 GOLF POINTE BLVD, FARMINGTON HILLS, MI 48331</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                       | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>PASHKO UJKIC</b><br>38346 PHYLLIS CT<br>STERLING HEIGHTS, MI 48312                                                                                                                                                                                                                                                                 |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>SELF EMPLOYED</u> Employer <u>SELF</u><br>Business Address <u>38346 PHYLLIS CT, STERLING HEIGHTS, MI 48312</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                     |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                                      | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>NOAH LENK</b><br>13808 TIMBERVIEW DR<br>SHELBY TWP, MI 48315                                                                                                                                                                                                                                                                       |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>APPRAISER</u> Employer <u>SELF EMPLOYED</u><br>Business Address <u>13808 TIMBERVIEW DR, SHELBY TWP, MI 48315</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                   |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                                      | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>RAID HANNA</b><br>6514 S LINDEN RD<br>FLINT, MI 48507                                                                                                                                                                                                                                                                              |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>GROCERY</u><br>Business Address <u>6514 S LINDEN RD, FLINT, MI 48507</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                     |                                           |                                      |                                                                                 |

Page Subtotal **1,900.00**

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

Enter this total on  
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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br>ROGER CANZANO<br>2595 LAPEER RD<br>AUBURN HILLS, MI 48326                                                                                                                                                                                                                                                         |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>CANZO LAW</u><br>Business Address <u>2595 LAPEER RD, AUBURN HILLS, MI 48326</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser       |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                   | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br>TORY WALSH<br>79720 NORTH KIDDER ROAD<br>ROMEO, MI 48065                                                                                                                                                                                                                                                          |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>RETAIL</u> Employer <u>RETAIL</u><br>Business Address <u>79720 NORTH KIDDER ROAD, ROMEO, MI 48065</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser          |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                  | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br>ALVIN KONJA<br>7685 WINDGATE CIR<br>WEST BLOOMFIELD TOWNSHIP, MI 48323                                                                                                                                                                                                                                            |                                           | \$ <u>500.00</u>                     | \$ <u>500.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>SELF EMPLOYED</u> Employer <u>SELF</u><br>Business Address <u>29580 NORTHWESTERN HWY, SOUTHFIELD, MI 48034</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                  | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br>ANTHONY NARDONE<br>54805 WOODCREEK BLVD<br>SHELBY TWP, MI 48315                                                                                                                                                                                                                                                   |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>NARDONE LAW</u><br>Business Address <u>14 1ST ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser            |                                           |                                      |                                                                                 |

Page Subtotal 1,100.00

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 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>MOHAMMED SALAMI</b><br><b>5883 JACKELYN CT</b><br><b>WASHINGTON, MI 48094</b>                                                                                                                                                                                                                                                    |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OUTSIDE SALES</u> Employer <u>CARTER LUMBER</u><br>Business Address <u>46401 ERB DR, MACOMB, MI 48042</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                        |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                     | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>TED MCGREGOR</b><br><b>38419 WOOSTER STREET</b><br><b>CLINTON TWP, MI 48036</b>                                                                                                                                                                                                                                                  |                                           | \$ <u>750.00</u>                     | \$ <u>750.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>SELF EMPLOYED</u> Employer <u>SELF</u><br>Business Address <u>38419 WOOSTER STREET, CLINTON TWP, MI 48036</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                    |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                                    | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>DONNY PALUSHAJ</b><br><b>3432 SUSSEX DR</b><br><b>ROCHESTER, MI 48306</b>                                                                                                                                                                                                                                                        |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>SELF EMPLOYED</u> Employer <u>SELF</u><br>Business Address <u>3432 SUSSEX DR, ROCHESTER, MI 48306</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                            |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                                    | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>ROBERT OIRAINO</b><br><b>18 WOODWARD HEIGHTS</b><br><b>PLEASANT RIDGE, MI 48069</b>                                                                                                                                                                                                                                              |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>RODNICK UNGER &amp; PIRAINO PC</u><br>Business Address <u>3280 E THIRTEEN MILE RD, WARREN, MI 48092</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |

Page Subtotal **1,500.00**

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 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>JEROME VAN NESTE</b><br><b>45455 FOX LN E</b><br><b>SHELBY TWP, MI 48317</b>                                                                                                                                                                                                                                                |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>SUPPLIER</u> Employer <u>GENERAL MOTORS</u><br>Business Address <u>45455 FOX LN E, SHELBY TWP, MI 48317</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                 |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>ROBERT KATTULA</b><br><b>4306 BRIGHTWOOD DR</b><br><b>TROY, MI 48085</b>                                                                                                                                                                                                                                                    |                                           | \$ <u>250.00</u>                     | \$ <u>250.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>SELF EMPLOYED</u> Employer <u>SELF</u><br>Business Address <u>4306 BRIGHTWOOD DR, TROY, MI 48085</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                        |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                               | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>FRANK MARINO</b><br><b>45676 VAN DYKE AVE</b><br><b>UTICA, MI 48317</b>                                                                                                                                                                                                                                                     |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>MACOMB RESTAURANT SUPPLY</u><br>Business Address <u>45676 VAN DYKE AVE, UTICA, MI 48317</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser           |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                               | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>TONYA GOETZ</b><br><b>1363 PEACHTREE DR</b><br><b>TROY, MI 48083</b>                                                                                                                                                                                                                                                        |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>MACOMB COUNTY PROSECUTOR'S OFFICE</u><br>Business Address <u>1 S MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |

Page Subtotal 700.00

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

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>JULIA ZALEWSKI</b><br><b>3975 TROWBRIDGE ST</b><br><b>HAMTRAMCK, MI 48212</b>                                                                                                                                                                                                                                                           |                                           | \$ <u>450.00</u>                     | \$ <u>450.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>STUDENT</u> Employer <u>SELF</u><br>Business Address <u>3975 TROWBRIDGE ST, HAMTRAMCK, MI 48212</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                     |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                            | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>PAMELA BROWN</b><br><b>22097 BEECHWOOD AVE</b><br><b>EASTPOINTE, MI 48021</b>                                                                                                                                                                                                                                                           |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ASSISTANT PROSECUTOR</u> Employer <u>MACOMB COUNTY PROSECUTOR'S OFFICE</u><br>Business Address <u>1 S MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                                           | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>TED METRY</b><br><b>300 MAPLE PARK BLVD</b><br><b>STE. 304</b><br><b>ST CLAIR SHORES, MI 48081</b>                                                                                                                                                                                                                                      |                                           | \$ <u>500.00</u>                     | \$ <u>500.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>SELF</u><br>Business Address <u>300 MAPLE PARK BLVD, STE. 304, ST CLAIR SHORES, MI 48081</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                   |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                                           | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>ERIC ESSHAKI</b><br><b>1914 WITHERBEE DR</b><br><b>TROY, MI 48084</b>                                                                                                                                                                                                                                                                   |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>SELF</u><br>Business Address <u>38500 WOODWARD AVE, BLOOMFIELD HILLS, MI 48304</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                             |                                           |                                      |                                                                                 |

Page Subtotal 1,250.00

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

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A**

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br>JOHANNA DELP<br>1432 HARVARD RD<br>GROSSE POINTE, MI 48230                                                                                                                                                                                                                                                                                  |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>VICTIM ADVOCATE</u> Employer <u>MACOMB COUNTY PROSECUTOR'S OFFICE</u><br>Business Address <u>1 S MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser       |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                             | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br>JUSTIN POLLARD<br>39676 MEMORY LN<br>HARRISON TWP, MI 48045                                                                                                                                                                                                                                                                                 |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>MACOMB COUNTY</u><br>Business Address <u>1 S MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                  |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                                            | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br>ONORIO D'AGOSTINI<br>61403 BARCLAY<br>STE. 800<br>WASHINGTON, MI 48094                                                                                                                                                                                                                                                                      |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>BUILDER/DEVELOPER</u> Employer <u>D.C. INVESTMENT GROUP, INC</u><br>Business Address <u>13425 19 MILE RD, STERLING HEIGHTS, MI 48313</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                                            | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br>MICHAEL DEBUSSCHER<br>53668 HERITAGE LN<br>NEW BALTIMORE, MI 48047                                                                                                                                                                                                                                                                          |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>RETIRED</u> Employer <u>RETIRED</u><br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                                            |                                           |                                      |                                                                                 |

Page Subtotal 750.00

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 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>SAMANTHA MACKERETH</b><br><b>816 S CAMPBELL RD</b><br><b>ROYAL OAK, MI 48067</b>                                                                                                                                                                                                                                                  |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>INTERN</u> Employer <u>MACOMB COUNTY</u><br>Business Address <u>1 S MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                             |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                      | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>RAYMOND AHONEN</b><br><b>18460 RANIER DR</b><br><b>MACOMB, MI 48042</b>                                                                                                                                                                                                                                                           |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>PUBLIC SAFETY LIASON</u> Employer <u>BELFOR PROPERTY RESTORATION</u><br>Business Address <u>18460 RANIER DR, MACOMB, MI 48042</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                                     | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>PATRICK COLETTA</b><br><b>1153 DEVONSHIRE RD</b><br><b>GROSSE POINTE PARK, MI 48230</b>                                                                                                                                                                                                                                           |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>MACOMB COUNTY</u><br>Business Address <u>1 S MAIN ST, FLOOR 4, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                  |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                                     | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>RICHARD NELSON</b><br><b>407 CLOVERLY RD</b><br><b>GROSSE POINTE FARMS, MI 48236</b>                                                                                                                                                                                                                                              |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>MACOMB COUNTY</u><br>Business Address <u>1 S MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                           |                                           |                                      |                                                                                 |

Page Subtotal 600.00

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 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>NED PICCININI</b><br>4655 LOCKWOOD DR<br>WASHINGTON, MI 48094                                                                                                                                                                                                                                                        |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>CEO</u> Employer <u>MCM LEARNING INC</u><br>Business Address <u>31791 SHERMAN AVE, MADISON HEIGHTS, MI 48071</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser     |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                         | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>MICHAEL BALIAN</b><br>352 KIRKSWAY LN<br>SUITE 350<br>ORION TWP, MI 48362                                                                                                                                                                                                                                            |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>SELF</u><br>Business Address <u>40950 WOODWARD AVE, STE 350, BLOOMFIELD HILLS, MI 48304</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                        | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>FRANCES MURPHY</b><br>27735 JEFFERSON AVE<br>ST CLAIR SHORES, MI 48081                                                                                                                                                                                                                                               |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>FRAN MURPHY</u><br>Business Address <u>27735 JEFFERSON AVE, ST CLAIR SHORES, MI 48081</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser   |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                        | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>MIKE ABRO</b><br>1374 TRACEKY DR<br>ROCHESTER HILLS, MI 48306                                                                                                                                                                                                                                                        |                                           | \$ <u>450.00</u>                     | \$ <u>450.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>BUSCEMIS</u><br>Business Address <u>8315 HALL RD, UTICA, MI 48317</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                          |                                           |                                      |                                                                                 |

Page Subtotal **1,050.00**

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

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**ITEMIZED CONTRIBUTIONS  
SCHEDULE 1A  
CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>JOSEPH ZAGO</b><br>29438 JEFFERSON AVE<br>ST CLAIR SHORES, MI 48081                                                                                                                                                                                                                                              |                                           | \$ <u>1,500.00</u>                   | \$ <u>1,500.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>THE CARPET GUYS, LLC</u><br>Business Address <u>977 14 MILE RD, TROY, MI 48083</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser         |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                     | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>JOHN RAXE</b><br>500 WOODWARD AVE<br>DETROIT, MI 48226                                                                                                                                                                                                                                                           |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>CLARK HILL PAC</u><br>Business Address <u>500 WOODWARD AVE, DETROIT, MI 48226</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser       |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                    | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>CAROLE A MURRAY</b><br>42489 CLINTON PL DR<br>CLINTON TWP, MI 48038                                                                                                                                                                                                                                              |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>SELF EMPLOYED</u><br>Business Address <u>42489 CLINTON PL DR, CLINTON TWP, MI 48038</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                    | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>ROBERT KAISER</b><br>777 CHICAGO RD<br>STE 1<br>TROY, MI 48083                                                                                                                                                                                                                                                   |                                           | \$ <u>1,500.00</u>                   | \$ <u>1,500.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>GALLAGHER-KAISER CORPORATION</u><br>Business Address <u>777 CHICAGO RD, TROY, MI 48083</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |

Page Subtotal **3,450.00**

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

**CANDIDATE COMMITTEE**

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br>DORAID B ELDER<br>1360 PORTER ST<br>STE. 200<br>DEARBORN, MI 48124                                                                                                                                                                                                                                                    |                                           | \$ <u>1,500.00</u>                   | \$ <u>1,500.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>ELDER BRINKMAN LAW P.C.</u><br>Business Address <u>1360 PORTER ST, DEARBORN, MI 48124</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                       | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br>TODD D SCMITZ<br>23083 SAXONY AVE<br>EASTPOINTE, MI 48021                                                                                                                                                                                                                                                             |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>MACOMB COUNTY</u><br>Business Address <u>1 S MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser            |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                      | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br>MIKE CIARAMITARO<br>52462 CHESWICK CT<br>SHELBY TWP, MI 48315                                                                                                                                                                                                                                                         |                                           | \$ <u>1,500.00</u>                   | \$ <u>1,500.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>PLUMBING CONTRACTOR</u> Employer <u>MR. ROOTER</u><br>Business Address <u>51162 MILANO DR, MACOMB, MI 48042</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser    |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                      | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br>DEAN C METRY<br>34740 SOUTHBOUND GRATIOT AVE<br>CLINTON TWP, MI 48035                                                                                                                                                                                                                                                 |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>MACOMB COUNTY</u><br>Business Address <u>81 N MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser           |                                           |                                      |                                                                                 |

Page Subtotal 3,450.00

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

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>RICHARD N GOICH</b><br><b>43932 ROBINSON RIDGE</b><br><b>CLINTON TWP, MI 48038</b>                                                                                                                                                                                                                                          |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>RETIRED</u> Employer _____<br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                                        |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>MARJORIE A WALLER</b><br><b>PO BOX 180758</b><br><b>SHELBY TOWNSHIP, MI 48318</b>                                                                                                                                                                                                                                           |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>HOUSEWIFE</u> Employer _____<br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                                      |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                               | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>MARY BOMMARITO</b><br><b>11342 COVERED BRIDGE LN</b><br><b>BRUCE TWP, MI 48065</b>                                                                                                                                                                                                                                          |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>BUILDING OFFICIAL</u> Employer <u>SELF EMPLOYED</u><br>Business Address <u>11342 COVERED BRIDGE LN, BRUCE TWP, MI 48065</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                               | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>ONORIO MOSCONE</b><br><b>55459 AMBASSADOR CT</b><br><b>SHELBY TWP, MI 48316</b>                                                                                                                                                                                                                                             |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>PRESIDENT</u> Employer <u>DEERCREEK CONSTRUCTION</u><br>Business Address <u>57125 DEER CREEK CT, WASHINGTON, MI 48094</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser   |                                           |                                      |                                                                                 |

Page Subtotal 600.00

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

1. Committee I.D. Number 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/27/2022</u> |                                                                                 |
| Name & Address:<br><b>MARIO EVANGELISTA</b><br><b>69263 LAKE POINT CT</b><br><b>ROMEO, MI 48065</b>                                                                                                                                                                                                                                                                  |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>BUILDER/OWNER</u> Employer <u>CASSINO BUILDING &amp; DEVELOPMENT</u><br>Business Address <u>42735 VAN DYKE AVE, STERLING HEIGHTS, MI 48314</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                                   | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/28/2022</u> |                                                                                 |
| Name & Address:<br><b>SRMD BATRIS</b><br><b>6306 SANTA ANITA DR</b><br><b>SAGINAW, MI 48603</b>                                                                                                                                                                                                                                                                      |                                           | \$ <u>600.00</u>                     | \$ <u>600.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>SELF EMPLOYED</u> Employer _____<br>Business Address _____<br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                                                     |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                                                  | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/28/2022</u> |                                                                                 |
| Name & Address:<br><b>JAMES J SULLIVAN</b><br><b>1 KERCHEVAL AVE</b><br><b>GROSSE POINTE FARMS, MI 48236</b>                                                                                                                                                                                                                                                         |                                           | \$ <u>450.00</u>                     | \$ <u>450.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>LAWYER</u> Employer <u>SELF</u><br>Business Address <u>1 KERCHEVAL AVE, GROSSE POINTE FARMS, MI 48236</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                      |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                                                  | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/28/2022</u> |                                                                                 |
| Name & Address:<br><b>KYMBERLY M SHINNEMAN</b><br><b>8620 GOODALE AVE</b><br><b>UTICA, MI 48317</b>                                                                                                                                                                                                                                                                  |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>MACOMB COUNTY PROSECUTORS OFFICE</u><br>Business Address <u>1 S MAIN STREET, MOUNT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser              |                                           |                                      |                                                                                 |

Page Subtotal **1,350.00**

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 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/28/2022</u> |                                                                                 |
| Name & Address:<br><b>JAMES C THOMAS</b><br>49544 COMPASS POINT DR<br>NEW BALTIMORE, MI 48047                                                                                                                                                                                                                                         |                                           | \$ <u>500.00</u>                     | \$ <u>500.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>SELF</u><br>Business Address <u>30101 NORTHWESTERN HWY, FARMINGTON HILLS, MI 48334</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                    | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/28/2022</u> |                                                                                 |
| Name & Address:<br><b>STEVEN G FREERS</b><br>17757 14 MILE RD<br>FRASER, MI 48026                                                                                                                                                                                                                                                     |                                           | \$ <u>100.00</u>                     | \$ <u>100.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>SELF</u><br>Business Address <u>17757 14 MILE RD, FRASER, MI 48026</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                 |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                   | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/29/2022</u> |                                                                                 |
| Name & Address:<br><b>FRANCIS MCNELIS</b><br>75 N MAIN ST<br>MT CLEMENS, MI 48043                                                                                                                                                                                                                                                     |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>MACOMB COUNTY</u><br>Business Address <u>75 N MAIN ST, MT CLEMENS, MI 48043</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser        |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                   | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>07/29/2022</u> |                                                                                 |
| Name & Address:<br><b>MAGGIE VARNEY</b><br>30130 HARPER<br>ST CLAIR SHORES, MI 48082                                                                                                                                                                                                                                                  |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>GO GREEN SALON</u><br>Business Address <u>30130 HARPER, ST CLAIR SHORES, MI 48082</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser     |                                           |                                      |                                                                                 |

Page Subtotal **1,050.00**

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 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/01/2022</u> |                                                                                 |
| Name & Address:<br><b>MARK D MILESKI</b><br><b>52833 WINSOME LN</b><br><b>NEW BALTIMORE, MI 48051</b>                                                                                                                                                                                                                                                    |                                           | \$ <u>150.00</u>                     | \$ <u>150.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>COURT OFFICER</u> Employer <u>STERLING HEIGHTS DODGE</u><br>Business Address <u>40111 VAN DYKE AVE, STERLING HEIGHTS, MI 48313</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                       | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/02/2022</u> |                                                                                 |
| Name & Address:<br><b>MICHAEL E TORRES</b><br><b>5865 JACKELYN CT</b><br><b>WASHINGTON, MI 48094</b>                                                                                                                                                                                                                                                     |                                           | \$ <u>7,150.00</u>                   | \$ <u>7,150.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>PRIVATE INVESTIGATOR</u> Employer <u>EYE SPY INVESTIGATIONS</u><br>Business Address <u>32059 UTICA RD, FRASER, MI 48026</u><br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser        |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                                      | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/02/2022</u> |                                                                                 |
| Name & Address:<br><b>JAMES CHO</b><br><b>565 LONG LAKE PINE COURT,</b><br><b>BLOOMFIELD TWP, MI 48302</b>                                                                                                                                                                                                                                               |                                           | \$ <u>7,150.00</u>                   | \$ <u>7,150.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>DOCTOR</u> Employer <u>SELF EMPLOYED</u><br>Business Address <u>43900 GARFIELD RD, CLINTON TWP, MI 48038</u><br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                       |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                                      | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/02/2022</u> |                                                                                 |
| Name & Address:<br><b>MICHAEL NOVARA</b><br><b>888 W BIG BEAVER RD</b><br><b>TROY, MI 48084</b>                                                                                                                                                                                                                                                          |                                           | \$ <u>7,000.00</u>                   | \$ <u>7,000.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>NOVARA TEIJA CATENNACCI PLLC</u><br>Business Address <u>888 W BIG BEAVER RD, TROY, MI 48084</u><br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser           |                                           |                                      |                                                                                 |

Page Subtotal 21,450.00

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 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/02/2022</u> |                                                                                 |
| Name & Address:<br><b>GARY NOVARA</b><br><b>888 W BIG BEAVER RD</b><br><b>TROY, MI 48084</b>                                                                                                                                                                                                                                                                      |                                           | \$ <u>7,000.00</u>                   | \$ <u>7,000.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY/PARTNER</u> Employer <u>NOVARA TEIJA CATENNACCI PLLC</u><br>Business Address <u>888 W BIG BEAVER RD, SUITE 600, TROY, MI 48084</u><br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                                                                                                | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/02/2022</u> |                                                                                 |
| Name & Address:<br><b>PAUL O CATENACCI</b><br><b>888 W BIG BEAVER RD</b><br><b>TROY, MI 48084</b>                                                                                                                                                                                                                                                                 |                                           | \$ <u>7,000.00</u>                   | \$ <u>7,000.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY/PARTNER</u> Employer <u>NOVARA TEIJA CATENNACCI PLLC</u><br>Business Address <u>888 W BIG BEAVER RD, SUITE 600, TROY, MI 48084</u><br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                                                                                               | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/02/2022</u> |                                                                                 |
| Name & Address:<br><b>JEFFREY M SANGSTER</b><br><b>34060 JEFFERSON AVE</b><br><b>ST CLAIR SHORES, MI 48082</b>                                                                                                                                                                                                                                                    |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>ATTORNEY</u> Employer <u>SELF</u><br>Business Address <u>400 RENAISSANCE CENTER, DETROIT, MI 48243</u><br>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                      |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                                                                                               | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/03/2022</u> |                                                                                 |
| Name & Address:<br><b>MELISSA PEHLIS</b><br><b>52101 MONACO DR</b><br><b>MACOMB, MI 48042</b>                                                                                                                                                                                                                                                                     |                                           | \$ <u>7,150.00</u>                   | \$ <u>7,150.00</u>                                                              |
| 5. If over \$100.00 cumulative, please provide:<br>Occupation <u>OWNER</u> Employer <u>PEHLIS PROPERTIES</u><br>Business Address <u>52101 MONACO DR, MACOMB, MI 48042</u><br>Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                    |                                           |                                      |                                                                                 |

Page Subtotal **21,450.00**

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 139858  
2. Committee Name CTE PETER J. LUCIDO FOR PROSECUTOR

| 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? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/04/2022</u> |                                                                                 |
| Name & Address:<br><b>ENRICO ROSSELLI</b><br><b>57303 SCENIC HOLLOW DR</b><br><b>WASHINGTON, MI 48094</b>                                                                                                                                                                             |                                           | \$ <u>300.00</u>                     | \$ <u>300.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:                                                                                                                                                                                                                                       |                                           |                                      |                                                                                 |
| Occupation <u>OWNER</u> Employer <u>DENISE T BEAUPRE-ROSSELLI</u>                                                                                                                                                                                                                     |                                           |                                      |                                                                                 |
| Business Address <u>57303 SCENIC HOLLOW DR, WASHINGTON, MI 48094</u>                                                                                                                                                                                                                  |                                           |                                      |                                                                                 |
| Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                                                                                                     |                                           |                                      |                                                                                 |
| 3. Contribution #2                                                                                                                                                                                                                                                                    | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt <u>08/09/2022</u> |                                                                                 |
| Name & Address:<br><b>DAVID FEMMININEO</b><br><b>110 S MAIN ST</b><br><b>MT CLEMENS, MI 48043</b>                                                                                                                                                                                     |                                           | \$ <u>500.00</u>                     | \$ <u>500.00</u>                                                                |
| 5. If over \$100.00 cumulative, please provide:                                                                                                                                                                                                                                       |                                           |                                      |                                                                                 |
| Occupation <u>ATTORNEY</u> Employer <u>FEMMININEO ATTORNEYS PLLC</u>                                                                                                                                                                                                                  |                                           |                                      |                                                                                 |
| Business Address <u>110 S MAIN ST, MT CLEMENS, MI 48043</u>                                                                                                                                                                                                                           |                                           |                                      |                                                                                 |
| Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser                                                                                                                                     |                                           |                                      |                                                                                 |
| 3. Contribution # 3                                                                                                                                                                                                                                                                   | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt _____             |                                                                                 |
| Name & Address: _____                                                                                                                                                                                                                                                                 |                                           | \$ _____                             | \$ _____                                                                        |
| 5. If over \$100.00 cumulative, please provide:                                                                                                                                                                                                                                       |                                           |                                      |                                                                                 |
| Occupation _____ Employer _____                                                                                                                                                                                                                                                       |                                           |                                      |                                                                                 |
| Business Address _____                                                                                                                                                                                                                                                                |                                           |                                      |                                                                                 |
| Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                                                                                                                |                                           |                                      |                                                                                 |
| 3. Contribution # 4                                                                                                                                                                                                                                                                   | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt _____             |                                                                                 |
| Name & Address: _____                                                                                                                                                                                                                                                                 |                                           | \$ _____                             | \$ _____                                                                        |
| 5. If over \$100.00 cumulative, please provide:                                                                                                                                                                                                                                       |                                           |                                      |                                                                                 |
| Occupation _____ Employer _____                                                                                                                                                                                                                                                       |                                           |                                      |                                                                                 |
| Business Address _____                                                                                                                                                                                                                                                                |                                           |                                      |                                                                                 |
| Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser                                                                                                                                                |                                           |                                      |                                                                                 |

Page Subtotal **800.00**

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

**114,790.00**

Enter this total on  
line 3a of Summary  
Page.



**ITEMIZED EXPENDITURES**  
**SCHEDULE 1B**  
**CANDIDATE COMMITTEE**

1. Committee I. D. Number **139858**  
2. Committee Name **CTE PETER J. LUCIDO FOR PROSECUTOR**

| 3. Name and address of person or vendor to whom paid                                                                                                                                      | 4. Purpose (Required Information)                                                                                                                                                     | 5. Date                   | 6. Amount           |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|---------------------|
| <b>Expenditure #1</b><br>Name <b>FRANK KRAUSE</b><br><br>Address<br><b>19995 RIVERWOODS CT</b><br><b>MACOMB, MI 48044</b><br><br><input checked="" type="checkbox"/> Fund Raiser          | Purpose: <b>DJ</b><br><br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement                                      | <b>07/26/2022</b><br>Date | \$ <b>400.00</b>    |
| <b>Expenditure #2</b><br>Name <b>BRAD SHAW</b><br><br>Address<br><br><br><input checked="" type="checkbox"/> Fund Raiser                                                                  | Purpose: <b>PHOTOGRAPHY</b><br><br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement                             | <b>07/26/2022</b><br>Date | \$ <b>250.00</b>    |
| <b>Expenditure #3</b><br>Name <b>THE PALAZZO GRANDE</b><br><br>Address<br><b>54660 VAN DYKE AVE</b><br><b>SHELBY TWP, MI 48316</b><br><br><input checked="" type="checkbox"/> Fund Raiser | Purpose: <b>PALAZZO GRANDE HALL</b><br><br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement                     | <b>07/27/2022</b><br>Date | \$ <b>17,052.00</b> |
| <b>Expenditure #4</b><br>Name <b>ANEDOT</b><br><br>Address<br><b>15985 CANAL RD</b><br><b>CLINTON TWP, MI 48038</b><br><br><input type="checkbox"/> Fund Raiser                           | Purpose: <b>BANK FEES</b><br><br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement<br><br>Memo Itemization Below | <b>07/31/2022</b><br>Date | \$ <b>747.40</b>    |
| <b>Expenditure #5</b><br>Name <b>RWB PARKES &amp; RECREATION</b><br><br>Address<br><b>361 MORTON ST</b><br><b>ROMEO, MI 48065</b><br><br><input type="checkbox"/> Fund Raiser             | Purpose: <b>ROMEO PEACH FESTIVAL PARADE</b><br><br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement             | <b>08/29/2022</b><br>Date | \$ <b>400.00</b>    |

Subtotal this page **18,849.40**  
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 **139858**  
2. Committee Name **CTE PETER J. LUCIDO FOR PROSECUTOR**

| 3. Name and address of person or vendor to whom paid                                                                                                                        | 4. Purpose (Required Information)                                                                                                                                                                        | 5. Date                   | 6. Amount          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|--------------------|
| Expenditure #1<br>Name <b>ROMEO LIONS CLUB</b><br><br>Address<br><b>269 E WASHINGTON ST</b><br><b>ROMEO, MI 48065</b><br><br><input type="checkbox"/> Fund Raiser           | Purpose: <u>BANNER FOR ROMEO PEACH FESTIVAL</u><br><br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement                            | <u>08/29/2022</u><br>Date | \$ <u>200.00</u>   |
| Expenditure #2<br>Name <b>BULTYNCK &amp; CO.</b><br><br>Address<br><b>15985 CANAL ROAD</b><br><b>CLINTON TOWNSHIP, LM 48038</b><br><br><input type="checkbox"/> Fund Raiser | Purpose: <u>BOOK KEEPING</u><br><br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement                                               | <u>10/01/2022</u><br>Date | \$ <u>1,200.00</u> |
| Expenditure #3<br>Name <b>THE ITALIAN TRIBUNE</b><br><br>Address<br><b>PO BOX 380407</b><br><b>CLINTON TOWNSHIP, LM 48038</b><br><br><input type="checkbox"/> Fund Raiser   | Purpose: <u>ADVERTISING</u><br><br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement                                                | <u>10/17/2022</u><br>Date | \$ <u>210.00</u>   |
| Expenditure #4<br>Name<br><br>Address<br><br><br><input type="checkbox"/> Fund Raiser                                                                                       | Purpose: _____<br><br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement<br><br><a href="#">Click Here for Memo Itemization Type</a> | _____<br>Date             | \$ _____           |
| Expenditure #5<br>Name<br><br>Address<br><br><br><input type="checkbox"/> Fund Raiser                                                                                       | Purpose: _____<br><br><input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement<br><br><a href="#">Click Here for Memo Itemization Type</a> | _____<br>Date             | \$ _____           |

Subtotal this page **1,610.00**  
Grand Total of all Schedules 1B  
(Complete on last page of Schedule) **20,459.40**

Enter this total  
on line 8a of  
Summary Page



**FUND RAISER SCHEDULE 1F  
CANDIDATE COMMITTEE**

1. Committee I.D. Number **139858**  
2. Committee Name **CTE PETER J. LUCIDO FOR PROSECUTOR**

**- USE A SEPARATE SHEET FOR EACH EVENT -**

|                                                 |                                                                                              |                                                                     |                                                                                                                                                                                                               |
|-------------------------------------------------|----------------------------------------------------------------------------------------------|---------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 3. Date Event Was Held<br><br><b>07/27/2022</b> | 4. Number of Individuals Attending or Participating (whichever is greater)<br><br><b>200</b> | 5. Type of Fund Raising Activity<br><br><b>BIRTHDAY CELEBRATION</b> | 6. Address and Name (If any) of the place where the activity was held.<br><b>THE PALAZZO GRANDE</b><br><b>54660 VAN DYKE AVE</b><br><b>SHELBY TWP, MI 48316</b><br><input type="checkbox"/> Private Residence |
|-------------------------------------------------|----------------------------------------------------------------------------------------------|---------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

7. Total Contributions **40,040.00**  
8. Other Receipts **0.00**  
9. Gross Receipts (Add lines 7 and 8) **40,040.00**  
10. Total Cost of Event **17,052.00**  
(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.