

CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

| Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate. | | 3. This Statement covers From: 10/21/2022 to 12/31/2022 | | | | |
|--|--|---|---|--|--|--|
| 1. Committee I.D. Number | | 4. Candidate Last Name | First Name | M.I. | | |
| 139410 | | Droiet | Leon | С | | |
| | | 4a. Office Sought Including District # or Community Served (If applicable) | | | | |
| 2. Committee Name | | Treasurer | | | | |
| CTE Leon Drolet | | 4b. County of Residence MACOMB | | | | |
| 5. Committee's Mailing Address | | 6. Treasurer's Name & Residential Address | | | | |
| 46116 Lookout Drive | | Suzanne Waltman | | | | |
| Macomb Township, MI 48044 | | 22615 Francis | | | | |
| | St. Clair Shores, MI 48082 | | | | | |
| Area Code and Phone (586) 321-5933 | | | • | | | |
| If the address in this box is different from the comm | ittee | | | | | |
| mailing address on the Statement of Organization, r be sent to this address by the filing official. | nail may | Area Code & Phone (586) 214-6988 | | | | |
| 7. Treasurer's Business Address | | Designated Record Keeper's Name and Address (If the committee has a Designated Record Keeper) | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Area Code and Phone | | Area Code and Phone | | | | |
| 9. TYPE OF STATEMENT | | | 9e. Dissolution of Candida | te Committee | | |
| 9a. Pre-Election OR 9b. Post-Election | Required ONLY if candidate is not on the ballot for the | | By checking this item I/We certify any outstanding debt | | | |
| Pre-Election or Post-Election Statement relates to: | current year: | | by the committee to the cand by discharged and forgiven, a the committee. The committee | idate or his or her spouse is here and no longer collectible from | | |
| Primary | July Quart | erly | the committee. The committee owes no lates fees or has any | | | |
| | October Q | uarteriv | | | | |
| General | | uditorty | Further, if the dissolution can considered a request for the F | annot be granted, that this be | | |
| Convention | | | sonsidered a request for the r | reporting waiver. | | |
| Special | ^{9c.} XAnnua | l Statement (2022) | Effective date of dis | ssolution | | |
| School | | Coverage Year | | | | |
| Caucus | 9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being | | | lual funds must be reported on | | |
| | amend | led.) | Schedule 1B and the Summa | ну гаде. | | |
| Date of Election, Convention or Caucus | | | | | | |
| | | | | | | |
| | | | | | | |
| 10. Verification: I/We certify that all reasonable dilige | ence was used | in the preparation of this stateme | ent and attached schedules (if | anv) and to the best of | | |
| mylour knowledge and belief the contents are true, a | accurate and co | mplete. | | •, | | |
| Current Treasurer or Designated Record keeper Suzanne Walt Type or Print Name | man | , Auga U Signature | N COLD MUDate | 01.10-2023 | | |
| | | | | | | |
| | | | | | | |
| Authority granted under P.A. 388 of 1976 | | Signature | | | | |

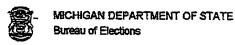


| 1. Committee I.D. Number | 139410-0 | |
|--------------------------|----------|--|
|--------------------------|----------|--|

2. Committee Name CTE LEON DROLET

SUMMARY PAGE CANDIDATE COMMITTEE

| RECEIPTS | Column i This Períod | | Column II Cumulative this election cycle | |
|---|-------------------------|-----------|---|--|
| 3. Contributions | | 11,50 | | |
| a. Itemized (Schedule 1A - Column 6) | (3a.) \$ | 0.00 | | |
| b. Uniternized (less than \$20.01 each - no Schedule) | (3b.) \$ | 0.00 | | |
| c. Subtotal of "Contributions" | (3c.) \$ | 0.00 | (18.) \$26475.00_ | |
| 4. Other Receipts (Schedule 1A -1, Column 6) | (4.) \$ | 0.00 | (19.) \$ | |
| 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) | (5.) \$ | 0.00 | (20.) \$26475.00 | |
| IN-KIND CONTRIBUTIONS & EXPENDITURES | | | | |
| 6. In-Kind Contributions (Schedule 1-IK, Column 7) | (6.) \$ | 0.00 | (21.) \$ | |
| 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) | (7.) \$ | 0.60 | (22.) \$0.00 | |
| EXPENDITURES | | | | |
| 8. Expenditures | | | | |
| a. Itemized (Schedule 1B, Column 6) | (8a.) \$ | 0.00 | | |
| b. Itemized Get-Out-the-Vote (Schedule 1B-G) | (8b.) \$ | 0.00 | | |
| c, Uniternized (less than \$50.01 each - no Schedule) | (8c.) \$ | 0.00 | | |
| 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) | (9.) \$ | 0.00 | (23.) \$ 30013.68 | |
| INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) | | | | |
| 10. Disbursements a. Itemized (Schedule 1C, Column 6) | (10a.) \$ | 0.00 | | |
| b. Unitemized (less than \$50.01 each - no Schedule) | (10b.) \$ | 0.00 | | |
| 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS | (10b.) \$ | 0.00 | | |
| (Add Line 10a + Line 10b) DEBTS AND OBLIGATIONS | (11.) \$ | 0.00 | (24.) \$ | |
| 12. Debts and Obligations | | 445.55 | | |
| a. Owed by the Committee (Schedule 1E) | (12a.) \$ | 815.00 | | |
| b. Owed to the Committee (Schedule 1E) | (12b.) \$ | 0.00 | | |
| | BALANCE | STATEMENT | | |
| 13. Ending Balance of last report filed | (13.) \$ | 40.14 | | |
| (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period | (14.) + | 0.00 | | |
| (Line 5, Total Contributions & Other Receipts) | (15.) = | 40.14 | way. | |
| 15. SUBTOTAL Add Lines 13 and 14 16. Amount expended during reporting period | (16.) - | 0.00 | | |
| (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15) | (17.) \$ | 40.14 | _ * | |



DEBTS AND OBLIGATIONS SCHEDULE 1E CANDIDATE COMMITTEE

1. Committee LD. Number 139410-0

2. Committee Name CTE LEON DROLET

| This Schedule itemizes: | | | | | | | | |
|--|--|--------------------|--------------------|-----------------------------------|--|--|--|--|
| | | | | | | | | |
| a. 🔯 Debts and obligations owed b <u>y or</u> forgiven the committee OR b. 🗋 Debts and obligations owed to <u>or</u> forgiven by <u>the</u> committee. (Check either a or b. Use only for the purpose checked.) | | | | | | | | |
| | | | | | | | | |
| financial institution to whom debt is owed. | 4. Type of Obligation (Indicate type and you may | each payment | payment to | 9.Outstanding Balance at close | | | | |
| | assign an expenditure code) | | date on debt | of this period (Item 6 minus | | | | |
| Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please | Indicate date debt was incurred | | | Item 8) | | | | |
| provide information regarding the endorsers or | 6. Indicate original amount | | | | | | | |
| guarantors, if any. | of debt | . : | | | | | | |
| Debt # 1 Corp? ☐ Yes | 4. Type: loan to committee | 10/08/2021\$ 85.00 | 85.00 | 415.00 | | | | |
| Owed to or by: | | | 33.33 | .,,,,, | | | | |
| Leon Drolet | Code | \$ | | ! ! | | | | |
| | 5. Date Debt Was Incurred: | \$ | | | | | | |
| 46116 Lookout Drive | 07/17/2020 6. Original Amount of Debt: | _ | | | | | | |
| | o. Original Astroductor Debt. | \$ | | ☐ FORGIVEN | | | | |
| | \$ <u>500.00</u> | \$ | | | | | | |
| Macomb Twp. Mi 48044 | | ! | L I | | | | | |
| If bank loan, name of endorser or guarantor. | | An | nount Endorsed: \$ | | | | | |
| D-1440 | 4. Type: Loan to Committee | \$ | 0.00 | 400.00 | | | | |
| Debt#2 Corp? 1 Yes Owed to or by: | | 3 | 0.00 | 700.00 | | | | |
| Lean Drolet | Code | \$ | | | | | | |
| | 5. Date Debt Was Incurred: | s | | | | | | |
| 46116 Lookout Drive | 08/17/2020 | | · | | | | | |
| | 6. Original Amount of Debt: | \$ | | ☐ FORGIVEN | | | | |
| | \$ <u>400.00</u> | \$ | | | | | | |
| Macomb Twp. MI 48044 | Į. | | i | | | | | |
| If bank loan, name of endorser or guarantor: | | An | nount Endorsed; \$ | | | | | |
| | 4 Times | | | | | | | |
| Debt# Corp? Yes Owed to or by: | 4. Type: | \$ | | | | | | |
| Owed to or by: | Code | <u> </u> | | | | | | |
| | 5. Date Debt Was Incurred: | \$ | 1 | | | | | |
| | 6 Original Amount of Data | | | | | | | |
| | 6. Original Amount of Debt: | | | ☐ FORGIVEN | | | | |
| | \$ | \$ | | | | | | |
| | 1 | 1 | | • | | | | |
| If bank foan, name of endorser or guarantor: Amount Endorsed: \$ | | | | | | | | |
| Page Systematical (Outleforwing debt) | | | | | | | | |

Grand Total of all Schedules 1E (Complete on last page of Schedule showing amounts owed by or to the committee.)

815.00 Enter this total

815.00

PLEASE REFER TO INSTRUCTIONS FOR LIST OF EXPENDITURE CODES

A debt or obligation must be shown on this Schedule if there was an outstanding amount owed on it at the closing date of this Campaign Statement or it was forgiven during the period covered by this Campaign Statement.

line 12b "owed to" of the Summary Page

on line 12a "owed by" or

Page 1 of 1

Authority granted under P.A. 388 of 1976

CFR REV 7/1989c-1e